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Delayed Lactogenesis – A Case Study to highlight potential causes and management

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Statement of the problem: "I have no milk" Lactogenesis is the onset of milk secretion and includes all of the changes in the mammary epithelium necessary to go from undifferentiated mammary gland in early pregnancy to full lactation sometime after parturition. Some women are at risk of having delayed lactogenesis. These risk factors can include: first time mother, large amount of blood loss during delivery, pain medications / anaesthetics during delivery, stressful birth, C-section, blood loss >500ml, insulin resistance, poorly controlled type 1, GDM, preterm birth, unusual nipple anatomy, maternal illness, separation of mother and baby as well as infant factors. This is a case study that highlights a number of these risk factors including gestational diabetes and Sheehan syndrome. A primigravida with gestational diabetes presented in hospital at 36 weeks with APH. Baby was delivered via emergency c-section. Baby was admitted into the NICU with breathing difficulties. Day 5 postpartum mother was referred to me as she was still unable to produce milk. We take a look at the impact of the gestational diabetes as well as blood loss during the delivery, together with a number of other risk factors and the impact on milk production. Management of the mother and baby with power pumping regimen, SNS, and medications allowed her to obtain about 70% of milk production. This allowed her to obtain her breastfeeding goals and empower her for future births. Discussion around how this can help us manage these triads earlier in order to protect the breastfeeding relationship and ultimately the long term health of mother and baby.

Biography

Notes: