

<http://www.MyMammasMilk.com>

Breastfeeding Myths by Dr. Jack Newman

1. Many women do not produce enough milk.

Not true! The vast majority of women produce *more than enough* milk. Indeed, an *overabundance of milk* is common. Most babies that gain too slowly, or lose weight, do so **not because the mother does not have enough milk**, but because the baby does not get the milk that the mother has. The usual reason that the baby does not get the milk that is available is that he is poorly latched onto the breast. This is why it is so important that the mother be shown, **on the first day**, how to latch a baby on properly, by someone who knows what they are doing.

2. It is normal for breastfeeding to hurt.

Not true! Though some tenderness during the first few days is relatively

common, this should be a temporary situation which lasts only a few days and should never be so bad that the mother dreads nursing. Any pain that is more than mild is abnormal and is almost always due to the baby latching on poorly. Any nipple pain that is not getting better by day 3 or 4 or lasts beyond 5 or 6 days should not be ignored. A new onset of pain when things have been going well for a while may be due to a yeast infection of the nipples. Limiting feeding time does not prevent soreness.

3. There is no (not enough) milk during the first 3 or 4 days after birth.

Not true! It often seems like that because the baby is not latched on properly and therefore is unable to get the milk. Once the mother's milk is abundant, a baby can latch on poorly and still may get

Notable News!!!

:Boobies for Babies Kits are a Hit!

It was months in the making, but our Boobies for Babies Breastfeeding Welcome Kits are out and circulating and have been well received. Cape Cod Hospital, Triad OBGYN and Erin Monast, Doula have all taken many. Recently Jordan hospital liked them as well and may include

them in every maternity bag! Hooray! We are always looking to include more samples, brochures and coupons from other local and mom-based businesses. If you would like to contribute to these wonderful kits, please let Kate Conway know. She can be reached at 508-415-1295!

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Myths Continued . . .

plenty of milk. However, during the first few days, the baby who is latched on poorly cannot get milk. This accounts for "but he's been on the breast for 2 hours and is still hungry when I take him off". By not latching on well, the baby is unable to get the mother's first milk, called colostrum. Anyone who suggests you pump your milk to know how much colostrum there is, does not understand breastfeeding, and should be politely ignored.

4. A baby should be on the breast 20 (10, 15, 7.6) minutes on each side.

Not true! However, a distinction needs to be made between "being on the breast" and "breastfeeding". If a baby is *actually drinking* for most of 15-20 minutes on the first side, he may not want to take the second side at all. If he drinks only a minute on the first side, and then nibbles or sleeps, and does the same on the other, no amount of time will be enough. The baby will breastfeed better and longer *if he is latched on properly*. He can also be helped to breastfeed longer if the mother compresses the breast to keep the flow of milk going, once he no longer swallows on his own (Handout #15 *Breast Compression*). Thus it is obvious that the rule of thumb that "the baby gets 90% of the milk in the breast in the first 10 minutes" is equally hopelessly wrong.

5. There is no way to know how much breastmilk the baby is getting.

Not true! There is no easy way to *measure* how much the baby is getting, but this does not mean that you cannot know if the baby is getting enough. The

best way to know is that the baby actually drinks at the breast for several minutes at each feeding (open—*pause*—close type of suck). Other ways also help show that the baby is getting plenty (Handout #4 *Is my Baby getting enough milk?*).

6. Modern formulas are almost the same as breastmilk.

Not true! The same claim was made in 1900 and before. Modern formulas are only superficially similar to breastmilk. Every correction of a *deficiency* in formulas is advertised as an advance. Fundamentally they are inexact copies based on outdated and *incomplete* knowledge of what breastmilk is. Formulas contain no antibodies, no living cells, no enzymes, no hormones. They contain much more aluminum, manganese, cadmium and iron than breastmilk. They contain significantly more protein than breastmilk. The proteins and fats are fundamentally different from those in breastmilk. Formulas do not vary from the beginning of the feed to the end of the feed, or from day 1 to day 7 to day 30, or from woman to woman, or from baby to baby... Your breastmilk is made as required to suit *your* baby. Formulas are made to suit every baby, and thus *no* baby. Formulas succeed only at making babies grow well, usually, but there is more to breastfeeding than getting the baby to grow quickly.

Want to read more Myths??

Head to

<http://www.mymammasmilk.com> and click on MYTHS.

ABOUT MY MAMMA'S MILK (MMM)...

My Mamma's Milk seeks to support the whole woman and child relationship. This includes breastfeeding, attachment parenting, baby-wearing, co-sleeping and earth conscious decisions. My Mamma's Milk is a member of several Breastfeeding Organizations and Advocacy Groups. MMM also work closely with midwives, doulas, IBCLCs and La Leche Leaders and funds Cape Cod Breastfeeding Moms (Facebook).