



Embrace Breastfeeding

The Legacy of Persistence

Vol: 1, Issue: 3

March 2023

DigitALL: Technology and Innovation for Gender Equality" We wish everybody Happy Women's Day

Contributed by: Rainbow & BirthRight - Vijayawada & Vizag







Article of the Quarter More Power to our



Breastfeeding Exclusive Breastfeeding and Maternal Mental Health

Team Vijayawada from Left to Right: Dr. B.S.C.P Raju, Dr. S. Ramprasad, Dr. Vamsi Siva Rama Raju, Dr. Uma Mikkilineni, Dr. Nirupama Vaddi, Dr. Sneha Maddukuri, Dr Manu lasti

"I alone cannot change the world. But, I can cast a stone across the waters to create many ripples. Happy women's day, women!"

- Mother Teresa.





Special Thanks for the Issue-3 of Volume - I of Embrace Breastfeeding



Designed by Banapuram Vishnu - Designer Executive





Dr. Nitasha Bagga

MBBS, DNB (Pediatrics), IAP (Neonatology), Consultant - Pediatrician and Neonatologist

Dear Friends, Colleagues and Supporters,

The words transformation, strength, courage, and gratitude come to mind as I reflect on the journey of last 3 quarters of our Breastfeeding Exclusive Newsletter "Embrace Breastfeeding". I want to express deep gratitude for our Editorial Board and Breastfeeding support group team, without whom this journey would not have been possible. I thank the team from **Vijayawada and Vizag** for their whole hearted contribution to this issue. Inspite of being busy clinicians, continued and tireless dedication of all our writers has made this possible.

Our mission to support breastfeeding is fully aligned with theme of this International Women's Day. 'Digit ALL: Innovation and technology for gender equality. You will enjoy reading many voices united to speak gender equality, a world free of bias, stereotypes and discrimination while supporting breastfeeding through various innovative technologies.

The foreword Dr. Ramprasad and Dr. Raga Sudha and our themed write up by Dr. Vamsi, resonates with the same. Review of the book "The Big Letdown" by Ms. Archana is worth knowing the facts that how medicine, big business, and feminism undermine breastfeeding. Ms. Shreya enlightens everyone with various alternate breastfeeding techniques through her beautiful article "More Power to Super Moms". I appreciate the efforts of Dr. Varalakshmi Nandyala, for penning down so crisply the most common maternal mental health problems and their effects on breastfeeding.

I'm happy to introduce our new column by Dr. Shobana Rajendran, explaining various breastfeeding accessories available for moms.

And last but not the least our yummy cooking recipe "No Bake Lactation Cookies" will be surely enjoyed by new moms. Do read up few myths and facts and tender stories contributed by our lactation consultants.

After successful launch of 2nd Human Milk Bank at Rainbow Children's Hospital, Chennai, I along with the team of Breastfeeding support group congratulate Marathalli team for taking an initiative of **opening 3rd Human Milk Bank.** We thank Management of Rainbow group of Hospitals for supporting Human Milk Banking under the umbrella of Rainbow Children's Hospital and BirthRight.

That's all from my side for this quarter, I take you leave to see you again in next quarter with my favourite words.

"Equal Rights Are Not Special Rights" Happy International Women's Day. This day belongs to all the 'Powerful Women'.





Dr. S. Ramprasad Neonatologist, Pediatric Intensivist & Pediatrician Rainbow Children's Hospital, Vijayawada.

11

MOM (Mother's Own Milk) for every baby.

Colostrum is the first immunization to the child. Colostrum is the first 3 days of breast milk that mother gets and it contains lot of nutrients which increase the immunity to the neonate, hence it is the first immunisation. Prelacteal feeds have to be avoided and Only Exclusive breast feeding has to be Encouraged. It is the right of the child to get breastfeeds as soon as he/she is delivered.

At Rainbow Children's Hospital we always encourage mothers to give exclusive breastfeeds. IN fact counselling sessions will be started right at the time of First Antenatal Visit and it will be continued till the mother delivers a healthy baby.

After introduction of LATCH score our breastfeeding rates have increased significantly. we have our lactation nurse who takes counselling sessions daily to the mothers and assess the LATCH SCORE and help in establishing exclusive breastfeeds.

it's proven beyond doubt that exclusive breast feeds for the first 6 months of life has advantages in both short term and long term for both baby and mother. In fact babies who are fed with exclusive breastfeeds for first 6 months and Continued for 2yrs, in long term are protected from metabolic syndrome which consists of obesity, hypertension and diabetes.

I congratulate breastfeeding support group of Rainbow Children's Hospital for the wonderful initiatives taken to promote Exclusive breastfeeding across our group and the country through various initiatives.





Dr. Chuppana Raga Sudha

Sr. Consultant Obstetrician and Gynecologist - Rainbow Children's Hospital -

11

Embrace breast feeding and embrace equity

"Breast feeding reminds us of the universal truth of abundance; the more we give out, the more we are filled up, and that divine nourishment - the source from which we all draw is, like a mother's breast, ever full and ever flowing." - Sarah Buckley

While a mother's love is sacrificial, support from the family and the spouse is of great importance for a breast-feeding mom. There are factors that help in successful or unsuccessful breast feeding. The two most important factors for a successful breast feeding are early initiation of breast feeding and a mother with a calm mind especially during the initial phase.

Support in Initiation of breast feeding:

The first few days in the breast feeding journey is as important as the entire journey in itself. Support from the family, especially from the spouse will help in successful breastfeeding. The mother is exhausted due to the effects of pregnancy and delivery on her entire system. It takes time to return to normalcy. While the mother is still dealing with herself during the post natal period, she also has to tend to the needs of her baby. Lactation is initiated when the mother breast feeds her baby within the first few hours of birth. The baby needs to latch and suck. The proper positioning of mother and baby and the ability of the baby to latch and suck is very important in the initiation of lactation. When the baby suckles, it initiates the release of prolactin and oxytocin.

Support in keeping the mother calm:

Support from the family can not only help in keeping anxiety levels under control but also in maintaining a calm mind. Anxiety free, calm mind plays a vital role in enabling the lactation hormones such as prolactin and oxytocin to do their job well. Assistance especially during the initial days can help in following a consistent schedule. Spouse can help by providing support in burping and changing diapers.

The two most common reasons that hinder effective breast feeding are pain related issues and perceived insufficient milk supply. Challenges of breast feeding can be overcome by patience and perseverance of a well informed mother. It often takes some practice and a few weeks to get it right. Many women feel that their milk is not sufficient for the baby. In most cases this could be a perception. This thought of perceived insufficiency of milk leads to starting formula feeds immediately. When they start formula feeds instead of breast feed, then breast milk supply reduces milk as breast feeding works on a supply and demand system. The more the baby drinks milk, the more breast milk gets produced.

Embrace equity:

'Embracing equity' being the theme of this year's international women's day, once again emphasises the need for both men and women to work together in all walk of life – even in nurturing a new born. At this juncture, when the world is moving at a faster pace more than ever before towards gender equality it would not be wrong to say that equality has no gender. In other words, everyone has equal rights, responsibilities and opportunities. This being the scenario, both the mother and the father play an equally important role right in the life of a child right from inception to child birth and the journey thereafter.

INDEX

S.No	Content	Page No
1.	Themed Article - Breast Feeding and Gender Equality	07
2.	Sustenance of Breastfeeding – Perspective	08
3.	Mixed Bag - Maternal Instinct	10
4.	Book Review	11
5.	Article of the Quarter	12
6.	Embrace Breastfeeding Exclusive	14
7.	Happy Stories	15

Q. Do I need to watch what I eat and drink if I am breastfeeding?

Ans. There aren't any foods that you must avoid. The key is to eat a variety of healthy foods and not eat too much of one thing. Drink to thirst. Healthy beverages without caffeine are better, like water, non-fat milk or 100% juice. One or two caffeinated drinks a day are not likely to cause your baby to be fussy or wakeful. It is better not to drink alcohol. A small glass of beer or wine for a special occasion is usually not a problem.

Q. Can I breastfeed if my baby is born preterm?

Do You Know

> s. Yes. It depends on how early your baby is born preterms your baby will be able to breastfeed right away or not. If your baby is born very early, you may need to use a breast pump to build up and keep a full milk supply until your baby can exclusively breastfeed.

Do You 🤈

Know

BREASTFEEDING AND GENDER EQUALITY

Breastfeeding gives infants the healthiest start to life by stimulating brain development and acting as a baby's first vaccine. Breastfeeding protects the health and well-being of mother, baby and lowers the health care costs.

Women face multiple barriers to breastfeeding in the home, community, health care system and workforce. Indeed, millions of mothers around the world stop breastfeeding before they want to because they do not get the support and time they need to continue. Stress, fatigue and anxiety are major roadblocks for successful lactation.

We need to invest in programmes and policies that put women's rights, dignity, and choice at the centre. Supporting a woman's right to breastfeed is a measure of gender equality on a larger perspective. Building a breastfeeding-friendly society is everyone's responsibility.

The changing roles that women are experiencing across the world over the past half a century have opened up new exciting opportunities for more women in the paid labour force and in public life. Associations by many feminists that link lactation with exclusive maternity and formula feeds with women's liberation might lead to the hypothesis that women's changing economic and political status is a key reason why only 36% of newborns globally are exclusively breastfeed for the first six months. Changes in women's paid employment patterns have resorted to work-family-life conflict.

To an extent breastfeeding serves as a constraint that prevents mothers being able to realize other nonmaternal opportunities, this could reinforce gender inequality and/or continued low breastfeeding rates

The ideal vision is a world in which all mothers have the technical, financial, emotional and public support they need to breastfeed. Smart investments in breastfeeding programmes, assisting policymakers and NGOs in implementing solutions and galvanizing support to get real results in increasing rates of breastfeeding is the need of the hour.

In both rural and urban areas, women are often overburdened with family responsibilities like cooking and cleaning. For women employed outside the home, there is the added stress and pressure on their time which requires additional support in taking care of the new born. Studies show that when men have information on exclusive breastfeeding, they can support women by helping with housework, looking after children and even providing the much needed continuous emotional and physical support as a skilled assistant or a partner.

Society, tradition and culture can prevent men from providing this support. Although times are changing, and more men are taking up family responsibilities - a cooking dad is still not considered the norm. Government policies and laws worsen men's ability to support.

Breastfeeding at Work:

The key elements of support that breastfeeding mothers require on their return to work are:

1. Private Space

We need to provide suitable parenting rooms to breastfeed, express and store breast milk. Dedicated parenting rooms should be made available at all campuses and other workplaces.

2. Time

Breastfeeding staff should be provided with flexible work arrangements to balance their work and breastfeeding / expressing requirements. This includes paid lactation breaks during work hours, flexible start and finish times, time off to express milk or breastfeed at a child care centre or at a suitable parenting facility.

3. Support

The support groups and initiatives of the Institutions and work places should reflect the strong commitment in providing a favourable environment to enable women to continue breastfeeding.

Breastfeeding is a shared responsibility between parents. Children's health and well-being could be improved by addressing gender inequalities. Policies by the governments and work places to plug these lacunae and decrease the gender inequality, supporting both parents to play an active role in breast feeding is the need of the hour.



Dr V Vamsi Sivarama Raju Consultant Neonatologist & Pediatrician Rainbow Children's Hospital, Vijayawada.

Exclusive Breastfeeding Rates @ Rainbow, Vijayawada

From December 2022 to February 2023

S.No	Particulars	No of Deliveries	%
1	Normal Vaginal Deliveries (NVD)	152	
2.	Lower (Uterine) Segment Cesarean Section (LSCS)	169	
3.	NVD : LSCS	152 : 169	
4.	Exclusive Breast Feeding	263	81.68%
5.	Formula Feed	59	18.32%



INITIATION OF BREAST FEEDING - NVD

S.No	Particulars	No of Babies Breast Fed	%
1.	< 30 Minutes	151	99.35%
2.	30 Minutes - 1 hr	0	0%
3.	> 1 hr	1	0.65%
	0.65%	 <30 mins 30-1hr >1 hr 	

INITIATION OF BREAST FEEDING - LSCS

S.No	Particulars	No of Babies Breast Fed	%
1.	< 30 Minutes	0	0%
2.	30 Minutes - 1 hr	161	95.30%
3.	> 1 hr	8	4.70%
	4.70%	 <30 min 30-1hr >1 hr 	

Exclusive Breastfeeding Rates @ Rainbow, Vizag

From December 2022 to February 2023

S.No	Particulars	No of Deliveries	%
1	Normal Vaginal Deliveries (NVD)	64	
2.	Lower (Uterine) Segment Cesarean Section (LSCS)	127	
3.	NVD : LSCS	64 : 127	
4.	Exclusive Breast Feeding	111	58.00%
5.	Formula Feed	81	42.00%



INITIATION OF BREAST FEEDING - NVD

S.No	Particulars	No of Babies Breast Fed	%
1.	< 30 Minutes	62	96.87%
2.	30 Minutes - 1 hr	2	3.13%
3.	> 1 hr	0	0%



INITIATION OF BREAST FEEDING - LSCS

S.No	Particulars	No of Babies Breast Fed	%
1.	< 30 Minutes	54	42.52%
2.	30 Minutes - 1 hr	17	13.38%
3.	> 1 hr	56	44.10%
	44.10% 42.52% 13.38%	 <30 min 30-1hr >1 hr 	

No Bake Lactation Cookies

Ingredients

1 cup - barley powder or quick oats
1/4 cup Ground Flaxseed
1 1/2 tablespoons Debittered Brewer's Yeast
1/4 cup Dark Chocolate Chips
2 tablespoons Pumpkin Seeds
2 tablespoons Chopped Almond - or dried fruits like cranberries or raisins
1/4 cup Maple Syrup
1/4 cup Mathematication

 $1\!\!\!/_2$ cup Natural Peanut Butter

2 tablespoons Unsweetened Almond Milk - at room temperature 1 teaspoon Vanilla Extract

Instructions

Line a cookie sheet with parchment paper. Set aside.

In a mixing bowl, stir in old-fashioned oats, ground flaxseed, Brewer's yeast, Pumpkin Seeds, chopped almonds, and chocolate chips.

Set aside.

In another bowl, combine peanut butter, almond milk, maple syrup, and vanilla extract.

Pour the liquid ingredients into the dry ingredients and stir with a spatula at first, then squeeze with lightly oiled or wet hands to help the ingredients come together. The dough is sticky, and that's normal.

Set aside for 10 minutes in the fridge to give the flaxseed meal time to absorb the liquid.

Then, lightly oil your hands again with coconut oil, roll 12 balls between your hands, and place each ball on the prepared cookie sheet, leaving a thumb space between each. Then, flatten each ball with your hand to form a cookie.

Refrigerate for about 1 hour to set the cookies.

Storage

Store in an airtight container in the fridge for up to 6 days or freeze for later. Thaw at room temperature before eating.



- Ms Meraj Fatima Senior Dietician and Lactation Consultant Rainbow Children's Hospital and BirthRight by Rainbow

Tender Story - A journey towards successful breastfeeding

Personal Experience

I am the co-founder of Hitwicket, a mobile gaming startup based in Hyderabad. When we decided to have a baby, we narrowed down our choice to Birthright based on the positive feedback we heard from our close family and friends.

I delivered a baby boy at the Rainbow Hospital in Dec'22. With the help of the nurses, we tried breast feeding the baby, however the baby wasn't able to latch properly. Since his jaundice was on the higher side, it was very important to feed him more and hence I expressed milk so that he can drink a good quantity of milk. He recovered soon from jaundice but became more comfortable in taking the expressed milk.

I got a bit stressed to see the baby not taking direct breastfeeding. Kashyap, my husband, was very proactive and wanted to help address the problem we were facing with breastfeeding. Even though I was drained and exhausted, he suggested that we immediately meet the lactation consultant, Dr Meraj Fatima and seek her advice.

Dr Meraj Fatima was very helpful and she shared some great tips on how we can make the baby comfortable and make him breastfeed. I can't thank her enough for the encouragement and patience she showed in helping the baby breast feed. Her composure and reassurance gave me the much needed confidence I needed as a first time mother. I met her a couple of times over the next 1-2 weeks and her guidance helped me in breastfeeding my baby.

I'd also like to thank Dr Nalinikanth who advised me to only breastfeed the baby and stay away from formula milk and for constantly emphasizing on the benefits of breastfeeding..

Keerti Singh

Age: 36 yrs

Occupation: Co-founder, Hitwicket (mobile gaming startup) Qualification: MBA from ISB, Hyd and B-Tech from VIT, Vellore

The Big Letdown – Kimberly Sears Allers

"The Big Letdown" is a comprehensive and thought- provoking book. It summarises the challenges and difficulties faced by women after child birth. Through a combination of research, personal anecdotes and interviews with medical Professionals, author Kimberly sheds light on the often-neglected topics of postpartum care, breastfeeding support for new mothers.

This book also covers a wide range of issues from physical and emotional recovery to the impact of societal expectations and cultural norms on the postpartum experience.

Allers does a great job by presenting a well nuanced view of the challenges faced by women, particularly how healthcare system can be improved to support new mothers. She also elaborated on how the artificial milk industry has grown leaps and bounds, which in turn decreased the importance of breastmilk and how one generation has been fed on artificial milk.

I found this book to be an eye-opening to many medical professionals who recommend breastmilk substitutes on the drop of a hat without going into details. It is a well-researched and provides valuable insights into a topic that is often overlooked and ignored.

Whether you are a new or expecting mother, a health care provider who works with mother-baby dyad, or someone looking to gain deeper understanding of breastfeeding challenges, this book is a must read.

This is indeed an engaging and informative read that provides a much-needed voice to the experiences of women in the postpartum period. I highly recommend this book to anyone who is looking to learn more about breastfeeding and postpartum care.



THE BIG LETDOWN

How Medicine, Big Business, and Feminism Undermine Breastfeeding





More Power to Our Super Moms Empowering Women with Alternate Breastfeeding Techniques.

Breastfeeding reminds us of the universal truth of abundance; the more we give out, the more we are filled up, and that is divine nourishment – Sara Buckle.

Breastfeeding provides unmatched health benefits for babies and mothers. It is the clinical gold standard for infant feeding and nutrition. Breastfeeding is associated with infant and maternal health outcomes which produce healthier populations that use fewer healthcare resources.

It is necessary to provide supportive and a safe environment for new mothers, New mothers are often overwhelmed by the responsibility of a new born and develop baby blues, the support of family, friends, and partners or lack of it can effect a mothers' state of mind and influence her choices. Both breastfeeding and giving a baby pumped breast milk offer extensive health benefits and both require a significant commitment from the person providing the milk.

Breastmilk Expression

Breast milk is the natural food for infants, and pumping can offer benefits that are similar, although not identical to providing breast milk directly from the breast.

Expressed and stored breast milk still carries the nutrients the baby needs, as long as it's stored properly. The major difference between nursing and breast pumping is the use of bottles. When the pumped milk is given through a bottle, infant is exposed to all the risks that come with bottle feeding like reoccurrence of ear Infections, overfeeding and the contamination of breast milk due to improper hygiene and storage. This is to be taken into consideration while opting to give expressed milk through bottle, however the benefits of giving expressed feed through bottle over giving formula are incomparable.

Breast pumps extract milk from the breasts by creating a seal around the nipple and applying and releasing suction to the nipple, which expresses milk from the breast, each suction and release combination is called a cycle which is very similar to the way baby suckles on the breast. Breast pump is an effective way to establish and maintain a good milk supply and the greatest convenience to a working mother; she can continue to offer breast milk to her child while multitasking her work obligations effortlessly. Research shows that babies initially use short, fast sucks to stimulate the milk ejection reflex, once the milk begins to flow, babies change to a slower rhythm, pump imitates baby's same natural sucking action and switches from a fast to a slow rhythm during pumping.

Demand Pumping

Breastfeeding runs on a principle of autocrine control i.e., demand and supply. Pumping after a nursing session (on empty breast) helps in stimulating the breasts to make more milk. Demand pumping helps in communicating to the body to make more milk and maintain the demand and supply cycle.

Power Pumping

Power pumping is recommended when the mother is trying to increase her milk supply. Power pumping attempts to mimic cluster feeding with a breast pump, cluster feeding is an effective system managed by the symbiotic nature of the baby and the breasts where the breast gets signals from the baby's frequent suckling to make more milk, especially during a growth spurt. The most common schedule is to dedicate a full hour to pumping where the mother pumps for 20 minutes and takes a break for 10 minutes. It's important that the mother is calm and relaxed while trying to power pump because stress hinders the let-down reflex which is crucial for power pumping to work.

Health care professionals should give out comprehensive information to all antenatal and new mothers which helps them make a informed choice. It has been observed that breast pumping is the latest trend among the millennials and is often used for mere convenience. Its important to communicate to the mother that putting the baby to the breast is the first best way to feed an infant and giving breast milk through a bottle comes a close second and enables today's modern women to multitask.

REASONS WHY A MOTHER CHOOSES TO PUMP

- Separation of mother and baby
- Multiple births,
- Mother going back to work,
- Latching difficulties due to physiological reasons in the baby like cleft palate, tongue tie, low birth weight.
- Latching difficulties due to physiological reasons in the mother like inverted nipple
- · Mother wants to donate milk to a milk bank.
- If the mother is facing a low milk supply pumping will help in that.
- · Pumping helps in relieving engorgement.





Do

You Know

Ms. Shreya Proddutur - Lactation Consultant & Psychologist Rainbow Children's Hospital - Banjara Hills.

Q.

Ans

I am going back to work. Should I even start breastfeeding?

Yes. Some breastfeeding is always better than none. When you go back to work you have many choices:

- Full breastfeeding: Going to your baby or having your baby brought to you to breastfeed
- Pumping and breastfeeding: Giving pumped milk to your baby when you are apart and breastfeeding when you are together.
- Full pumping: you can exclusively pump and give your baby expressed milk.

Know Your Breast-feeding Accessories

It is a silicon flexible shield that is placed on the areola and nipple as a short-term solution to improve latch and breast feeding. The silicon has a base that wraps around the areola and cone shaped area for the nipple.



Types/sizes

Nipple Shield

Single piece is easy to use than the assembling double piece shield. Shields come in various sizes. The size is dependent on the base measurement of the nipple in mm. The appropriate shield should be at aleast 4-5mm more than the measured nipple size such that the nipple does not rub along the sides of the shield.

Uses

Though it is traditionally told that it is breast feeding and not nipple fielding these nipple shields come handy in latching issues .

Inverted /short/retracted nipple/ very soft breast- where the shield makes the nipple longer firmer

Tongue tie.

Preterm babies where more stimuli are needed, the shield help to bridge latch

Sore cracked or bleeding nipple -wearing a shield will help healing the nipple.

Concerns of using a shield

It acts as a barrier between the baby and the breast It is difficult to wean the baby off the shield

It is little cumbersome to use and incorrect use may cause sore nipple and mastitis.

Cleaning

Nipple shield needs to be sterilised before first use. It needs to be cleaned with soap and water after every use and ensure dryness before use

How to choose the right fit of nipple shield.





Dr. Varalakshmi Nandyala Consultant - Obstetrics and Gynecology Rainbow Children's Hospital, Kondapur, Hyderabad.

Breastfeeding and Maternal Mental Health

More than 1 in 10 mothers are likely to experience perinatal mental health problems. Maternal mental health and breast feeding have a tight but mixed relationship.

Why is Breastfeeding important?

- Breastfeeding has been shown to have a positive effect on the mental well being of both mother and baby when breastfeeding is going well.
- Breastfeeding is a buffer, protective for a baby whose mother is experiencing perinatal mental health problems.

How do Breastfeeding hormones help?

- Breastfeeding releases oxytocin which opposes cortisol, lowering the stress response, and reducing blood pressure and anxiety.
- Prolactin aids return to sleep and mothering instincts.

Causes of negative impact of breast feeding on maternal mental health ?

- 1. The experience does not meet her expectations
- 2. Breast feeding challenges like-
 - Nipple pain
 - Latching difficulties
 - · Diminished milk supply
 - Unsuccessful breastfeeding initiation
 - · Lack of support

These challenges may lead to a shorter duration of breastfeeding than intended or desired, and subsequent feelings of inadequacy or failure.

What support can be offered?

Breastfeeding recommendations must be individualized

Address the challenges she is experiencing both by the health care professional and lactation specialist.

Family support and help

Postpartum psychiatry conditions effecting breast feeding-

Postpartum blues- 40-80%

Baby blues or "maternity blues," is a phase of emotional lability following childbirth, characterized by frequent crying episodes, irritability, confusion, and anxiety.

The symptoms arise within the first 10 days and peak around 3-5 days, last for less than 2 weeks.



Early initiation of breast feeding, addressing feeding problems, family support are crucial in these women. Medication is not needed.

Postpartum Psychosis

PP has an acute and abrupt onset, usually observed within the first 2 weeks following delivery or, at most, within 3 months postpartum, and should be regarded as a psychiatric and obstetrical emergency.

General

Breast feeding recommendations for women with psychiatry disorders-

- When a woman shares her intention to breastfeed, and especially if it is her first time, she should be informed about the full range of possible experiences, including common challenges and stressors
- Honesty and transparency about breastfeeding will likely mitigate feelings of guilt or failure that many women feel when their breastfeeding experience does not match their plans and expectations
- Additionally, all perinatal mental health assessments should include questions about feeding intention and experience, so that women are not bearing the burden of bringing up a potentially difficult topic.

Psychotropic medication and Breast feeding-

The decision to breast-feed while taking psychotropic medications is complicated.

Treatment guidelines-

Multidisciplinary management involving the obstetrician, mental health clinician, primary health care provider, and pediatrician is recommended to facilitate care.

A single medication at a higher dose is favored over multiple medications for treatment of psychiatric illness during pregnancy. Changing medications increases the exposure to the offspring

Do not stop the medication assuming it may harm the baby. Need for continuing the medication.

safest options and alternative therapies need to be discussed with the psychiatrist and obstetrician.

Non pharmacological options (Cognitive behavioral therapy, interpersonal therapy) may be considered. నా పేరు స్వాతి నేను రెయిన్జో హాస్పిటల్ లో డెరివరీ అయ్యను, నేను బేబై కి పాలు పట్టడం తెరియక డబ్జా పాలు పడుతుండగా రెయిన్జో హాస్పిటల్ డాక్టర్స్ నా బేజీ కి డబ్జా పాలు కాదు తల్లి పాలు పట్టారి అని చెప్పారు నేను నా బేజీ ఎంతో ఆరోగ్యంగా ఉన్నాము. తల్లి పాలు యొక్క విలువలు గురించి ఆసుపత్రి సిబంది పంటో చక్కగా చూపినందుకు రెయిన్జో హాస్పిటల్ కి చాల ధన్యవాదములు

- ఇట్లు

ನ್ಸಾತಿ

Myself Keerthi, I Delivered at Rainbow Hospitals, the mode of delivery was LSCS at that time I went through a painful process during that time sister's supported me very much in feeding process. They explained the importance of mother feed and the bonding between the mother and the baby. They also explained the techniques of breastfeeding and How to monitor the baby feeding Initially I used to give feed in lying down position they warned me that it was dangerous. If they are not corrected I used to do that which is very problem for the baby thank you so much Rainbow Team Doctors and Sisters for your wonderful guidance. Now I and my son was very happy and healthy.

- U. Keerthi

నా పేరు అర్హన నేను రెయిన్జో హాస్ఫిటల్స్ లో డెరివరీ అయ్యను నా బేజీ కి పాలు పట్తడం తెరియక డబ్బా పాలు పడుతుండగా రెయిన్జో హాస్ఫిటల్ డాక్టర్స్ నా బేజీ కి డబ్బా పాలు కాదు తల్లి పాలు ఎలా పట్టాలో నాకు బాగా నేర్పించారు. నేను నా బేజీ ఇపుడు బాగునాము. తల్లి పాలు యెంత విలువైనదో దాని గురించి ఎన్ని లాభాలు ఉన్నాయో సిటీర్స్ అండ్ డాక్టర్స్ బాగా చెప్పారు. దాని గురించి నేను నా బేజీ బాగా హ్యాపీగ ఉన్నాము.

రెయిన్లో హాస్పిటల్స్ అందలికి నా ధన్యవాదములు

- ఇట్లు అర్షన

My Name is **Prasanna Kumari.** My Delivery done in swaksha hospital. In that time my baby had breathing difficult so my baby kept in NICU. In that hospital ICU care is not good. I want to admit in rainbow children's hospital to further treatment. In that time I am giving formula feed to my child. When I reached rainbow children's hospital, In that hospital staff explained about importance and benefits of Mother Milk. From then I started giving my own milk to my baby. Iam currently following the techniques that had been taught by team rainbow during breastfeeding. Which is been very helpful for me even after my discharge. **Thanks Team Rainbow**

Prasanna Kumari

UPCOMING EVENTS & ACHIEVEMENTS



Launch of Human Milk Bank in Rainbow Children's Hospital, Marathalli, Bengaluru on 31st March 2023

This will help to serve many extreme premature babies with exclusive human milk across the branches of Rainbow Children's Hospital in Bangalore. Congratulations to the team of Obstetricians and Neonatologists for the efforts in taking generous initiative.

Activities @ Vijayawada

Activities @ Vizag







Chennai Milk Bank Team

Update on Chennai Human Milk Bank from the time of Inception to till date

Total Milk Collected:	22860 ml
Total Milk Dispensed:	15780 ml
Total No of Donors:	40
Total No of Babies benefited:	22

Rainbow Children's Hospital Log on to: www.rainbowhospitals.in/breastfeedingsupportgroup



