

# Common problems Encountered during Lactation and their Management in a Lactation Management Center

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## Abstract:

**Background:** Breastfeeding is widely known to be beneficial for infants and the mothers and also economically advantageous for the community.

**Objective:** The principal purpose of this study was to explore the common problems encountered during lactation and their management in a lactation management center.

**Method:** A cross sectional study was conducted at lactation management center of Institute of Child and Maternal Health (ICMH), Dhaka. A total of 100 lactating mothers were recruited consecutively during the period of August 2008 to October 2008. Data was collected by history taking and required examination.

**Result:** In this study, 46.0% mothers complained of poor milk secretion, 13.0% had breast engorgement, 9.0% had cracked nipple, 3.0% had inverted nipple, 2.0% had nipple infection, 2.0% had flat nipple, 1.0% had sore nipple, 1.0% had breast abscess and in 23% cases there was no reasonable cause. During interview twenty seven percent of the mothers were advised to start nursing as soon as possible; 45.0% mothers breast fed on demand, 75.0% mothers demonstrated proper breast feeding technique, 36.0% mothers avoided use of artificial milk, 10.0% mothers applied last part of milk on nipple, then dry by exposing to air, 12.0% mothers manually express milk from the areola before breast feed if it is engorged and 1.0% advised to slip the index or little finger into the infant's mouth between his/her gums before the infant is taken off of the breast, to break suction.

**Conclusion:** Almost half of the mothers complained of less milk production. Apart from this 13.0% mothers had breast engorgement, 9.0% mothers had cracked nipple and no reasonable cause for lactation problem was found in 23.0% cases. More than half of the mothers had incorrect knowledge and skill of breast feeding.

**Key words:** Lactation management, breast feeding in adequate milk production.

## Introduction:

The United Nations Children's Fund's (UNICEF) conceptual model on child nutritional status outlines the direct causes of under-nutrition as inadequate food intake, poor health status, and lack of care. Care is also identified as an indirect cause since it may contribute to the child's nutritional status through provision of adequate food and good health care.<sup>1</sup>

Inappropriate infant feeding practices may contribute to higher morbidity, lower nutritional status, even death. It is then highlighted by the World Bank (2006) that the window of opportunity for improving nutrition is small—from before pregnancy through the first two years of life. There is consensus that the damage to physical growth, brain development, and human capital formation (such as intelligence, educability,

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and productivity) that occurs during this period is extensive and largely irreversible. Among infants, care related to breastfeeding practices is very important since breast milk is the most predominant source of nutrition for them. Breastfeeding is widely known to be beneficial for infants<sup>2,3</sup> and the mothers<sup>4</sup>, and also economically advantageous for the community.<sup>4</sup>

Women become mothers with little or no knowledge to breastfeed, which makes them more vulnerable to difficulties during the process. Health professionals play a crucial role in the prevention and management of such difficulties, but to do that, they need specific knowledge, attitudes and skills.<sup>5</sup>

Clinical lactation management is the science and art of assisting women and infants with breastfeeding. Until recently, lactation and breastfeeding rarely were addressed in medical school or residency training.

Aim of this study to identify the common problem during lactation and their management which may ensure infants desired nutrition, health and development.

#### Method:

This was a cross-sectional descriptive study conducted for a period of one year from 1<sup>st</sup> August 2008 to 31<sup>st</sup> July 2009 in the Lactation management center, ICMH, Dhaka. One hundred lactating mothers were selected for this study. After taking their informed consent they were finally selected and detail history (menstrual history, obstetric history and lactation history), physical examination of both mother and baby were done. All data were recorded systematically in preformed data collection form. Quantitative data were expressed as mean and standard deviation and qualitative data as frequency distribution and percentage. Statistical analysis was performed by using SPSS 15.0. Statistical significance was set at 0.05 level and confidence interval at 95% level.

#### Result :

Out of one hundred lactating mother 39.0% were at the age group d"20, 57.0% were between age 20-30 years and 4.0% were >30 years of age. Among the study subjects 94.0% were housewives and 6.0% were working mothers (Table-I). Seventy two percent of the babies were born in hospital and 28.0% were at home. Normal vaginal delivery was 54.0% and 46.0% by

caesarian section (CS) (Table-II). Thirty eight percent of the babies had got formula feed/extra feed and 62.0% got exclusive breastfeeding (Table-III). Regarding knowledge about technique of breast feeding, 58.0% mothers had incorrect knowledge (Table-IV). Ninety one percent of the mothers think breastfeed is better for baby, 4.0% as natural, 1.0% conventional, 3.0% easy and 1.0% cheap (Table-V). Eighty two percent of the mothers wished to continue breast feed despite the problems and 18.0% refused to breastfeed. Of them 16.7% was afraid of having problem again, 55.6% had not enough milk and 27% babies were ill (Table-VI). Twenty seven percent mothers were advised to start nursing as soon as possible, 45% breast fed on demand, 36.0% avoided use of artificial milk, 10.0% applied last part of milk on nipple, then dry by exposing to air, 12.0% manually expressed milk from the areola before breast feed if it is engorged and 1.0% advised to slip the index or little finger into the infant's mouth between his/her gums before the infant is taken off of the breast to break suction (Table-VII). Lactation problems were due to flat nipple (2.0%), inverted nipple (3.0%), cracked nipple (9.0%), sore nipple (1.0%), nipple infection (2.0%), breast engorgement (13.0%), breast abscess (1.0%) and perceived poor milk secretion (46%) (Table-VIII).

**Table-I**  
*Demographic profile of the mothers*

	Frequency	Percentage
Age (in year)		
d"20	39	39.0
20-30	57	57.0
>30	4	4.0
Mean $\pm$ SD (Range)	22.82 $\pm$ 4.21	(16-38)
Occupation		
Housewife	94	94.0
Service	6	6.0

**Table-II**  
*Information regarding delivery*

	Frequency	Percent
Delivery takes place		
Hospital	72	72.0
Home	28	28.0
Mode of delivery		
NVD	54	54.0
C/S	46	46.0

**Table-III**  
*Frequency of formula feed/ extra feed provided to baby*

	Frequency	Percentage
Yes	38	38.0
No	62	62.0
Total	100	100.0

**Table-IV**  
*Knowledge of mothers about technique of breast feeding*

Knowledge about technique of breast feeding	Frequency	Percentage
Correct knowledge	42	42.0
Incorrect knowledge	58	58.0

**Table-V**  
*Interested in breast feeding*

Interested in breast feeding	Frequency	Percentage
Better for baby	91	91.0
Natural	4	4.0
Conventional	1	1.0
Easy	3	3.0
Cheap	1	1.0
Total	100	100.0

**Table-VI**  
*Wish to continue breast feeding despite the problems*

	Frequency	Percentage
Yes	82	82.0
No	18	18.0
If no, why?		
Afraid of having problem again	3	16.7
Not enough milk	10	55.6
Baby ill	5	27.8

**Table-VII**  
*Advice given to mothers*

Advice given	Frequency	Percentage
Start nursing as soon as possible	27	27.0
Breast feed on demand	45	45.0
Avoid use of artificial milk	36	36.0
Apply last part of milk on nipple, then dry by exposing to air	10	10.0
Manually express milk from the areola before breast feed if it is engorged	12	12.0
Before the infant is taken off of the breast, slip the index or little finger into the infant's mouth between his/her gums to break suction	1	1.0

**Table-VIII**  
*Problem in lactations (Mother reason).*

Problem in lactations	Frequency	Percentage
Flat nipple	2	2.0
Inverted nipple	3	3.0
Cracked nipple	9	9.0
Sore nipple	1	1.0
Nipple infection	2	2.0
Breast engorgement	13	13.0
Breast abscess	1	1.0
Poor milk secretion (Perceived)	46	46.0
No reasonable cause	23	23.0
Total	100	100.0

### Discussion:

Thousands of studies showed the high significance of breastfeeding benefits for child survival. Current study was carried out to explore common problems encountered during lactation and the proper management of these problems.

In our study, mean age of the mothers was  $22.82 \pm 4.21$  years which is similar to the lactating mothers reported by Februhartanty et al.<sup>6</sup> It was also found that housewife mothers were associated with longer duration of breastfeeding. In our study, most of the mothers were housewives.

In current study most common (46.0%) problem was poor milk secretion; it was reported 33.0% in Februhartanty et al.<sup>6</sup> series. A review by Giugliani<sup>5</sup> mentioned that breast engorgement, nipple pain/trauma, plugged milk duct, breast infection and poor milk secretion were the most common problems in lactation.

In our study, 38.0% of baby had got formula feed/extra feed and 62.0% got exclusive breastfeeding. Between the 2007 BDHS and the 2011 BDHS there was a sharp increase in exclusive breastfeeding, from 43.0% to 64.0%.<sup>7</sup>

Results of a few studies done at ICDDR,B and elsewhere in developing countries showed that the breastfeeding peer-counseling method could substantially increase the rates of exclusive breastfeeding. Results of a study in urban Dhaka showed that the rate of exclusive breastfeeding was 70% among mothers who were counselled compared to only 6% who were not counselled. Results of another study in rural Bangladesh showed that peer-counseling given either individually or in a group improved the rate of exclusive breastfeeding from 89% to 81% compared to those mothers who received regular health messages only (Faruque et al, 2008).<sup>8</sup>

#### **Conclusion:**

In current study different problems were identified which were encountered during lactation in lactation management center. Seventeen percent of the mothers suffered from problems in their nipple, 13.0% had breast engorgement and 46.0% had poor milk secretion. More than half of the mothers had incorrect knowledge and technique of breastfeeding. Ninety one percent mothers thought breastfeeding is good for their baby. Health Service providers should counsel pregnant.

#### **References:**

1. Engle PL, Menon P, Haddad L. Care and nutrition: concepts and measurement. *World Development*. 1999 Aug 1;27(8):1309-37.
2. Bhandari N, Bahl R, Mazumdar S, Martines J, Black RE, Bhan MK, other members of the Infant Feeding Study Group. Effect of community-based promotion of exclusive breastfeeding on diarrhoeal illness and growth: a cluster randomised controlled trial. *The Lancet*. 2003 Apr 26;361(9367):1418-23.
3. Bogen DL, Hanusa BH, Whitaker RC. The effect of breast feeding with and without formula use on the risk of obesity at 4 years of age. *Obesity research*. 2004 Sep;12(9):1527-35.
4. American Academy of Pediatrics. Policy statement: Breastfeeding and the use of human milk. *Ped* 2005 Feb; 115 (2): 496-506.
5. Giugliani ER. Common problems during lactation and their management. *Jornal de pediatria*. 2004 Nov;80(5):s147-54.
6. Februhartanty J, Bardosono S, Septiari AM. Problems during lactation are associated with exclusive breastfeeding in DKI Jakarta Province: father's potential roles in helping to manage these problems. *Malaysian Journal of Nutrition*. 2006;12(2):167-80.
7. Bangladesh demographic and health survey 2014. National Institute of Population Research and Training, Ministry of Health and Family Welfare Dhaka, Bangladesh. 2016. 160.
8. Faruque AS, Ahmed AS, Ahmed T, Islam MM, Hossain MI, Roy SK, et al. Nutrition: basis for healthy children and mothers in Bangladesh. *Journal of health, population, and nutrition*. 2008 Sep;26(3):325.