



Breastfeeding

By Sara Chana, IBCLC

You've given birth and so, your life has changed forever. You have waited nine months, endured the pain of labor and now you have your gorgeous newborn lying gracefully on your belly waiting for his opportunity to breastfeed. You want only the best for your baby. But as your baby lies gently on your stomach, unseen bacteria are bombarding his skin! Is colonizing your baby with bacteria what you had in mind when you thought of giving your baby the "best?" You bet it is. "One of the few naturally sterile places on earth is a woman's womb," writes Stephen Harrod Buhner, in his book *The Lost Language of Plants*. "The gestation period prior to birth is the only time any human body is bacteria free. Ideally... the baby is immediately placed on the mother's chest near the nipple. During the same period that the first movements toward bonding are taking place, the bacteria that are living on the mother's skin begin to colonize her baby's body. (It is perhaps no coincidence that the largest numbers of bacteria on the human body live near the nipple and armpit). When the infant begins to nurse, the interior of the baby's

intestinal tract is colonized with bacteria as well, from the skin around the nipple and in the milk itself, and these bacteria are crucially important." As a full grown adult we carry one to two pounds of bacteria in and on our bodies; this bacteria is the first line of defense for our immune system and helps in the prevention of disease. This is one of the reasons why breastfeeding our children is so important.

Besides the important vitamins and nutrients that breast milk supplies, it also provides beneficial bacteria. More specifically, breastfeeding introduces lactobacilli and other bacteria into the intestinal tract of newborns.

Lactobacillus acidophilus bacteria create important vitamins such as B1, B2, B3, B12 and folic acid into their intestinal tract, which helps them digest food. The colostrum in the mother's first milk helps supply these lactobacilli which prepares the baby's





intestines for the rest of his life. That first breastfeed helps the baby get off to a great beginning, but is there any benefit for the mother? The answer is yes. Immediately after birth it will produce physiological benefits to the mother by: helping to contract the uterus back to its normal size, preventing hemorrhaging from the torn uterine blood vessels, and completing labor with the detachment and ejection of the placenta.

At birth the newborn infant's skin has to adapt to the environment that is more complex than the environment in the womb. This skin is made up of millions of sensors and must adjust to atmospheric changes, changes in pressure, air movements, gases, particles, viruses, and bacteria. Will touching the baby help him adjust or will this touching only serve to overwhelm a system that is first attempting to regulate a myriad of new stimuli? Does caressing the baby help with survival? The reality is that the skin is the largest sensory organ in the body, and the additional touching that a woman tends to do while she breastfeeds her baby; caressing his cheeks, holding his hands and counting his fingers, and stoking his legs, helps the baby grow and thrive.

Researchers have found that human babies deprived of touch, showed decreased growth hormone and developed a condition called psychosocial dwarfism; a condition in which they did not increase in size even after receiving injections of growth hormone. Only with the introduction of human touch did these infants grow.

This finding implies that touch causes something beneficial to occur at the cellular level, that allows the cells to respond to growth hormone. Simply stated, babies need to be handled, carried, caressed, and cuddled in order to grow and thrive. Yes, a woman who chooses to bottle feed her baby can caress and

hold her baby, but both the quantity and quality of that experience is even richer and more intimate during breastfeeding. When a woman breastfeeds, the front of her torso begins to warm, as her skin reacts to the contact with her child, lying on her stomach. As her baby lies there, her torso continues to heat up, a mechanism to help ensure a warm regulated temperature for her child. This happens as a skin-skin reaction, which also causes her oxytocin levels rise.

Not only is touch good for the newborn's body, but it also helps with neurological development. Researchers now believe that touch promotes the growth of myelin, the insulating material around nerves that makes nerve impulses travel faster. Touching also appears to help with digestion and babies receiving extra touch have exhibited enhanced secretion of digestive hormones and researchers believe that this is another reason why infants who are frequently touched show better growth.

Babies not only need to be touched; they also need to touch. This is one reason many cultures do not put gloves on their newborns; which is unfortunately the common custom now in America, for baby's hands to be clothed in tiny mittens. From the baby's touch, the mother produces the powerful hormone called oxytocin, which is needed for the production of breast milk. What's interesting is that as babies root, or reflexively turn and search for the nipple, they massage the mother's breast with their hands. Dr. Kerstin Moberg, one of the foremost authorities on oxytocin writes in her book *The Oxytocin Factor*. "During this time (as the baby massages the breast), repeated pulses of oxytocin are released into the mother's system. It seems that the baby creates these pulses, since the stimulation of the breast by the baby's hands and the sucking activity are strongly correlated to the number of oxytocin pulses."

Breastfeeding also stimulates the baby on both sides of his body. Ashley Montagu in his book, *Touching*, writes, "A breastfeeding mother holds the child at alternate breasts for feedings, thereby giving equal stimulation and exercise to both sides of the infant's face and head, as well as other parts of the body...the bottle feeding

mother tends to hold the child in whatever position is comfortable...holding the infant on one side most of the time may not be altogether to the advantage of the child."

With all that has been said up to this point, the one caveat that you should know is that breastfeeding is not instinctive but is a learned behavior. Yes, it is true that all babies have a desire to suckle, that much is instinctive, but most babies need to learn the skill of actually transferring milk from the breast into their stomachs. The problem is that most new moms don't know enough about breastfeeding to teach the correct technique to their child and if breastfeeding hurts, then the mother is not properly latching her baby onto the breast. Babies need stimulation way back in their throat to properly feed, and most women only allow their babies to stimulate the front portion of their baby's mouth! What does this mean?

If you stick your tongue up to the roof of your mouth you will feel that it is hard; this is the hard palate. Now, pull your tongue back to where it begins to feel soft, or the beginning of the soft palate. It is at this spot, between the hard and soft palates, where the baby needs pull in the breast tissue - way back toward the infant's throat. To help accomplish this proper placement of the nipple deep within the baby's mouth, a technique called RAM, or rapid arm movement can be used. In this technique the mother brings the baby onto the breast very quickly, so the baby does not have sufficient time to just stop and latch onto only part of the nipple. Once the baby experiences the sensation of having the breast tissue between his hard and soft palates, he will want to repeat that sensation, the result will be proper breastfeeding. If the mother cannot accomplish this placement for a proper latch, then she should seek help from a certified lactation consultant. And don't stop demanding help till the nursing is working perfectly, because it's what babies need to be the best that they can be, and that's what every mother wants to give to her child.

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