

Nutritional needs and resources for the lactating mother



Abstract

Lactation is the secretion of milk by the mammary glands. Breastfeeding in women has taken place since the beginning of time. I will discuss this populations national needs, nutritional products, resources, and the typical diet of mother whom breastfeed. According the WHO suggests that infants should be exclusively breastfed for six months. However, it is also recommended that a child should be breastfed until the age of two. (Breastfeeding, 2018) With this in mind there has been substantial research done on the benefits health and nutrition wise for not only the infant, but the mother as well. While breastfeeding your daily intake of food should align with that. How many calories does breastfeeding women have per day? Can I have coffee? On the other hand, even alcohol are all question I will discuss. There are even types of food to keep milk production up. These are all important to the health of a mother in the lactation period in life.

Keywords: Lactation, American Academy of Pediatrics (AAP), World Health Organization (WHO), Breastfeeding, Nurse

Lactating Mothers

Breastfeeding is the historic way of providing young infants with the nutrients they need for healthy growth and development. Honestly all mothers can breastfeed, with accurate information, and the support of their family, the health care system and society at large. (Breastfeeding, 2018) comparing breastfeeding rates around the world, the groups found rates weren't the best in its Global Breastfeeding Scorecard, released at the start of World Breastfeeding Week. Fewer than 44% report mom's breastfeed <https://assignbuster.com/nutritional-needs-and-resources-for-the-lactating-mother/>

babies within the first hours of birth. The United States falls short of meeting the requirements of exclusively breastfeeding for the first 6 months of life. In most states, the statistics say it is about 9-25% of mothers that do breastfeed for that long. The highest state being Montana at 33%. (May, 2017)

According to the Pediatric clinics of North America, “ Breastfeeding saves lives” and “ Breast is best!” are well-known mottos for physicians and as well as women. Putting the newborn to the breast to nurse is considered “ normative” in the United States with majority of women doing so. Unfortunately, breastfeeding as a way to continue to feed infants is not yet the norm. (Dieterich, Felice, O’Sullivan, & Rasmussen, 2013)

The demographic determinants of breastfeeding length are the subject of a large collected works and it is common knowledge that women who are older, better educated and of higher social statuses breastfeed longer. “ Black women less likely to breastfeed than non-black women Degree of acculturation also has an impact on breastfeeding; every year of US residency reduces the odds of breastfeeding to any extent by 4% and breastfeeding to 6 months by 3%.” The length of time of breastfeeding among participants in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) lags behind that of non-participants, including those who are WIC-eligible but do not take part. Regardless of WIC’s aim to promote breastfeeding, the distribution of free formula undercuts the program’s message. (Dieterich, Felice, O’Sullivan, & Rasmussen, 2013)

Women without a high school diploma, younger women, those who are obese, low-income women, and those living in certain regions of the United States, continue to be less likely to breastfeed as compared with their others, and are less likely to maintain breastfeeding if started. Those mothers least likely to breastfeed are also those most likely to suffer from many of the diseases associated with a lack of breastfeeding. For example, non-Hispanic black women are least likely to initiate breastfeeding, but they, and their children, are at risk for developing obesity, type 2 diabetes, cardiovascular disease, and even some cancers. (Lessen & Kavanagh, 2015)

Nutrition for Breastfeeding

The basic nutrition needs for a breastfeeding mother is at least 500 extra calories per day. This metabolic load may help mobilize weight gained during pregnancy. In addition, breastfeeding is associated with more favorable glucose levels, lipid metabolism, and blood pressure. Epidemiologic studies suggest that these differences may persist after weaning with significant long-term benefits for mothers. (Steube, 2009)

There are also specific fluid intake for mother who breastfeed. Personally, I was told my lactation consultant that I should have a 8 ounce glass of something to drink i. e. water or juice every time I would breastfeed. However according to the European Food Safety Authority (EFSA) recommend around 10-12 glasses a day in total water or plain lower fat milks are good choices.

With a proper diet in place there are also foods that should be consumed less such as alcohol, food high in fat, sugars and salt like chocolate, cakes, and

sugary soft drinks are not needed in the diet, so should be consumed on rare occasions and in smaller amounts. Tiny amounts of what a mother eats can be passed to their baby through breast milk. There is a slight risk that drinking alcohol regularly may affect a baby's development. Although the occasional alcoholic drink is unlikely to do any harm, the safest option is to not drink alcohol. " If alcohol is consumed, recommendations are for no more than one or two units of alcohol (a standard glass (175ml) of wine contains around two units), once or twice a week, and to wait at least two hours after a single drink to breastfeed." (" Diet and nutrition requirements when breastfeeding", 2018)

In other research on breastmilk, alcohol levels found blood alcohol levels. The highest alcohol levels in milk occur 30 to 60 minutes after an alcoholic beverage, but food delays the milk alcohol levels. Nursing after 1 or 2 drinks (including beer) can decrease the infant's milk intake by 20 to 23% and cause infant distress and poor sleep patterns." The long-term effects of daily use of alcohol on the infant are not known. However, evidence indicates that infant growth and motor function may be negatively affected by 1 drink or more on a daily basis, but other studies have not confirmed this theory. Substantial maternal drinking may cause excessive drowsiness, fluid retention, and hormone issues in breastfed infants. (" TOXNET")

It is recommended that women to continue to take a prenatal vitamin daily while they are breastfeeding. The vitamins taken are usually are as follows, but not limited to vitamin d, a, magnesium, calcium, folate. Some people, such as vegetarian diets, may not get suitable nutrients through their diet alone and may be at risk for deficiencies. In addition, the recommended <https://assignbuster.com/nutritional-needs-and-resources-for-the-lactating-mother/>

dietary allowances (RDAs) for some nutrients increase while breastfeeding; therefore, it is possible that diet alone will not be sufficient to ensure proper nutrition for women who are breastfeeding. In these cases, breastfeeding mothers may find comfort in taking a multivitamin. (Institute of Medicine (US) Committee on Nutritional Status During Pregnancy and Lactation, 1991)

Maternal deficiencies in magnesium, vitamin B6, folate, calcium, and zinc have shown in research during lactation. Both and water-soluble vitamins are secreted into breast milk and their levels are reduced in breast milk when there is a maternal vitamin deficiency. Luckily, I found in a study these vitamin deficiencies in breast milk has positively affect to maternal supplementation. Maternal factors such as stress, anxiety, and smoking can decrease milk production, but the caloric value of breast milk does not change with dieting and exercising. Moreover, a woman's weight, BMI, body fat percentage, and weight gain during pregnancy do not influence milk production. (Kominiarek & Rajan, 2016)

Caffeine should be limited also while breastfeeding. " Caffeine is transferred from the mother to infant in small amounts through breast milk, but usually does not adversely affect the infant when the mother consumes low to moderate amounts (about 300 milligrams or less per day, which is about 2 to 3 cups of coffee)." Crankiness, poor sleeping patterns, fussiness, and jitteriness have been reported in babies of mothers with who have a high intake of caffeine, which is about about 10 cups of coffee or more per day. If an baby appears to be more fussy or irritable after the mother consumes high amounts of caffeine, she should consider decreasing her intake. Preterm

and younger newborn infants break down caffeine more slowly, so mothers of these infants might consider consuming even less caffeine. (Maternal Diet)

Nutritional products

There are some products to aid in production of milk supply some of which are controversial. Fenugreek is an herbal supplement used to increase milk supply; however, some people have shown the opposite effects. Mothers milk tea; cookies, brownies, etc. also been used to increase supply. Although there is not much evidence to support it taking, vitamin supplements can be useful for mother not getting enough nutrient through there diet alone. Most doctors recommend that postpartum mother continue there prenatal supplements especially if they are plan to breastfeed.

Typical daily intake of Lactating Mothers

According to the USDA, a checklist was made specifically for breastfeeding mothers. The Checklist shows different amounts of food depending on how much of your baby's diet is human milk. Moms who feed only human milk to their baby need slightly more food. This is a general checklist. Some moms may need more or less amounts of food. Mother should consume 2 cups of fruit, 3 cups of vegetables, 6 1/2 ounces of proteins, 8 ounces of grains, and 3 cups of dairy per day. (" WIC Works Resource System")

According to choose my plate, a mother who breastfeeds breakfast should look like oatmeal with fruit. A cup of coffee in the morning is an option as well. A typical snack would be some almonds. Ideally, a lunch for a breastfeeding mother would be salmon, asparagus, and a sweet potato. Dinner should include some form of protein like chicken, a fruit, and a

spinach and or kale salad, with things like peppers and nuts on top. (Making Healthy Choices, 2019)

“ To help them maintain satisfactory nutritional status, lactating women should be given sound nutrition information and encouraged to follow eating patterns that include frequent consumption of nutrient-rich foods, especially those that supply the minerals and vitamins.” Women who continue to breastfeed after return of their period may benefit by increased consumption of iron-rich foods such as spinach. Continued eating of nutrient-rich diets after lactation may help the body reserves of nutrients utilized lactation. (“ Postnatal Vitamins and Breastfeeding”, 2017)

Resources

If I was to refer a lactating mother for nutrition advice, I would you send them to places online like La lelache which help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education, and to promote a better understanding of breastfeeding for the healthy development of the baby and mother. The World Health Organization (WHO) sets child growth standards to assess how infant malnutrition relates to breastfeeding and mortality. I recommend WIC is the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides Federal grants to States for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five found to be at nutritional risk. AAP I endorse helps by attaining optimal physical, mental, and social health and well-being for all infants, children, adolescents and young adults. LACMED is a database that I would

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recommend because it contains information on drugs and other chemicals to which breastfeeding mothers may be exposed. It includes information on the levels of such substances in breast milk and infant blood, and the possible adverse effects in the nursing infant as well as suggested therapeutic alternatives to those drugs. Lastly, I would vouch for Woman's Health, which has helped women across the world. On the other hand, an electric or hand pump, are also products used to increase milk supply. There are plenty of different brands to choose from, and insurance companies cover most of these pumps. Hand expression is a cost free effective way to produce milk for those who choose to breastfeed.

Concluding my research on this topic I have come to find despite the recommendations of the government there are many determinates of why mother do not breastfeed. The nutritional needs can be too strenuous for some individuals. However, you can have someone of the things you desire such as a cup of coffee to keep you going throughout the day and not feel guilty about it. Overall mothers can benefit greatly from breastfeeding from avoiding diabetes to cancer. I truly believe it is worth the risk to breastfeed. With support and guidance only will a mother be able to have an effective and pleasant breastfeeding experience during the lactation stage of life.

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