

Factors responsible for lactation failure among mothers

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Abstract

Declines in both the initiation and the duration of lactation have been reported from around the world. This is of serious public health concern because of the associated increased morbidity and mortality, which are most striking in developing countries but are also detectable in developed countries. An exploratory research on "A study to assess the factors responsible for lactation failure among mothers in selected hospitals of Pune city" was conducted as part of a departmental research project. The Objective of the study was to assess the factors responsible for lactation failure and to associate these factors with the selected demographic variables. The Assumption was there may be some factors which the mothers might feel are responsible for lactation failure. Based on the study objectives the tool selected for the study were on basis of Demographic profile which consists of Age of the mother and No of children and a Self – structured questionnaire, which consisted of the Physical Factors, Social Factors, and Emotional Factors. The tool was validated by 9 experts which was followed by the modifications as per the suggestions and translated into Marathi language. The tool was found feasible after the pilot study. The final study was done in Bharati hospital of Pune city with Population consisting of postnatal mothers of Pune city. The sample size was 211 which was done through the Non probability purposive sampling technique. Descriptive and inferential statistics was used to analyze the data the findings of the study were, Majority of the samples were in the age group of 21 – 25 years. Majority of the samples had only one (01) child. Majority (134) samples feel that low birth weight is the major physical factor responsible for lactation failure. While 132 samples also feel that mother's weakness is a physical factor responsible for lactation failure majority of the samples that is 120 samples feel that busy lifestyle and lack of family support is one of the major social reasons responsible for lactation failure. 111 and 108 samples feel that less time for breast feeding and lack of privacy during feeding may be the other social reason among the emotional causes, among the emotional factors responsible for lactation failure, majority 127 samples feel that anxiety regarding newborn care is one of the major emotional factor responsible for lactation failure while 126, 119 and 117 samples feel that mental stress, unplanned pregnancy and loneliness might be the cause. 99 and 98 samples feel that reestablishment of sexual relationship and lack of encouragement might be the other emotional reason. On comparing the factors it was seen that emotional causes followed by the physical and social causes were responsible for lactation failure among mothers. It was found, that there is no significant association between the factors and demographic variables. So to conclude from the above findings, the study provides with the evidence that there are many factors which the mothers feel would be responsible for the lactation failure. For which proper health education related to lactation and its importance for the child development is essential. The need is the willpower and resources to determine the causes of lactation failure and develop appropriate treatments so that all mothers can reach their breastfeeding goals.

Keywords: Assess Factors, Lactation, Failure, Mothers

Introduction

Lactation happens through a choreographed interplay of hormones that build up milk-making machinery during pregnancy and then manufacture milk and deliver it to the baby during feeding. So-called "primary lactation failure," when a mother's milk never comes in, may happen because the machinery doesn't develop, or because the signals to make and move the milk are not in sync or absent altogether.

When a mother's milk isn't flowing, physicians should check for any medications that may be interfering with milk production, as well as assess function of the thyroid and pituitary gland, which can be damaged during childbirth after heavy bleeding. Absent milk production can also occur if part of the placenta is left behind at birth. If these tests are all normal, a few drugs can boost the level of prolactin, the milk-making hormone.

Often, however, we don't find an answer. With little knowledge and few treatment options, the physician is typically left telling a mother that she has "lactation failure."

Problem Statement

A study to assess the factors responsible for lactation failure among mothers in selected hospitals of Pune city

Objective of the study

- 1) To assess the factors responsible for lactation failure
- 2) To associate these factors with the selected demographic variables

Inclusion criteria

The study included mothers who are willing to participate in the study

Exclusion criteria

- a) Mothers who have delivered still born babies.
- b) Mothers whose babies have died in the neonatal period.

Review of literature

Kathleen E. Huggins *et al.* In a prospective study, the

relationship between breast appearance and milk production was investigated. Thirty-four women with characteristics suggestive of breast hypoplasia were evaluated. Volume of infant milk intake and breast pumpings immediately after feedings, and milk production during the first week and first month of lactation was estimated. The majority of the women with some degree of hypoplasia and an intramammary distance of 1.5 inches or more produced 50% or less of the milk necessary to sustain normal infant growth in the first week postpartum. Many of these women also reported experiencing no breast growth during pregnancy. Sixty-one percent of the women followed were unable to produce a full milk supply within the first month. Women at high risk for primary lactation insufficiency can be identified prenatally or in the immediate postpartum period. They need close monitoring to ensure that the infant receives adequate nutrition and to encourage optimal milk production.

Alison M. Stuebe, *et al.* conducted a study on Failed Lactation and Perinatal Depression: Common Problems with Shared Neuroendocrine Mechanisms In the early postpartum period, mother and infant navigate a critical neuroendocrine transition from pregnancy to lactation. Two major clinical problems that occur during this transition are failed lactation and perinatal mood disorders. These disorders often overlap in clinical settings. Failed lactation is common. Although all major medical organizations recommend 6 months of exclusive breastfeeding, only 13% of women in the United States achieve this recommendation. Perinatal mood disorders affect 10% of mothers, with substantial morbidity for mother and child. We hypothesize that shared neuroendocrine mechanisms contribute to both failed lactation and perinatal mood disorders. In this hypothesis article, we discuss data from both animal models and clinical studies that suggest neuroendocrine mechanisms that may underlie these two disorders. Research to elucidate the role of these underlying mechanisms may identify treatment strategies both to relieve perinatal depression and to enable women to achieve their infant feeding goals.

Research methodology

The Research Design

The research design selected for this study is the exploratory research design.

Research Variables

Factors responsible for lactation failure

Setting of the Study

The setting for this study is of selected hospitals of Pune city.

Population

In this study population consist of postnatal mothers of Pune city.

Sample size

The sample size was 211.

Sampling technique

Non probability purposive sampling technique is used to select the sample.

Tool

Based on the study objectives the tool selected for the study were on basis of

1) Demographic profile: This consists of

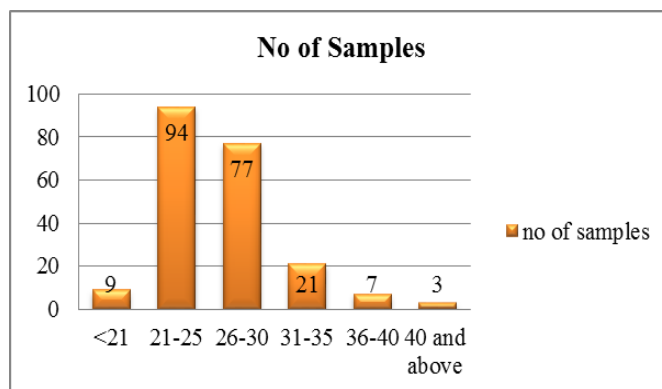
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- a) Age of the mother
- b) No of children

2) Self – structured questionnaire: Which consists of

- a) Physical Factors
- b) Social Factors
- c) Emotional Factors

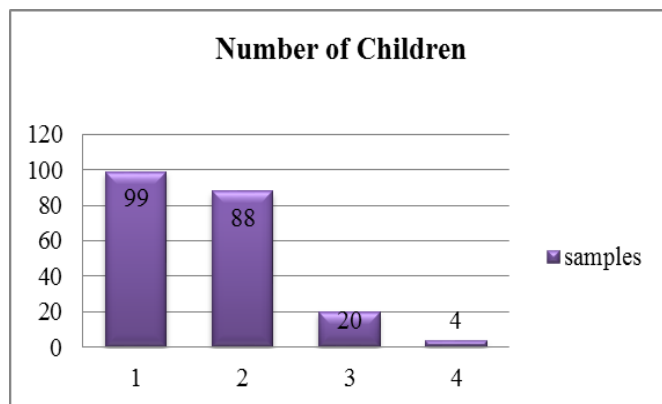
Analysis Related To Demographic Data



N= 211

Fig 1

Fig 1, Shows that Majority of the samples that is 94 samples were in the age group of 21 – 25 years. 77 samples were in the age group of 26-30 yrs. 21 samples were in the age group of 31-35 yrs. 9 samples were of the age group of less than 21 years while 7 samples were between the age group of 36-40 yrs. while 3 samples were the minimum samples who were between the age group of 40 years and above

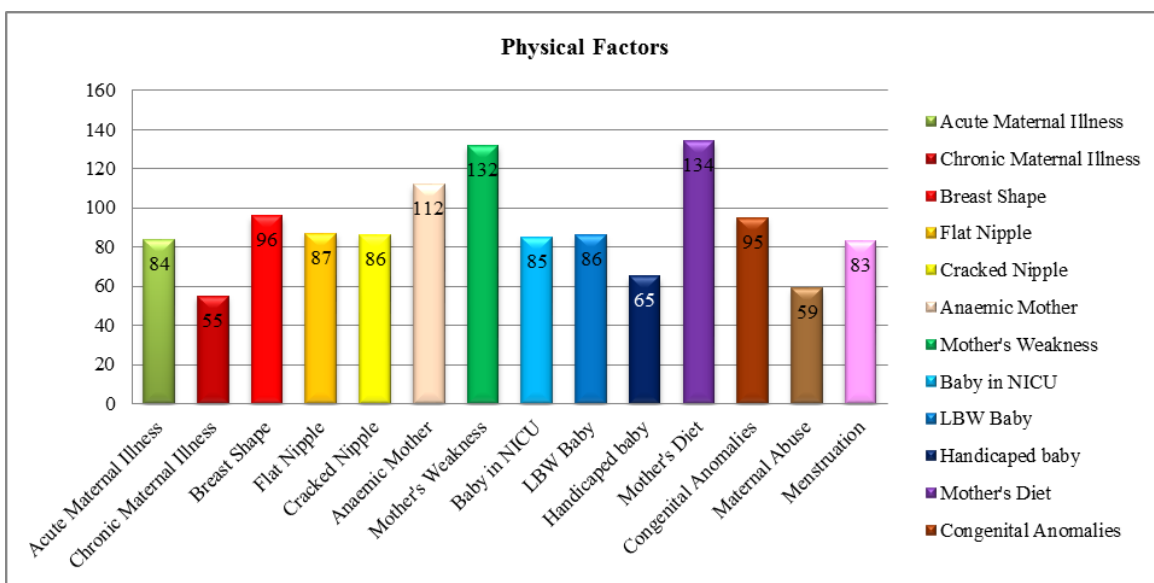


N= 211

Fig 2

Fig 2, Shows that Majority of the samples that is 99 had only one (01) child.88 samples had 2 children while 20 samples had 3 children and there were 4 samples who had 4 children

Analysis Related to the Factors Responsible for Lactation Failure

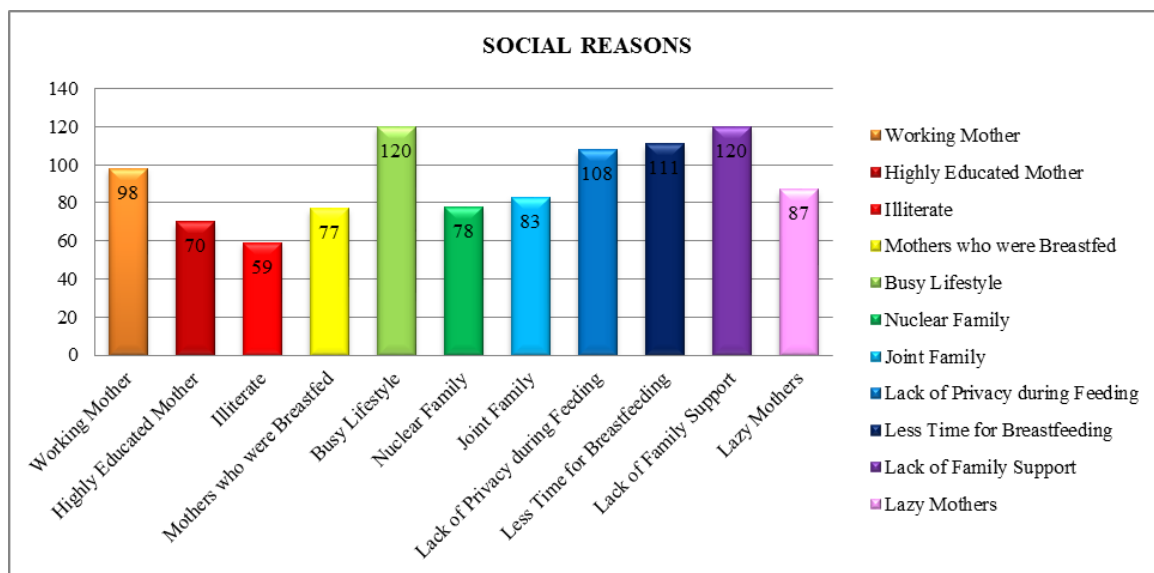


N= 211

Fig 3

Fig 3, Shows that Majority (134) samples feel that low birth weight is the major factor responsible for lactation failure. 132 samples also feel that mother’s weakness is a responsible factor. 112 samples felt that a mother who is anemic may be one of the factors responsible for lactation failure. 96 samples feel that mother’s breast shape may be a responsible factor. 95 samples also feel that congenital anomalies are also one of the cause.87 mothers feel that flat nipple may be the cause. 86

samples feel that cracked nipple and LBW babies may be the cause. 85 samples also feel baby who was in NICU may be one of the cause of lactation failure 84 samples also feel that acute maternal illness may be the cause while 83 feel menstruation may be the cause. There were minimum no of samples that is 65, 59, and 55 who felt that handicapped baby, maternal abuse and chronic maternal illness may be the other causes of lactation failure

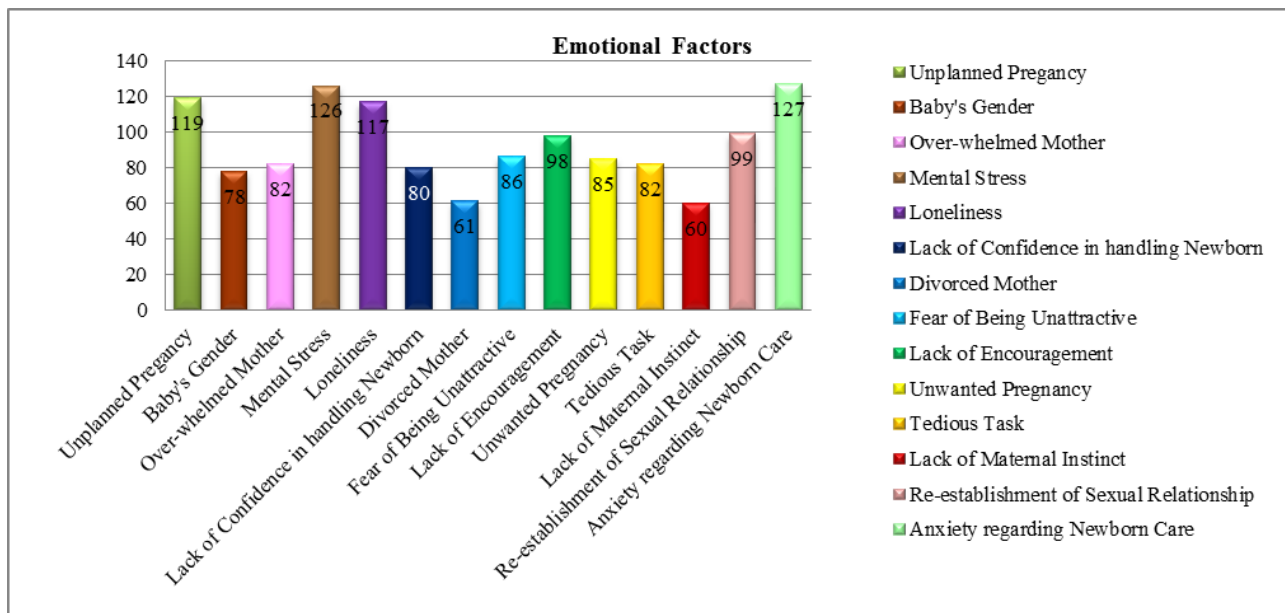


N= 211

Fig 4

Fig 4, Indicates that majority of the samples that is 120 samples feel that busy lifestyle and lack of family support is one of the major social reason responsible for lactation failure. 111 and 108 samples feel that less time for breast feeding and lack of privacy during feeding may be the other social reason. 98 samples also feel that a mother who is working may be the cause. 87 samples also feel that lazy mothers is a factor for

lactation failure. 83 samples feel that joint family is a cause while 78 samples feel that nuclear family is a cause some feel that that is 77, 70 and 59 samples feel that mothers who are breast fed, highly educated mother and illiterate mothers these are the other minor factors which probably might be one of the social reasons responsible for lactation failure.



N= 211

Fig 5

Fig 5, Indicates majority that is 127 samples feel that anxiety regarding newborn care is one of the major emotional factor responsible for lactation failure 126,119 and 117 feel that mental stress, unplanned pregnancy and loneliness might be the cause. 99 and 98 samples feel that reestablishment of sexual relationship and lack of encouragement might be the other emotional reason. 86 and 85 samples also feel that being unattractive and unwanted pregnancy may be the cause 82 of the samples feel that mother who is overwhelmed may be the cause while other 82 samples feel it's a tedious task 80 samples feel lack of confidence in handling newborn is the cause while 78 samples feel that babies gender is the cause. Minority of the samples that is 61 and 60 feel that divorced mother and lack of maternal instinct are the other possible factors responsible for lactation failure

Comparison of the Factors

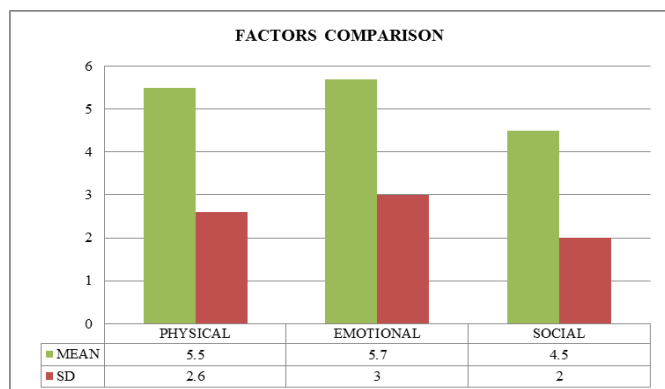


Fig 6

Fig 6, It Shows That most of the samples felt that the emotional causes followed by the physical and social causes were responsible for lactation failure among mothers. It was found, that there is no significant association between the factors and demographic variables.

Recommendations

1. Researches can be done on assessing and developing indicators of nutritional status for lactating women.
2. Intervention studies of improved design and technical sophistication are needed to investigate the effects of maternal diet and nutritional status on milk volume; milk composition; infant nutritional status, growth, and health; and maternal health.
3. Studies should be conducted to determine relationships, if any, between the nutritional status of the mother, the concentrations and functions of the components of the immunologic system in human milk, and the susceptibility of the recipient infant to common infectious agents.
4. Research is needed to study how various approaches to the health care of lactating women (and those who plan to breastfeed) affect their lactation performance.
5. Studies are needed to investigate the potential influence of maternal anxiety, stress, and illness on milk volume and composition.

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