

1: Breastfeeding and Jaundice: Causes and Treatment

The Natural Breastfeeding program is a perfect fit for these women because it uses simple, clear, concise videos and easy exercises to answer their questions, all.

Oral Rehydration Formula Recipes For adults, lost fluids and electrolytes can be replaced with virtually any beverage plus a source of sodium chloride salted crackers, etc. For children and babies who are no longer nursing, a commercial rehydration formula like Pedialyte is generally recommended. For nursing babies and children, breastmilk is best. Here is a recipe to make an oral rehydration fluid [source: Homeopathic remedies are reportedly very safe for nursing moms and babies because the remedies by definition of homeopathy contain only very dilute versions of the active substances. Many lactation consultants have used or recommended homeopathic remedies to their clients. Most experts believe that homeopathic remedies are unlikely to pose a problem for the nursing baby and mother. Vinegar rinse Mix 1 tablespoon white vinegar with about a cup of water. Lean over the cup and soak nipple in it for a minute or so, then stand over the sink and pour it slowly over the nipple. This can bring immediate relief. If you have itchy nipples, keep in mind that you might have thrush. This practice has also been reported to eliminate most uterine cramping and some premenstrual discomfort such as water retention. Otherwise the calcium will not be adequately absorbed into your body. If you are a vegetarian or vegan, the lower dosage may work fine for you. Start the supplement when you ovulate, and continue through the first few days of your menstrual period. Get as much rest as possible. Between feedings, use a cold compress on the breast to help with any inflammation. Some moms use hot compresses directly before nursing, but others prefer to stick to the cold. Make a rosemary *Rosmarinus officinalis* infusion: Infuse steep for 10 minutes, then strain. Use a fenugreek seed poultice ; Make a dandelion *Taraxacum officinale* compress: When your baby nurses on the affected side use that side first , massage the breast towards the nipple. Massage the breast often during feedings and between feedings to help loosen the plugged area. Raw garlic At least raw cloves per day, cloves a day if possible. Chop a clove into 5 or 6 pieces and then swallow the pieces whole like pills. Raw garlic acts as a broad-spectrum antibiotic, without the added antibiotic side effects of the development of antibiotic-resistant strains of bacteria, or the development of yeast infections or thrush. The antimicrobial property in garlic, allicin, is very sensitive to heat and is destroyed when cooked. In order for it to work, it needs to be raw. Swallowing the cloves with orange juice helps with the taste for some. Allicin is also what gives garlic its pungent odor, so the deodorized garlic capsules that some companies offer are essentially useless, if they are being taken for the antimicrobial properties. However, deodorized garlic is still beneficial for its blood pressure reducing properties and for stimulating the immune system. Mix a dropperful of echinacea tincture, three cloves of raw garlic and four to six ounces of carrot juice in a blender and drink the mixture every two hours. A very warm shower can help let the water just run over your breast. You can also take ibuprofen, which will help with inflammation and pain. If the mastitis does not improve or gets worse after using this treatment for hours, contact your doctor you may need antibiotic treatment. More information on treating mastitis can be found here: Mastitis and Plugged Ducts.

2: Breastfeeding naturally | Australian Breastfeeding Association

Confirming your breastfeeding technique and breastfeeding more often are the two most important actions necessary to establish and maintain a healthy supply of breast milk. How to Establish, Maintain, or Increase Your Breast Milk Supply Naturally.

Most mothers produce enough breast milk for their child. However, at times some mothers are unable to produce adequate quantities. Low breast milk supply can be due to certain illnesses, consumption of birth-control pills, certain hormonal changes in the body, nutritional deficiencies, improper latching position of the baby and infrequent breastfeeding due to cracked nipples. Inadequate breast milk can put your baby at a high risk of malnutrition, a weak immune system, poor memory and many other health problems. As breast milk is a very important nutritional source for newborn babies and infants, it is important to take steps to increase its supply. Your doctor can prescribe medications. But you may also be able to increase breast milk production yourself by practicing some easy and simple home remedies.

Advertisements Here are the top 10 ways to increase breast milk production.

Warm Compress In some cases, low blood circulation in the breasts is the main reason behind inadequate breast milk supply. If this is the reason, you can use a warm compress on your breast before feeding sessions to increase the blood supply. Massage your breasts gently for five minutes prior to nursing. Dip a clean cloth in warm water and wring out the excess water. Use the warm cloth to gently massage the area around the nipples, pressing the breast against the chest. After massaging for five to 10 minutes, lean forward and breast feed your baby. You can also try this as a relaxation technique if you notice your breasts have become heavy, but you are not able to feed your baby. It can help facilitate the flow of milk.

Fenugreek Fenugreek is considered a good remedy for stimulating the milk-producing glands. Fenugreek contains phytoestrogens that help increase breast milk production. Soak one tablespoon of fenugreek seeds in one cup of water overnight. In the morning, boil this water along with the fenugreek seeds for several minutes. Strain the solution, and drink this tea every morning until you get positive results. Then take two capsules, three times daily for the next 10 days. Finally take one capsule, three times daily for another 10 days. Diabetic and asthmatic women must not use fenugreek remedies.

Fennel Seeds Fennel seeds also help increase breast milk production. This herb acts as a galactagogue, a substance that helps the body produce more breast milk. Plus, fennel seeds aid digestion and help prevent colic pain in small babies.

Advertisements Add one tablespoon of fennel seeds to one cup of hot water. Cover the cup, let it steep for 30 minutes, and then strain the solution. Drink the tea twice daily for a month.

Grind the ingredients to make a fine powder. Have one teaspoon of it with one cup of milk three times a day for one or two weeks. Also try to include fennel seeds in your cooking.

Cumin Seeds Cumin seeds are also believed to stimulate milk production. Plus, cumin seeds improve digestion and provide relief from constipation, acidity and bloating. They are also a source of iron that provides strength to new mothers after childbirth. Mix one teaspoon of cumin powder with one teaspoon of sugar. Have this mixture with a glass of warm milk daily before going to bed for a few weeks. Alternatively, add two teaspoons of cumin seeds to one-half cup of water and boil it. Strain the solution and add one-half cup of milk and one teaspoon of honey. Mix well and drink once daily for several weeks.

Cinnamon According to Ayurveda, cinnamon will also help to increase secretion of breast milk. When nursing mothers eat cinnamon, it helps improve the flavor of breast milk that many babies seem to like. Plus, it helps delay the occurrence of menstruation after childbirth and prevents early conception. Mix a pinch of cinnamon powder and one-half teaspoon of honey. Have it along with a cup of warm milk. Repeat daily before going to bed for one or two months.

Garlic Being an excellent galactagogue, garlic stimulates lactation. It has been found that nursing mothers who eat garlic tend to feed for a longer time, and babies even like the flavor of the milk. Finely grate three garlic cloves. Boil the grated garlic in one cup of water until the quantity is reduced to about one quarter. Add a cup of milk to the mixture and bring it to a boil again. Remove from heat, mix in one-half teaspoon of honey and strain it. Drink it once daily, in the morning, during the breastfeeding period.

Holy Basil In Ayurveda, holy basil has been used to help nursing mothers increase their milk supply. This herb can stimulate milk flow as well as help calm the nerves of new mothers. Being a good source of carotene, niacin, thiamine

and iron, holy basil also helps keep the mother and baby healthy and free from many diseases. In a pan, combine one cup of water and six to eight finely chopped basil leaves. Allow the mixture to boil for one to two minutes. Reduce heat to a simmer and let it steep for about five minutes. Remove from heat and strain the mixture. Drink this twice daily for a few months after childbirth. Extract the juice of fresh drumsticks and drink half a glass of this juice everyday for a month. Alternatively, boil a handful of drumstick leaves in one cup of water mixed with a pinch of salt for a few minutes. Drain the water and then smear the leaves with clarified butter ghee. Eat this twice daily for one month to increase breast milk. Oatmeal Oatmeal is a healthy addition to the diet for mothers who wish to increase their milk production. First of all, oatmeal is a good source of iron and iron deficiency is one of the main reasons behind less breast milk production. Secondly, oatmeal is a comfort food for many women. This means it can help new mothers relax and reduce stress. Eating a bowl of oatmeal with milk for breakfast each morning is one of the simplest ways to increase breast milk supply. Carrot and Beetroot Both carrots and beetroot contain a good amount of beta-carotene, which is said to increase the supply of breast milk. Also, beta-carotene is beneficial for the overall growth of newborn babies. Plus, these vegetables are high in minerals and nutrients that a nursing mother needs. Put two carrots and two beetroots in a juicer to make fresh juice. Add salt or honey as per taste. Drink it twice daily for several weeks. Alternatively, you can make a healthy salad or soup of carrots and beetroots and eat them daily to increase the supply of breast milk. Additional Tips Keep the body hydrated by drinking water throughout the day. Follow a nutritious diet and try to increase your daily calorie intake. Improve the latching position so that both you and baby are comfortable during feeding sessions. Frequently breastfeed your baby. The more you breastfeed, the more milk will be generated. Breastfeed your baby from one breast until it becomes empty, and then switch to the next one. Use a breast-pump to pump milk for about 15 minutes every two to three hours to increase breast milk supply. Do not smoke or drink during the breastfeeding period. With these remedies and tips you can easily increase your production of breast milk. However, before considering any of these methods, it is essential to have a professional determine if your supply of breast milk is really inadequate. Your doctor can advise you in this regard.

3: Induced Lactation without Drugs | Pregnancy & Baby | Moms and Parenting

Natural breastfeeding allows you to use natural behaviors, equipped by Mother Nature, to help you successfully feed and nurture your newborn. This article from Nancy Mohrbacher, IBCLC, FILCA was featured in Holistic Parenting magazine, Issue 9 (May/June). Nancy is a wealth of knowledge and a.

One of the conditions your care provider will be monitoring for is jaundice. Jaundice is normal in most newborns. However, if the jaundice appears out of the normal range, then steps will be taken to get it back under control. Jaundice is more common in breastfed babies and tends to last a bit longer. Unfortunately, there is conflicting information about how jaundice should be handled in the breastfed baby. The treatment of jaundice can greatly impact the breastfeeding relationship long term. Find a Lactation consultant in your area

What is Newborn Jaundice? Jaundice is a condition that can occur in newborns within days of birth. Jaundice is a yellowing of the skin or whites of the eyes. Jaundice normally appears first on the face and then will move down the body to the chest, abdomen, arms, and legs. Jaundice is best seen in natural light and can be harder to detect in dark skinned babies. If jaundice is suspected, your health care provider will run blood tests to measure the amount of bilirubin in the blood.

What causes Jaundice in the Breastfed baby?

Physiologic Jaundice Physiologic Jaundice is the most common and normal type of jaundice in babies. Bilirubin is a substance created by the normal breakdown of red blood cells. It is processed and removed by the liver. Once the baby begins to mature and the red blood cell amounts diminish, the jaundice will subside with no lasting effects on the baby. This usually happens about weeks after birth.

Breast Milk Jaundice Breast Milk Jaundice is jaundice that persists after physiologic jaundice subsides. It is seen in otherwise healthy, full-term, breastfed babies. There is no known cause for this type of jaundice, although speculation is that it may be linked to a substance in the breast milk that is blocking the breakdown of bilirubin. Breast milk jaundice tends to run in families. Most babies who present with true breast milk jaundice only 0. The bilirubin levels will eventually decrease. Breast milk jaundice can last for weeks after birth, but as long as the baby is feeding well and bilirubin levels are monitored, it rarely leads to serious complications. Breast milk jaundice must also be differentiated from breastfeeding jaundice, which is jaundice resulting from an insufficient intake of milk.

Breastfeeding Jaundice Breastfeeding jaundice is caused when the baby does not get enough milk. It is not related to breast milk jaundice. Breastfeeding jaundice can occur when a newborn does not get a good start on breastfeeding, has an improper latch, or is supplemented with other substitutes which interfere with breastfeeding. Breastfeeding jaundice often will resolve itself with increased feedings and help from a lactation consultant to make sure the baby is taking in adequate amounts.

What is the Treatment for Jaundice in the Breastfed baby? If bilirubin levels are below 20 milligrams, the following treatments are often used for breast milk jaundice and breastfeeding jaundice in the full term, healthy infant: Increase feedings to times a day. The best way to decrease bilirubin levels is to help remove it. Increasing feedings will result in increased bowel movements, which will excrete the bilirubin. Improper latch can directly affect how much milk a baby is receiving. The mom would also want to pump during this time in order to not interrupt the production of her milk. Using a lactation aid to deliver expressed breast milk or a mixture of breast milk and formula is the best way to not interrupt the breastfeeding relationship. Rarely is the interruption of breastfeeding an effective treatment for jaundice in a breastfed baby. This can usually drop bilirubin levels dramatically. The mom can then resume breastfeeding after the 24 hour period. Using a lactation aid to deliver supplementation and pumping during this 24 hour period would be the best way to avoid any problems in the breastfeeding relationship. If phototherapy is recommended usually only if bilirubin levels reach over milligrams, talk with your health care provider about using fiber optic blankets. These can be taken home and allow the breastfeeding relationship to continue with no interruptions. Increased feedings and the use of the bilirubin lights should effectively lower the bilirubin levels. If a baby is premature or has any other health conditions, the treatment would need to be individualized by the health care provider. Treatments not recommended for decreasing Jaundice in the breastfeeding infant: Supplementing with sugar water

In fact, this can worsen jaundice by interfering with breast milk intake and breast milk production. It can also delay the reduction of

bilirubin levels. Frequent and efficient feedings of breast milk are the best way to decrease jaundice. Can Jaundice in the breastfed baby be prevented? But there are ways to prevent it from becoming serious and reaching a level that requires additional interventions. Initiate the breastfeeding relationship as soon as possible after birth. Studies show that the breastfeeding relationship has fewer challenges and a higher rate of success when it is initiated in the first hours after birth. Work with a lactation consultant to make sure that a proper latch is achieved and the baby is taking in adequate amounts of milk. Feed the baby frequently in the first days and weeks of life. If the baby is sleepy, work to keep them awake so that they get full feedings. Avoid supplementing or interrupting breastfeeding if at all possible. Find a Lactation consultant in your area
Last Updated: Breast Milk Jaundice, Medline Plus.

4: Many Moms May Have Been Taught to Breastfeed Incorrectly: Surprising New Research - Mothering

Breastfeed {Naturally} is an organization dedicated to helping mothers learn the 10 Baby Steps to breastfeed naturally, and to train professionals who wish to help mothers and babies enjoy an effective, joyful breastfeeding relationship.

Breastfeeding â€” Tease lips or cheek. Breastfeeding â€” Twins, cross cradle position I. Breastfeeding â€” Twins, football or clutch hold. Breastfeeding â€” Twins, parallel position II. Latch breastfeeding Latching on refers to how the baby fastens onto the breast while feeding. Infants also use their sense of smell in finding the nipple. Sebaceous glands called Glands of Montgomery located in the areola secrete an oily fluid that lubricates the nipple. They become more pronounced during pregnancy and it is speculated that the infant is attracted to the odor of the secretions. If an infant is unable to hold their tongue in the correct position they may chew rather than suck, causing both a lack of nutrition for the baby and significant nipple pain for the mother. If it is determined that the inability to latch on properly is related to ankyloglossia, a simple surgical procedure can correct the condition. It is now known that a good latch is the best prevention of nipple pain. There is also less concern about small, flat, and even "inverted" nipples as it is now believed that a baby can still achieve a good latch with perhaps a little extra effort. In one type of inverted nipple, the nipple easily becomes erect when stimulated, but in a second type, termed a "true inverted nipple," the nipple shrinks back into the breast when the areola is squeezed. According to La Leche League, "There is debate about whether pregnant women should be screened for flat or inverted nipples and whether treatments to draw out the nipple should be routinely recommended. Some experts believe that a baby who is latched on well can draw an inverted nipple far enough back into his mouth to nurse effectively. They commonly work in hospitals, physician or midwife practices, public health programs, and private practice. Exclusive and partial breastfeeding are more common among mothers who gave birth in hospitals that employ trained breastfeeding consultants. However, in some cases, the infant may need additional treatments to keep the condition from progressing into more severe problems. Breast milk jaundice occurs in about 1 in babies. It often reaches its peak during the second or third week. Breast milk jaundice rarely causes any problems, whether it is treated or not. It is usually not a reason to stop nursing. The cause is thought to be inadequate milk intake, leading to dehydration or low caloric intake. If the baby is properly latching the mother should offer more frequent nursing sessions to increase hydration for the baby and encourage her breasts to produce more milk. If poor latch is thought to be the problem, a lactation expert should assess and advise. Weaning Weaning is the process of replacing breast milk with other foods; the infant is fully weaned after the replacement is complete. Psychological factors affect the weaning process for both mother and infant, as issues of closeness and separation are very prominent. Unless a medical emergency necessitates abruptly stopping breastfeeding, it is best to gradually cut back on feedings to allow the breasts to adjust to the decreased demands without becoming engorged. La Leche League advises: Make a bedtime routine not centered around breastfeeding. A good book or two will eventually become more important than a long session at the breast. Pumping small amounts to relieve discomfort helps to gradually train the breasts to produce less milk. There is presently no safe medication to prevent engorgement, but cold compresses and ibuprofen may help to relieve pain and swelling. Pain should go away in one to five days. If symptoms continue and comfort measures are not helpful a woman should consider the possibility that a blocked milk duct or infection may be present and seek medical intervention. If the mother was experiencing lactational amenorrhea her periods will return along with the return of her fertility. When no longer breastfeeding she will need to adjust her diet to avoid weight gain. Breastfeeding and medications Almost all medicines pass into breastmilk in small amounts. Some have no effect on the baby and can be used while breastfeeding. Note that the formula is of uniform consistency and color, while the milk exhibits properties of an organic solution, separating into the creamline layer of fat at the top, milk and a watery blue layer at the bottom. Expressed milk[edit] Manual breast pump A mother can express produce her milk for storage and later use. Expression occurs with massage or a breast pump. It can be stored in freezer storage bags, containers made specifically for breastmilk, a supplemental nursing system , or a bottle ready for use. Breast milk may be kept at room temperature for up to six hours, refrigerated for up to

eight days or frozen for six to twelve months. A sick baby who is unable to nurse can take expressed milk through a nasogastric tube. Some babies are unable or unwilling to nurse. Expressed milk is the feeding method of choice for premature babies. This allows mothers who cannot breastfeed to give their baby the benefits of breast milk. Babies feed differently with artificial nipples than from a breast. Drinking from a bottle takes less effort and the milk may come more rapidly, potentially causing the baby to lose desire for the breast. This is called nursing strike, nipple strike or nipple confusion. To avoid this, expressed milk can be given by means such as spoons or cups. With good pumping habits, particularly in the first 12 weeks while establishing the milk supply, it is possible to express enough milk to feed the baby indefinitely. With the improvements in breast pumps, many women exclusively feed expressed milk, expressing milk at work in lactation rooms. Women can leave their infants in the care of others while traveling, while maintaining a supply of breast milk. Wet nurse It is not only the mother who may breastfeed her child. She may hire another woman to do so a wet nurse , or she may share childcare with another mother cross-nursing. Both of these were common throughout history. It remains popular in some developing nations , including those in Africa, for more than one woman to breastfeed a child. Shared breastfeeding is a risk factor for HIV infection in infants. During the late stages of pregnancy, the milk changes to colostrum. While some children continue to breastfeed even with this change, others may wean. Most mothers can produce enough milk for tandem nursing, but the new baby should be nursed first for at least the first few days after delivery to ensure that it receives enough colostrum. Breasts can respond to the demand and produce larger milk quantities; mothers have breastfed triplets successfully. In some cultures, breastfeeding an adoptive child creates milk kinship that built community bonds across class and other hierarchal bonds. In developed countries, re-lactation is common after early medical problems are resolved, or because a mother changes her mind about breastfeeding. Re-lactation is most easily accomplished with a newborn or with a baby that was previously breastfeeding; if the baby was initially bottle-fed, the baby may refuse to suckle. If the mother has recently stopped breastfeeding, she is more likely to be able to re-establish her milk supply, and more likely to have an adequate supply. Although some women successfully re-lactate after months-long interruptions, success is higher for shorter interruptions. A dropper or syringe without the needle may be used to place milk onto the breast while the baby suckles. The mother should allow the infant to suckle at least ten times during 24 hours, and more times if he or she is interested. These times can include every two hours, whenever the baby seems interested, longer at each breast, and when the baby is sleepy when he or she might suckle more readily. In keeping with increasing contact between mother and child, including increasing skin-to-skin contact, grandmothers should pull back and help in other ways. Later on, grandmothers can again provide more direct care for the infant. However, even when lactation is established, the supply may not be large enough to breastfeed exclusively. A supportive social environment improves the likelihood of success. If a baby has stopped breastfeeding, it may take weeks or more before much breastmilk comes. Extended breastfeeding Extended breastfeeding means breastfeeding after the age of 12 or 24 months, depending on the source. In Western countries such as the United States , Canada , and Great Britain , extended breastfeeding is relatively uncommon and can provoke criticism. In India , mothers commonly breastfeed for 2 to 3 years. WHO states, "Breast milk is the ideal food for the healthy growth and development of infants; breastfeeding is also an integral part of the reproductive process with important implications for the health of mothers. What is at stake: It is also bad for the multibillion-dollar global infant formula and dairy business. Breastfeeding aids general health, growth and development in the infant. Infants who are not breastfed are at mildly increased risk of developing acute and chronic diseases, including lower respiratory infection , ear infections , bacteremia , bacterial meningitis , botulism , urinary tract infection and necrotizing enterocolitis. At one year, breastfed babies tend to be leaner than formula-fed babies, which improves long-run health. Length gain and head circumference values were similar between groups, suggesting that the breastfed babies were leaner. The risk of death due to diarrhea and other infections increases when babies are either partially breastfed or not breastfed at all. The rest of the body displays some uptake of IgA, [] but this amount is relatively small. However, smallpox and yellow fever vaccines increase the risk of infants developing vaccinia and encephalitis. Breast milk of healthy human mothers who eat gluten -containing foods presents high levels of

non-degraded gliadin the main gluten protein. Delaying the introduction of gluten does not prevent, but is associated with a delayed onset of the disease.

5: Cold and Allergy Remedies Compatible with Breastfeeding â€¢ www.enganchecubano.com

It is no secret that breast cancer and other hormone-related breast problems are on the rise. This time of year, grocery stores, car bumper stickers, and even NFL jerseys and cleats sport bright pink ribbons, packaging, and badges designed to "Support the Cure." While this is a good thing in.

Rather than tackling every issueâ€”latching struggles, milk supply, sore nipplesâ€”individually, why not use a single approach that addresses many challenges at once? That is what a new approach called Natural Breastfeeding can do. What is Natural Breastfeeding? Let me back up a little and explain how this new approach came to be. By chance in I came across a U. It found that the breastfeeding positions we had been teaching new mothers for decades could actually be contributing to the ongoing epidemic of early problems. What did this study find? But now we know better. We know these reflexes are key to early breastfeeding. Every brand-new baby comes into the world with a whole repertoire of responses that are custom designed by Mother Nature to make baby an active breastfeeding partner. These responses work best when baby lies tummy down on mother with gravity anchoring baby there. Theresa I began trying this approach with the breastfeeding mothers I saw and found that it solved many problems. But some were reluctant to try it. Thankfully, around this time, I began meeting with a local obstetrician Dr. No longer delivering babies, now Dr. In our discussions, Dr. Theresa added more pieces to our puzzle. We discussed the work of Dr. Brian Palmer and why the act of breastfeeding is as important to newborn development as the milk. Theresa also shared key findings in the field of brain science. Theresa and I devoted many hours to putting together these diverse but related puzzle pieces from around the world. What emerged is a new approach we call Natural Breastfeeding. Learning to Breastfeed What does the brain and learning have to do with breastfeeding? A lot, as it turns out. A crucial aspect of changing current practice involves highly specialized brain cells called mirror neurons. When we see or hear something, mirror neurons record and remember it as if we are performing the action. Human mirror neurons are even stimulated by watching actions on a video. Their mirror neurons already knew. When they gave birth, mothers in the past were familiar with how to nurse their babies because they saw it growing up. Many have never even seen another woman breastfeed without a cover. And the only breastfeeding images they usually see are of women nursing in sitting-up-straight feeding positionsâ€”positions that also make it impossible for newborns to help. In light of these influences, our epidemic of early breastfeeding problems makes more sense. The Power of Observation Pictures are very powerful, especially the pictures in our mind. One of the biggest barriers to a smooth breastfeeding start is that most pregnant women have an image in their minds of what they think breastfeeding is like that is fatally flawed. Mother is sitting in a chair comfortably holding baby in her arms. Baby is suckling gently at her breast with his lips pursed around her nipple In this mental picture, the mother is breastfeeding her newborn in what is essentially a bottle-feeding position, which causes problems. Sitting straight up with your weight resting on your bottom after having a baby is painful. Holding baby closeâ€”so there are no gaps between youâ€”quickly tires your arms, causing head, neck, and back strain. Yet this is not only how pregnant women imagine breastfeeding, this is how they are taught to breastfeed in hospitals and birthing centers around the world. But why work this hard? The pull of gravity makes it impossible for a newborn to use his inborn responses to get to his food source and feed. For baby, it is like trying to climb Mount Everest. Instead of mothers and babies working together as breastfeeding partners, mothers must do all of the work. Instead of being able to relax while baby helps, most mothers sit hunched over, tense, and struggling. To complicate things further, in these positions, gravity can transform the same inborn feeding responses that should be helping babies into barriers to breastfeeding. Head bobbing becomes head butting. Arm and leg movements meant to move babies to the breast become pushing and kicking. Mothers can relax completely and rest while baby feeds, often with both hands free. It takes a full year, after all, before babies can resist gravity enough to walk. But babies develop the head-and-neck control they need to fight gravity during breastfeeding much soonerâ€”usually within four to six weeks. Over time, babies just get coordinated enough to latch themselves on deeply, even in gravity-defying positions. In Natural Breastfeeding positions gravity helps babies latch deeper, so mothers can

breastfeed in greater ease and comfort right from birth. Theresa and I realized that the key to changing perceptions about early breastfeeding is to make images of this new approach available to more women, especially during pregnancy. Please Help Spread the Word We were very lucky thatâ€”for the benefit of mothers everywhereâ€”the women featured in the Natural Breastfeeding program generously allowed their breastfeeding images and videos to be put online. You can see more videos from the program on my YouTube channel as well. Please share links to these videos widely so that more women can experience an easier breastfeeding start. Natural Breastfeeding is like the training wheels on a bicycle. It helps you avoid unnecessary pain and struggle while you and your baby are learning. By making the most of what baby brings to the table, Natural Breastfeeding allows you to use the behaviors built in by Mother Nature to help you successfully feed and nurture your newborn. Natural Breastfeeding positions are how expectant mothers should imagine themselves feeding their babies. Please help us spread the word! Nancy Mohrbacher lives in the Chicago area and breastfed her own three sons, who are now grown. She began helping breastfeeding families in and became a board-certified lactation consultant in For 10 years she founded and ran a large private lactation practice. She has also worked for a major breast-pump company and a national corporate lactation program. Nancy is author of the professional textbook Breastfeeding Answers Made Simple. Her tiny troubleshooting guide for families, Breastfeeding Solutions, is also available as the Breastfeeding Solutions app for Android and iPhones. You can find her at NancyMohrbacher. Optimal positions for the release of primitive neonatal reflexes stimulating breastfeeding. Early Hum Dev ; 84 7: Reasons for earlier than desired cessation of breastfeeding. Pediatrics ; 3: Baby-friendly hospital practices and meeting exclusive breastfeeding intention. Pediatrics ; 1: Breastfeeding concerns at 3 and 7 days postpartum and feeding status at 2 months. Pediatrics ; 4: Newborn behaviour to locate the breast when skin-to-skin: A possible method for enabling early self-regulation. Acta Pediatr ;

6: About Your Privacy on this Site

A mother nursing her child is the strongest image of biological connection between a parent and offspring outside the womb. As such, it must be destroyed.

Avoid eating excessive amounts of cough drops containing menthol. Large amounts of menthol can reduce milk supply. Many forms of Robitussin, Delsym and Benylin are considered compatible with breastfeeding. Always check the active ingredients, as there are many versions. Nasal sprays or gels Nasal sprays are generally considered compatible with breastfeeding. Decongestant nasal sprays are generally for short-term use days only; consult your health care provider and the package instructions for specific information. Of the preparations available for treatment of allergic symptoms, corticosteroid nasal sprays e. The plasma levels of these drugs are extremely low, and thus milk levels would be even lower. Anosmia after intranasal zinc gluconate use. Zicam contains small amounts of zinc Zincum Gluconicum “ micrograms per squirt; in one study Mossad the daily dosage used was 2. Decongestants Both pseudoephedrine and phenylephrine are generally considered to be safe for the breastfed baby, but pseudoephedrine may reduce milk supply. Hale is referring to this study: Br J Clin Pharmacol. Be very cautious about taking pseudoephedrine on a regular basis, as it has the potential to permanently decrease your milk supply. Monitor your infant for possible drowsiness if you use this type of antihistamine. The non-sedating antihistamines below are generally preferred and are less likely to sedate baby. The ingredients of Claritin, Claritin-D, Clarinex, Allegra, Allegra-D, and Zyrtec are generally regarded to be compatible with breastfeeding again “ always double-check the active ingredients. Loratadine Claritin has been studied and the amount of loratadine that passes into breastmilk is extremely low. Claritin-D and Allegra-D have the decongestant pseudoephedrine added see above about possible effect on milk supply. Hale has said that he prefers the non-sedating antihistamines even though they are long-acting over the sedating allergy medications. A common concern is that the sedating antihistamines might lower milk supply but, per Dr. Thomas Hale, there is no current research supporting this belief “ only some anecdotal reports. If you feel that your supply has decreased, it could simply be a byproduct of decreased nursing frequency or dehydration due to your illness. If you feel that a medication is the cause of a sudden drop in milk supply, then stop taking or decrease your use of the medication “ if the med is indeed the cause, then supply should increase again soon after you stop taking it. When using an antihistamine, it can be helpful to step up your fluid intake quite a bit. As with any medication, take it only as needed, and discontinue use as soon as you can.

7: Hidden danger of calling breast-feeding 'natural' - CNN

I have been searching for a long time for a guide to natural therapies for breastfeeding mothers and I've finally found it! The Author includes information on breath awareness, massage, aromatherapy, homeopathy, Bach Flower remedies, and much more.

Famous moms who breastfeed Famous moms who breastfeed â€” Supermodel Gisele Bundchen posted this image to her Instagram account, opening up a dialog about whether she was representing a glamorized version of motherhood. Click through the gallery for more examples. Hide Caption 1 of 8 Photos: Famous moms who breastfeed Famous moms who breastfeed â€” Singer Alanis Morissette posted this more down to earth photo of herself breastfeeding her son Ever while on tour. Famous moms who breastfeed Famous moms who breastfeed â€” Model Jaime King breastfeeds her son James in this intimate moment. King had a message to spread along with the photo: Famous moms who breastfeed Famous moms who breastfeed â€” Singer Gwen Stefani breastfeeds her son Apollo in Switzerland. Hide Caption 4 of 8 Photos: Famous moms who breastfeed Famous moms who breastfeed â€” Model Miranda Kerr has shared a couple of photos of herself breastfeeding her son Flynn. She tagged this one " Another day in the office. Famous moms who breastfeed Famous moms who breastfeed â€” Model and actress Yaya Dacosta posted this photo of herself feeding her son Sankara. Famous moms who breastfeed Famous moms who breastfeed â€” Model Ashley Nicole faced a bit of backlash when she posted this photo on social media, with some calling it vulgar or an attention grab. Everything stops for him! Famous moms who breastfeed Famous moms who breastfeed â€” Actor Brad Pitt took this W magazine cover photo of his partner Angelina Jolie while she breastfed one of their twins in Hide Caption 8 of 8 Story highlights Experts worry that promoting breast-feeding as "natural" could support fears of vaccines and other "unnatural" practices Health department campaigns focus on breast-feeding as the "only natural" way CNN Breast-feeding: But, according to a pair of experts, this type of campaign could backfire in a big way. When federal and local health departments use the term "natural" to promote breast-feeding, it could inadvertently fuel concerns over other aspects of health and society that are seen as "unnatural," such as vaccines, genetically modified foods and assisted reproductive technologies, the experts warn. Martucci is co-author of an article on the topic that was published on Friday in the journal Pediatrics. Breast-feeding is recommended by the American Academy of Pediatricians and other major medical organizations because of its many health benefits , such as reducing the risk of infection in infants and helping mothers recover after pregnancy. In support of its policy statement on the topic, the AAP called breast-feeding a "natural and beneficial source of nutrition" for an infant. Read More The price of pushing breast-feeding On the one hand, invoking the "natural" side of breast-feeding may have helped create the breast-feeding renaissance we have today. After falling from popularity and losing out to formula milk in the s and s, breast-feeding started making a comeback in the s in response to notions of "natural motherhood," trends that Martucci has written about on a blog and in her book, "Back to the Breast. But is there a price to pay for pushing this view of breast-feeding? Could it lead people to believe that breast-feeding is best because it is free of chemicals and artificial ingredients? The article points to research and anecdotes suggesting that some Americans reject vaccines because they are manufactured and believe that boosting immunity naturally is better or safer. One study found that the most common reason parents claimed nonmedical exemptions for required school immunizations was concern that the vaccines might be harmful. But immunizations protect children against deadly diseases , and their safety had been extensively demonstrated. The idea that vaccines are not natural could play into the concerns that some people have that they are not safe, added Salmon, who led the study looking at why parents claimed exemptions. It is possible that promoting breast-feeding as natural could have the inadvertent effect the authors of the current article suggest, Salmon said. Nevertheless, it is worth having a discussion about the best ways to market breast-feeding, Eidelman said.

8: Natural treatments for nursing moms â€¢ www.enganchecubano.com

Calling breast-feeding "natural" could inadvertently fuel concerns over aspects of health seen as "unnatural," such as vaccines, experts said.

Natural breast enhancement Breast size is determined by a combination of genetics, lifestyle, and body weight. Be wary of supplements, herbs, creams, enlargement pumps, and massages that are advertised as natural remedies. There is no evidence that these are effective. Exercises that focus on the pectorals, back, and shoulder muscles can help to firm and tone the chest muscles behind your breast tissue and improve your posture. You can do these seven exercises at home with weights, cans of food, or a water bottle filled with sand or rocks. Stand in front of a wall and press your palms flat against it at the same height as your chest. Slowly and with control move forward until your head nearly touches the wall. Return to the original position. Repeat 10 to 15 times. Extend your arms out to the side at shoulder level. Slowly make small circles backward for one minute. Now make small circles forwards for one minute. Then pulse your arms up and down, using a small range of motion, for one minute. Repeat one or two times with a break in between. You can add small weights to this exercise to make it more advanced. Sit or stand with your hands extended in front of your chest with your palms together. Bring your arms back together. Do this for one minute. Use weights or a resistance band to make it more difficult. Prayer pose Keep your arms extended and press your palms together for 30 seconds. Bend your elbows at 90 degrees and press your palms in toward each other in front of your chest in prayer pose for 10 seconds and release. Repeat this 15 times. Horizontal chest press Extend your arms in front of your body and bend them at a degree angle. Open your arms as wide as they will go and bring them together again. Rest at the end of all of these exercises, and repeat at least once more. Chest press extensions Hold a dumbbell in each hand and bring your hands up so they are in line with your shoulders, keeping your elbows bent. Slowly straighten your arms and extend in front of you. You may wish to extend one arm at a time. Then bring your hand back to your shoulders and slowly lower your wrists down. Keep your elbows in at your body, and make the movement slow and controlled. Do three sets of Modified pushups Lie on the ground and put your palms on the outside of your chest. Push your body all the way up until your arms are almost straight, but keep a slight bend in your elbows. Slowly lower your body back down using controlled resistance. Keep your elbows in at your sides. The takeaway You may wish to combine a few of the home remedies for best results. Take into consideration that the size of your breasts can change depending on where you are in your menstrual cycle. Look for small signs of improvement instead of dramatic results.

9: Breastfeeding - Wikipedia

A resource for: All expectant and new mums, whether its your first baby or your 10th! Partners, families, whanau, aiga and other supporters who play a role in supporting and encouraging mums to.

Induced lactation is also used for women who have trouble conceiving naturally but are planning on adopting. Methods Used to Induce Lactation Lactation is a natural process that begins soon after conception. Once the baby is born the abrupt decline in hormones triggers the pituitary gland to produce oxytocin to initiate lactation and produce breast milk. Induced lactation without drugs is a growing practice for adopting or surrogate mothers to bring them naturally closer to their new baby. Health researchers have now isolated the hormonal influences and basic metabolic events necessary to induce a woman to produce the perfect food for a baby even if she has not recently given birth. This knowledge now allows many women to experience one of the most natural joys of motherhood. Natural stimulation to bring the breast milk to the surface is typically required in preparation for nursing the child. Physicians suggest to women at the end of their second trimester to begin stimulating their breast through natural methods to induce lactation and to overcome tenderness in the breast. While in the shower or bath use a light wash cloth to toughen the nipples and clear away any harden tissue. Lightly rub the nipples in a circular motion with the warm soapy wash cloth. Do this frequently before and after the baby is born. Stimulating the nipples in preparation for inducing lactation without the aid of drugs is one of the most effective methods. This process usually begins the first month of the last trimester. Simply use a breast pump to stimulate lactation. Another method using a spouse or partner to suckle your breast as an infant would to induce lactation without drugs is also a great way to bring the breast milk to the surface. While this process is possible in all pregnant women, however this natural way to induce lactation without drugs is often used on women that are not pregnant. Non-pregnant lactation for a woman who wishes to breastfeed her adopted child is the standard practice advised for women planning on adopting or being a surrogate mother to an infant. Most often this chore is meant to bring the adoptive mother and new infant closer, through a natural process of the maternal bond of breast feeding. Organizations like the Le Leche league and the Mayo clinic as well as other surrogate mothering programs in third world countries where infants lack nutrition, initiate the lactation process in the adoptive or surrogate mothers. In this case induced lactation is necessary and quite simple. Non-pregnancy induced lactation is done by introducing birth control pills in high dosages, which simulate the naturally high concentration of hormones during pregnancy. This activates the production of Prolactin to start the lactation process. Then the woman is abruptly taken off birth control to simulate the abrupt decline in hormones to trigger the production of oxytocin. This offers the same natural effect pregnant women experience after child birth. Once the pregnancy simulation process is complete, using natural stimulations such as nipple massages, breast pumps or their partner to induce lactation without drugs is standard. But there are draw backs to this procedure. Therefore the focus is more on the building the closeness rather than nutritional merits associated with breast feeding. Breast feeding your child whether through naturally produced lactation methods or stimulated induced lactation are both drug free methods of induced lactation that are much safer for the infant and the mother. Learn more about surrogate methods of inducing lactation without using drugs, by going online or contacting a surrogate birthing clinic.

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