Contact

If mother is experiencing problems with breastfeeding, you should contact her health visitor, midwife or infant feeding co-ordinator.

Helplines

National Breastfeeding Helpline 0300 100 0212
La Leche League Helpline 0845 120 2918
NCT Breastfeeding Helpline 0300 330 0771
Association of Breastfeeding Mothers 08444 122 949

How to make sure you know best.

Breastfeeding guidance for GPs.

The information provided in this publication is based on guidance produced by NHS North of Tyne and the Northumberland Care Trust information leaflet GP Breastfeeding Helpful Hints.

Produced by Public Health North East, Waterfront 4, Goldcrest Way, Newburn Riverside, Newcastle upon Tyne NE15 8NY
Breastfeeding is good for mums and good for babies. It improves health outcomes across a range of areas and is convenient and cost-effective.

GPs have a vital role to play in encouraging breastfeeding. Not only are mothers influenced by the advice they receive from their doctor, but problems encountered while breastfeeding, such as mastitis, may present to the GP. How you deal with questions and problems relating to breastfeeding can ensure that women are able to initiate and continue breastfeeding with confidence.

This guidance highlights the benefits of breastfeeding, identifies common problems and how they can be managed, and provides information on further resources available to encourage and maintain breastfeeding.

Benefits of breastfeeding.

Research shows that breastfeeding and being breastfed have a number of benefits for baby and mum.

For baby, a reduced risk in the short term of:
- gastrointestinal infections
- upper respiratory tract infections
- ear infections
- urinary tract infections

And long-term benefits in the prevention of conditions such as:
- coronary heart disease
- diabetes
- asthma
- eczema
- obesity

Mums who breastfeed their babies are at a reduced risk of developing breast and ovarian cancer and possibly rheumatoid arthritis.

Best Feeding

Common problems in breastfeeding.

Mastitis

Only 50% of cases of mastitis are infected and require antibiotics*. Most cases are simply due to a blocked duct which can be easily cleared with correct positioning and attachment. Encouragement to continue breastfeeding is essential.

Referral to a health visitor or infant feeding adviser, who can provide an expert assessment of positioning and attachment, is recommended.

Symptoms include:
- red area on part of the breast
- lumpy breast which feels hot to the touch
- breast aches
- flu-like symptoms (aching, raised temperature, shivering, tired, tearful)

Treatment:
- encouragement to continue breastfeeding is essential
- feed frequently
- hand express – ensure breast is drained
- feed sore side first. Feeding should always continue on the affected side
- try different feeding positions
- use warm water to soften breast
- check restrictive clothing
- rest
- observe feed for reoccurrence
- paracetamol, ibuprofen, possibly antibiotics*

*Most antibiotics are compatible with breastfeeding and can be safely prescribed. Some may change the taste of mother’s milk.

Thrush

Both mother and baby should be treated if one of them has symptoms of thrush, this lessens the risk of reinfection and the condition worsening.

The treatment of choice for mother is miconazole cream 2%, used sparingly after each feed. The baby should be prescribed miconazole gel or Nystatin.

Post-natal depression

Research shows that mothers with post-natal depression recover more quickly if they continue breastfeeding. For antidepressants that are compatible with breastfeeding see NICE guidance.

Slow weight gain

Babies who present with slow weight gain should have a medical examination to rule out pathology. Women should be referred to a health visitor or infant feeding adviser for a breastfeeding assessment.

Nipple trauma

The most common cause of sore nipples is incorrect positioning and attachment of the baby at the breast. Women should be referred to a health visitor or infant feeding adviser for assessment. Lanolin based creams may be used to aid moist wound healing.

Frequent feeding/unsettled baby

In the early weeks it is normal for babies to feed 8 – 12 times daily. Persistent long or frequent feeds, or an unsettled baby may indicate poor attachment at the breast. Women should be referred to a health visitor or infant feeding adviser for assessment.

Introducing solid food

The Department of Health recommends exclusive breastfeeding for the first six months of life. Breastfed babies do not need any fluids other than breast milk. Supplementing breast milk with other fluids can be detrimental to the success of breastfeeding and may reduce health benefits. To maximise the health benefits, breastfeeding should continue for the first year and beyond.

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