

Struggling to breastfeed?

The pressure to nurse can be enormous on new moms, but there's no shame in doing what works best for your family.

BY JULIE M. GREEN



BREAST IS BEST. IT'S A FACT endorsed by governments and health-care experts the world over. Natural though it may be, breastfeeding doesn't always come easy.

A few years ago, Brazilian supermodel Gisele Bündchen ignited a debate by calling for breastfeeding to be legally enforced for the first six months of a baby's life. While she probably had the interests of babies in mind, her words effectively criminalized the actions of mothers who do not or cannot nurse. They also came from a mom who, presumably, didn't struggle to breastfeed.

If only Gisele had seen me, pouring over books and websites, and phoning lactation hotlines in the wee hours. If only she could have seen the bloody sores on my nipples, the tears streaking my cheeks for days on end. If only she could have heard the piercing cries of my newborn as he grew dehydrated. As a mother, there was no feeling worse than knowing I could not satisfy my own child. Giving up on breastfeeding was a decision I agonized over, a decision that ultimately left me feeling worthless and alienated.

After our babies were born, the moms in my antenatal group got together to sip tea and chat every week. Every so often, one of the other mothers would slip a nipple into her baby's mouth while I rushed around to warm my son's bottles. I sat through their tales of engorgement and cozy night feedings and I felt – or imagined I felt – their disdainful, pitying glances alight on me. Why could they do it, and I couldn't?

Breastfeeding may be what breasts are made for, but nature doesn't always go like clockwork. Complications can

arise, ranging from tongue- and lip-tie and insufficient glandular tissue, to jaundice, thrush, oversupply, forceful letdown and breast surgery.

Some women can't produce enough milk. It's a fact that Danielle Christopher, a mom of two from Langley, BC, knows all too well. She had breast reduction surgery a decade before giving birth, and was warned she might never be able to nurse, though there was a good chance. She remained hopeful.

"While I was trying to heal after giving birth, I had so much pressure to formula feed. After only three days, the home nurse scared me by saying I was not giving my daughter enough and I had to feed her with formula," says Christopher. "She had dropped three quarters of a pound. My milk had not come in. The nurse kept repeating that it should have been in by now. I was so burnt out from not sleeping for four days that I gave in." Deeply ashamed, she reached for the formula. Her husband gave their daughter the first bottle while Christopher sobbed.

When her milk finally came in, it wasn't enough to satiate her daughter. For a while, she breastfed while supplementing with formula. Her doctor prescribed medication to boost her supply, but it didn't seem to help. Eventually, she stopped breastfeeding altogether.

For mothers who do find success nursing, the duration of breastfeeding is often under scrutiny. While some moms yearn to quit, others face pressure to wean before they are ready, like the mom on the cover of the May 2012 issue of *TIME Magazine* who created a firestorm of controversy for her extended breastfeeding. But while media outlets ►



and “breast is best” messages play roles, pressure also comes from people whose opinions we value most: our friends, our partners, our own mothers. No wonder that breastfeeding difficulties are a leading cause of postpartum depression. In a recent study from the University of North Carolina at Chapel Hill, women with severe breast pain at two months postpartum were almost twice as likely to be depressed as those who didn’t associate pain with nursing.

Toronto’s Mara Shapiro has lived through the agonies and ecstasies of both sides of the breastfeeding debate. After her daughter was born, Shapiro struggled to get her to latch properly. Each feed took hours. Despite trauma to her nipples, she was encouraged by medical staff and lactation consultants to continue breastfeeding. Determined, she persisted for more than two weeks, until she met with a pragmatic, straight-talking paediatrician. He said, “Are you enjoying your baby?” That was her wake-up call.

“Breastfeeding is a highly personal thing,” says Shapiro. “You have to do what’s right for you and your baby and stop worrying about what everyone else is saying.”

It was only when she had her second child that Shapiro realized she hadn’t done anything wrong the first time. All infants – and indeed all breastfeeding experiences – are different. If breastfeeding doesn’t work out once, it doesn’t mean it won’t the next time. Shapiro went on to nurse her second and third children with ease.

Even Fleur Bickford, a registered nurse, lactation consultant and former La Leche League leader, struggled. “With my daughter, I had very damaged nipples in the beginning,”

says the mother of two from Ottawa. “My biggest mistake was my stubborn belief that I could resolve things on my own, and not getting help early. Breastfeeding is natural, but it’s also a learned skill. We are meant to learn about it by seeing other women nursing their babies, yet most of us grow up never having seen breastfeeding, so how do we know what to do?”

In such cases, it’s critical to know when to persevere and when to call it quits. Your doctor can steer you towards qualified lactation help, and Bickford suggests that if it doesn’t go well at first, it’s a good idea to try a second

lactation consultant to see if a different personality or level of experience helps.

But what if you’ve received the help you need, and it’s still not working? Deciding to stop nursing is a very individual decision, says Bickford, and a highly emotional one, since many mothers

want so badly to succeed. “Breastfeeding is a relationship, and it has to be working for everyone involved – mother, baby and the family as a whole,” says Bickford. “I encourage parents to listen to their hearts and instincts and make the decision that is best for their family.”

Though my nipples eventually healed, for a long time, the emotions surrounding my “failure” to breastfeed were still raw and tender. And while part of me still wishes things had gone differently, I’ve managed to move on. I have been graced with that wonderful thing called perspective, finally realizing that whether or not I breastfed isn’t a reflection of my worth as a mother or as a person. My son is now a healthy and fiercely loved kindergartener. He doesn’t look back, and neither do I. ■

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