

## Factors Affecting the Successful Breast Feeding Practices in Various Modes of delivery

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### ABSTRACT

To identify the number of primi parous mothers who follow the successful breast feeding practices immediately after delivery in two weeks' postpartum period. To identify the number of prim parous mothers who don't follow the successful breast feeding practices In this study the women who underwent Cesarean section (37.14%) have more health issues that may affect breast feeding practices. Prenatal counselling had significant relationship with breast feeding practices. So ,counselling should be given antenatally to the mother for success of breast feeding practices. pre pregnancy BMI (>30) i.e obese patients are more likely to undergo cesarean section. This study is to identify the factors affecting breast feeding practices. Lack of prenatal counselling ,maternal attitude and employment status were found to be affecting breast feeding practices in our study population. Most of the mothers had family support.

**Keywords:**allergies, infant illness, pregnancy and breastfeedings.

### 1.INTRODUCTION

Breast milk is viewed as the best form of nutrition for infants, as its composition benefits their growth, immunity and development. According to World health organisation (WHO), breast feeding is defined as “a normal way of providing infants with the nutrients they need for healthy growth and development” 1.Breastfeeding is considered worldwide as one of the most beneficial and cost-effective preventative health measures available to babies. Breastfeeding is a routine practice in all countries and has been practiced for many decades. According to the American Academy of Pediatrics 2,

Breast feeding provides protection against respiratory infections, gastrointestinal diseases, and allergies. Therefore, babies who are breastfed may have fewer infant illness; thereby, reducing the number of hospital stay or doctor visits. One of the World Health Organization's principles is to providing lifelong access to health care

starting from the mother long before pregnancy, through pregnancy, and childbirth (WHO, 2016). WHO is committed to promote a high standard of health for people of all ages, including infants, and seeks to educate mothers and healthcare providers concerning advantage of breastfeeding to babies.<sup>3-6</sup>

Many organizations recommend breastfeeding as the best source of nutrition for infants and support exclusive breastfeeding for the first 6 months of life for many reasons. Though a bonding is formed between the mother and the infant following birth, the decision to breastfeed is often influenced by a number of positive and negative factors. Instinct to breast feed declined due to various reasons. It is also being linked to superstitious beliefs like colostrum being bad and is to be discarded by some mothers. The National Institute of Health stated that the effects of delivery method on breastfeeding initiation are poorly understood.<sup>1</sup> Research question of this study is to identify factors influencing decisions concerning breastfeeding in a group of mothers who has different modes of delivery.<sup>7</sup>

## **2.MATERIALS AND METHODS**

STUDY DESIGN : CROSS SECTIONAL STUDY

PERIOD OF STUDY : AUGUST 2017 TO FEBRUARY 2019

PLACE OF STUDY : OBG DEPARTMENT , Sree Balaji  
Medical College and hospital, Chrompet

SAMPLE SIZE: 250

study group A : 138

study group B : 112

### **INCLUSION CRITERIA:**

- PRIMIPAROUS MOTHER
- AGE: 18 TO 35 YEARS
- TERM DELIVERY
- NO COMORBID CONDITIONS
- BABIES WITH GOOD APGAR

## **EXCLUSION CRITERIA**

- MULTIPAROUSMOTHER
- AGE:<18 AND>35
- PRETERM AND POSTDATED
- MOTHERS WITH COMORBIDCONDITIONS
- BABY WHO NEEDS NICUSUPPORT

The Study was conducted in OBG department ,Sreebalaji medical college chrompet, Chennai. The participants were selected randomly to ensure diversity and the study explained to the primiparous mother and the informed consent obtained in their own language. This kind of selection often reduced large number of selection bias.The total study group consist of 250 primiparous mother. The study group A consist of 138 women delivered vaginally,The study group B consist of 112 women delivered by cesarean section. The primiparous mother of two groups are interrogated at two weeks post partum about which whether they followed the Breastfeeding practices or not .

Then socio demography of the study population in various modes of delivery noted.The breast feeding practices are early initiation, duration of breast feeding, number of times of breast feeding per day, number of times of breast feeding at night. Demand feed, notusing any pre lacteal feed ,proper feedingofcolostrum avoidance of pacifiers,Among the primiparous mothers who delivered vaginally,86 followed breast feeding practices and 52 not following breast feeding practices.

Among the primiparous mother who delivered by various modes of delivery who are not following successful breast feeding practices are interrogated and find out what are the factors that affect successful breast feeding practices in them.The data collection technique adopted in this study(Factors affecting successful breast feeding practices in various modes of delivery ) is a structured questionnaire, involving detailed history with exposure to prenatal counselling, maternal attitude towards breast feeding ,family support, Breast health of the mother(to rule out breast conditions that hinder breast feeding),Gender of the baby.

## **3.RESULTS**

A total of 250 mothers were included in the study, of whom 138 mothers delivered

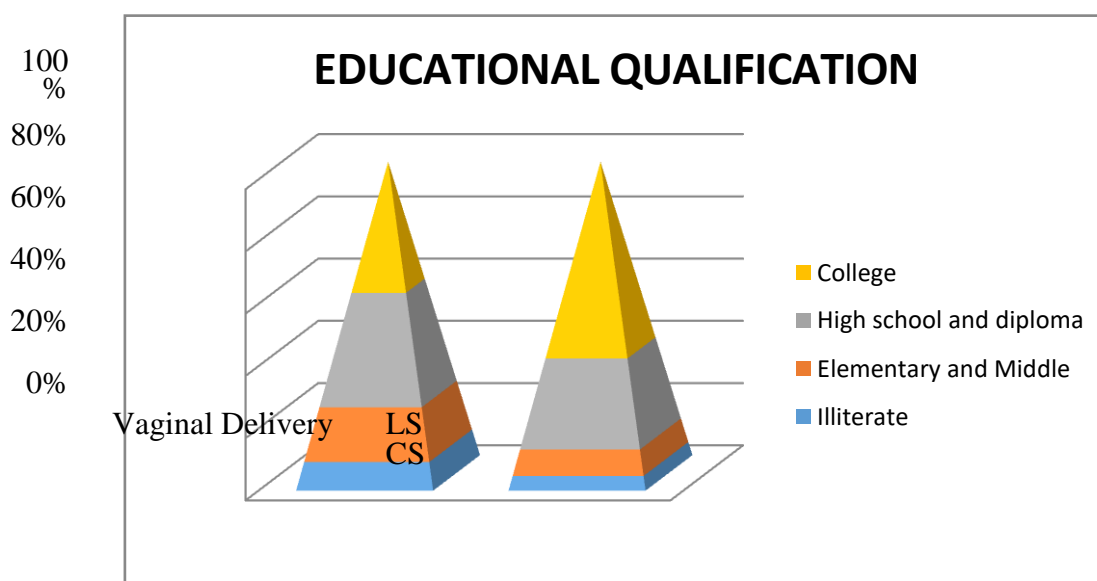
vaginally and 112 mothers had undergone lower segment cesarean section are . The number of women who delivered vaginally and cesarean section are selected in a way that the sample is adequately matched.

**Table 1: Distribution of Age in the study population**

Age	Vaginal delivery		LSCS		p-value
	No. of cases	%	No. of cases	%	
<20 years (Teenage pregnancy)	29	21.01%	16	14.28%	0.012
20-30 years	86	62.31%	75	66.96%	
>30 years (Elderly pregnancy)	23	16.66%	21	18.75%	
Total	138		112		

Among teenage pregnancy, 21.01% had vaginal delivery, 14.28% had LSCS; among 20-30 yrs 62.31% had vaginal delivery and 66.96% had LSCS; whereas 16.66% had delivered vaginally and 18.75% delivered by LSCS in the elderly primi group. In our study, occurrence of LSCS was found to be directly proportional to the advancing age and shows that there is a strong association between age and mode of delivery.

**Figure 1: Distribution of Educational Qualification in the study population**



There was an increasing trend of cesarean sections among more educated women as they are aware of its many advantages. For eg., college graduates had 59.82% of LSCS as compared to only 39.85% vaginal deliveries. Hence the above table shows a statistical significance between education and mode of delivery (p value = 0.000).

**Table 2: Distribution of Employment status in the study population**

Employment status	Vaginal delivery		LSCS		p-value
	no. of cases	%	No. of cases	%	
Unemployed	89	64.49%	65	58.03%	4.388
Employed	49	35.50%	47	41.96%	
	138		112		

Among the unemployed women, 64.49% had vaginal delivery and 58.03% had LSCS. Similarly among the employed, 35.50% had vaginal delivery while 41.96% had LSCS. There is no statistical association regarding their employment status and mode of delivery.

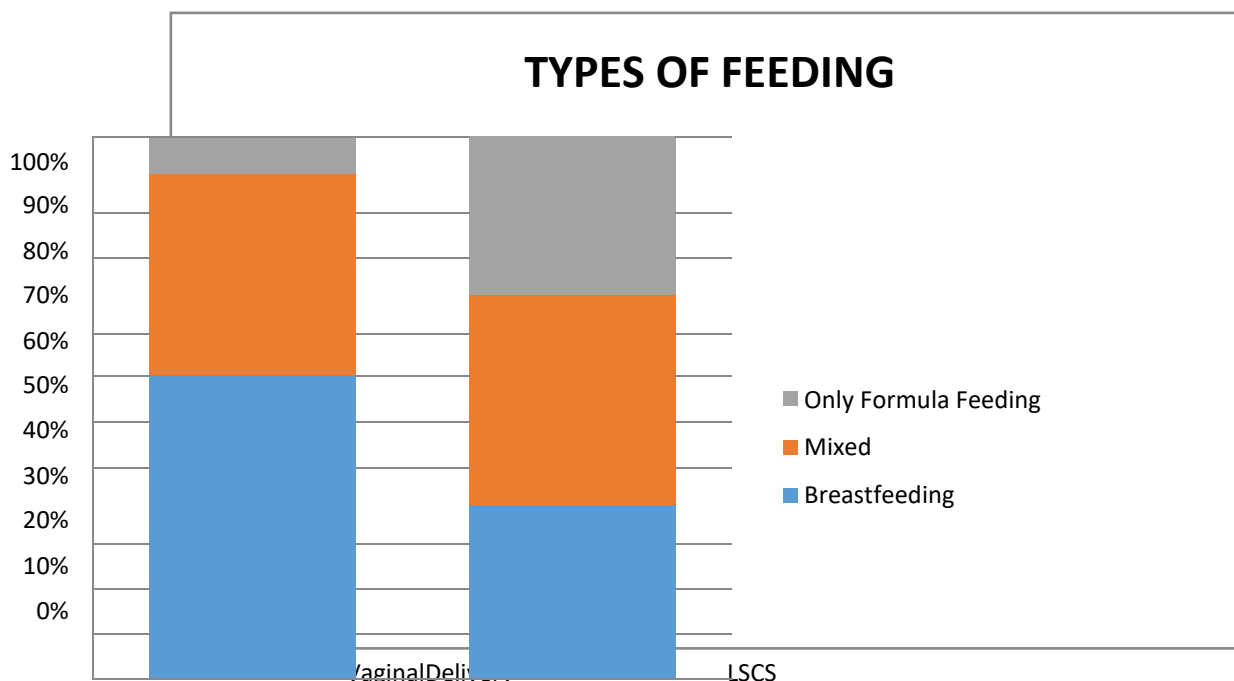
**Table 3: Distribution of Residential status in the study population**

Residual status	Vaginal delivery		LSCS		p-value
	no. of cases	%	No. of cases	%	
Urban	121	87.68%	92	82.14%	1.033
Rural	17	12.31%	20	17.85%	
	138		112		

Among the women from urban population, 87.68% had delivered vaginally and 82.14% delivered by LSCS. 12.31% had vaginal delivery and 17.85% had LSCS among women coming from rural areas. There is no statistical association noted between residential status and mode of

delivery.

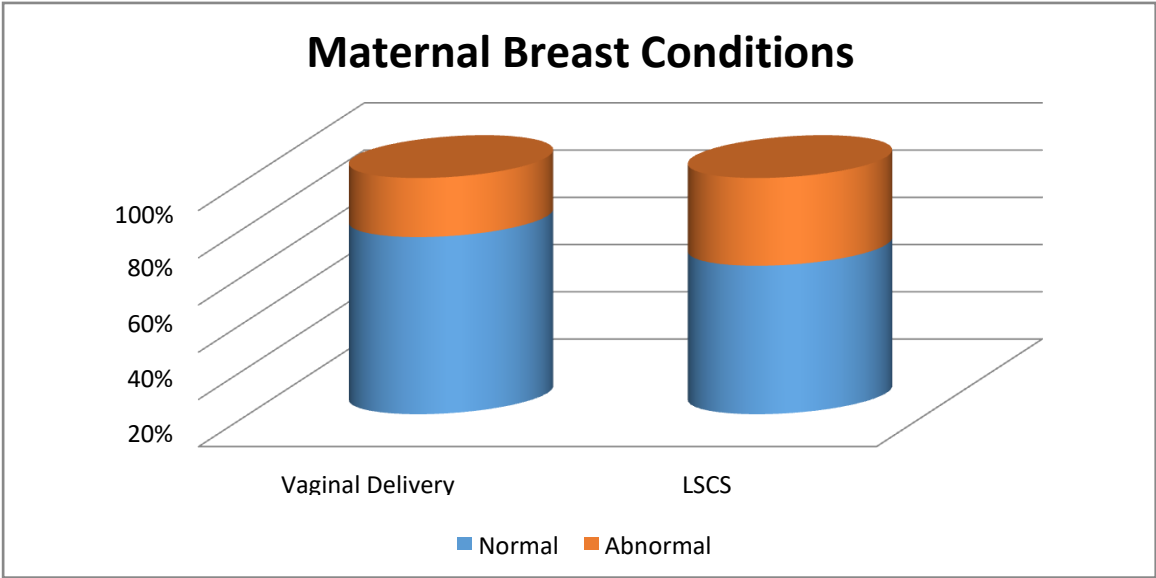
**FIGURE 2: BREAST FEEDING PRACTICES IN VARIOUS MODES OF DELIVERY**



From the above table, there is a significant association between type of feeding and modes of delivery. The above table shows breast feeding given to babies in women who delivered vaginally (62.31%) is more than women who delivered by cesarean section.(37.5%)

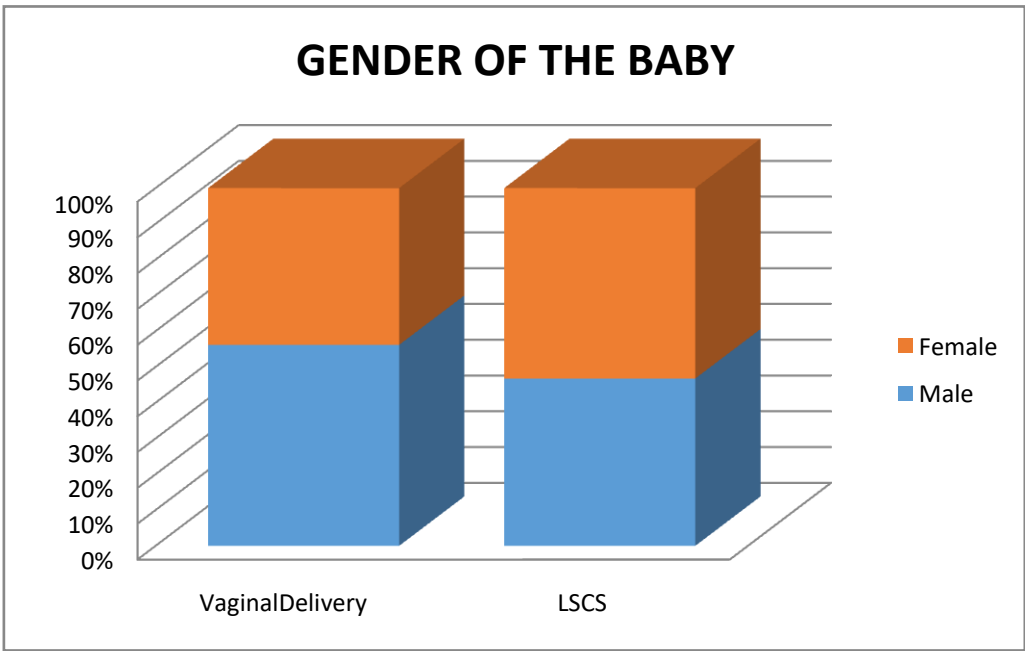
Out of 138 mothers who delivered vaginally, 62.31% were exclusively breast-feeding, 30.43% did mixed breast-feeding, and 7.24% practiced only infant formula feeding. Out of 112 mothers who delivered by Cesarean section 37.50% were exclusively breast-feeding, 38.39% did mixed breast-feeding and 24.10% practiced only infant formula feeding. Hence, a total of 52 mothers who delivered vaginally (Mixed + Only formula feeding) and 70 mothers who had undergone cesarean section (Mixed + Only formula feeding) were further analyzed to assess the reasons for incorrect breastfeeding.

**Figure 3: Maternal Breast Health Conditions**



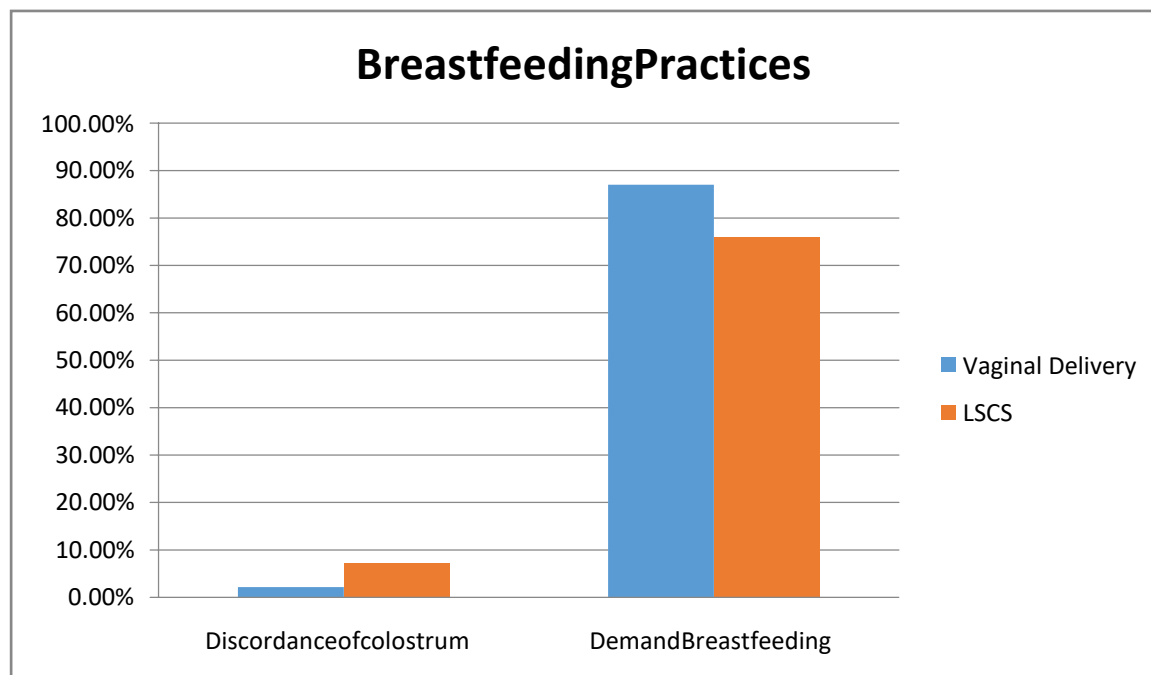
The maternal breast problems such as sore nipple, breast engorgement, mastitis, breast abscess was found to be more common among women who delivered by cesarean section in our study. There was a significant affiliation between maternal health problems and various modes of delivery.

**FIGURE 4: GENDER OF THEBABY**



There is no significant association between gender of the baby in breast feeding practices and modes of delivery in primiparous mother (  $p$  value = 0.061). Some studies shows , multi gravida mothers showed more preference to breast feed male babies than females.

**FIGURE 5: BREAST FEEDING PRACTICES**



#### 4.DISCUSSION

The importance of exclusive breastfeeding and the immunological and nutritional values of breast milk should be known by all mothers. World Health Organization (WHO) recommends timely initiation of breastfeeding after birth and promote exclusive breast feeding of babies up to 6 months. Our aim is to promote breast feeding practices and improve the knowledge of breast feeding to mothers and ensure exclusive breast feeding to all babies. Mother's should have the determination to feed the baby and she should have the planning about the breast feeding to the baby even before delivery.<sup>8</sup> More women with poor knowledge of breast feeding were engaging in harmful practices such as giving pre lacteal feeds and bottle feeding underscoring the need for interventions to improve the knowledge in antenatal period itself in order to reduce such practices. A mother has to know the importance of breastfeeding and what good it does to the baby in order to provide them. Various factors were the reasons for the mother not to breastfeed



properly. There was a significant association between maternal attitudes towards breast feeding and various modes of delivery.<sup>9</sup>

Most of the mothers discontinued breast feeding due to a misconception that formula feed is same or better than breast milk. In this study, more women who delivered by cesarean section (70%) gave formula feed than women who delivered vaginally (67%). Some mothers had complaints of insufficient milk production, some wanted to resume their work early, some felt an inconvenience in breast feeding at public places while others had cosmetic reasons. In a study conducted on knowledge and attitude towards breastfeeding (54) showed that majority of mothers have favorable attitude towards breast feeding. 67.5% Mothers agreed that breast milk is better. Very few only felt that breast feeding is old fashioned and embarrassing.<sup>10</sup>

In this study there is no statistical association between gender of the baby and breast feeding practices especially in primi parous mothers. But in some studies, multi gravida mothers were found to breastfeed female babies less than male babies. The study conducted in Europe on gender discrimination in relation to breast feeding practices shows that both 45.3% male babies and 40.6% female babies were initiated breast feeding within one hour after delivery and also follow proper breast feeding practices. In this study there is no much difference regarding both genders and breastfeeding practices.<sup>11</sup> In our study breast feeding and modes of delivery had a significant affiliation as in initiation of breast feeding, duration of breast feeding per day and in nights, discordance of colostrum, demand feeding, pre lacteal feeds and use of pacifiers.<sup>12</sup>

The initiation of breast feeding was delayed in cesarean delivery patients. It is due to the time wasted in shifting the patients to ward, analgesia effect of mother, pain at the operative site etc. The frequency of breast feeding per day is less in cesarean delivery than vaginal deliveries due to pain, discomfort and incorrectly following rooming in practices. The frequency of breast feeding at night is lesser in cesarean patients when compared to women who delivered vaginally due to effect of analgesia in these women post operatively. Vaginally delivered women give more demand feeding than cesarean delivery patients due to similar a fore mentioned reasons. The study conducted by Hirapalla and Pangioti on mode of delivery and breast feeding practices showed that elderly primigravide are more likely to undergo Cesarean section than young primigravida mothers<sup>12-14</sup>

The study conducted on mother's employment status on breast feeding showed the unemployed mothers breast feed more than employed mothers. Providing a special support for employed mothers and revising either the legislation of 6 -9 months post partum maternity leave

with pay and applying different alternatives is recommended. The study concluded that exclusive breast feeding status of unemployed mothers was significantly better than that of employed mothers .

## 5.CONCLUSION

In India ,less than 50% of children are breast fed within an hour after birth ,whereas the rate of exclusive breast feeding in the first six months stood at 55%.Early initiation of breast feeding and exclusive breast feeding can prevent nearly 99,499 deaths of children every year due to diarrhea and pneumonia.Breastfeeding is a benefit for both mother and infant in both short and long term.<sup>15</sup> This study is to identify the factors affecting breast feeding practices. Lack of prenatal counselling ,maternal attitude and employment status were found to be affecting breast feeding practices in our study population. Most of themothers hadfamily support.For Employed mothers duration of maternity leave can be given atleast for 6-9n months even in private sectors like the Government institutions and also helping them by arranging "work from Home " provisions which may improve breast feeding.<sup>16,17</sup>

Hence it is our duty of every health care professionals,including ANMs ,nurses and doctors ,to build an enabling environment for breast feeding through awareness generation activities ,targeting pregnant and lactating mothers ,family members and society . Breast feeding is to be positioned as an important intervention for child survival and development. It is vital to encourage lactating women ,who experience post - Cesarean challenges as mentioned in the present study ,to overcome these barriers and misconceptions with determination ,emotional support ,proper antenatal care and post natal education to create a breast feeding -friendly society.

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**Ethical approval:** The study was approved by the Institutional Ethics Committee

## CONFLICT OF INTEREST

The authors declare no conflict of interest.

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