

Making Milk

Teresa Pitman

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Did you know that one of the main reasons women stop breastfeeding is because they feel they aren't making enough milk? Anyone who has struggled with milk supply or a slow-gaining baby knows how worrying and frustrating that experience is. Yet many pregnant women are not aware of the factors that can influence their ability to make milk and their baby's ability to get the milk they produce.

For example:

- Many mothers believe that epidurals have no effect on the baby, but in fact research has shown that babies born after epidurals have difficulty in breastfeeding and sucking effectively. Also, the intravenous fluids given at the same time as the epidural may cause increased engorgement, making it harder for the baby to latch well.
- Scheduled, timed or restricted feedings in the early days and weeks may mean reduced milk production later.
- Supplementing the baby with formula during the first few weeks has also been shown to reduce milk supply.
- Keeping the baby skin-to-skin as much as possible stimulates the baby to feed more frequently and boosts milk production.
- Getting a really good latch means the baby gets more milk at each feeding – encouraging the breasts to increase production.

Often when young babies are not gaining well, it is not because the mother isn't able to make enough milk – it's because the baby is having difficulty getting the milk. Usually this is because the latch is not as good as it could be.

Mothers also sometimes believe that if they can't produce a full milk supply, then they might as well wean completely. But babies get immune factors and essential nutrients from breastfeeding even if they also need to be supplemented.

This is one of the reasons we encourage women to start attending LLLC meetings when they are pregnant. There's a lot to learn before your baby arrives! And getting breastfeeding off to a good start is so important, especially when it comes to milk production.