

Breastfeeding Problems

Julian Keel explains why the baby is an important part of the breastfeeding equation and what help is at hand.

The perception that it's the mother who is not able to feed her baby is not necessarily the case. There is another vital piece to the puzzle. The baby.

An important area to address when considering why a baby is not able to feed properly is to look at the baby itself. If left untreated, the baby could be the reason for a mother having to give up on breastfeeding. There may be no issue with the mother's technique, but with the baby's inability to suck properly.

The nutritive suck, (one that results in milk being released into the oral cavity), relies on a coordination of the tongue, the hyoid bone, (a floating bone in the throat), the mandible (lower jaw) and the lower lip. This allows the tongue to be brought up against the hard palate at a rapid rate (twice per second for 10-30 seconds)

interspersed with 1-4 swallows.



To achieve proper coordination of the muscles controlling sucking, and for the proper feedback mechanisms from these muscles to the brain about their position and contraction, there have to be clear signals in the nerves that connect these areas.

The nerve supply to the tongue and the jaw exits the base of the skull. The muscles

associated with the tongue and throat are suspended between the collarbones and the base of the skull and jaw. It isn't hard to see how any of these delicate structures could be disrupted or contracted by the compression and distortion associated with experiences such as: fast birth (precipitate); difficult labour as a result of the baby not being in the optimum (occiput anterior) position during birth; assisted delivery (ventouse, forceps, caesarean section); or induced labour.

Inability to suckle is a rewarding condition to correct. Using chiropractic and craniosacral techniques specific to treating babies much can be done to re-establish the sucking response or treat problems that cause difficulties for positioning the baby for breastfeeding, e.g. torticollis, arching/hypertonic babies. The techniques are extremely gentle and encourage the body's own self-correcting mechanisms.

There are many different presenting symptoms and birth histories that I come across. Some feeding problems stem from an inability to coordinate the complex movements that make up the sucking and swallowing reflexes. Others stem from an inability to open the mouth wide enough to cover the areola of the nipple due to a problem with the baby's temporomandibular joint (jaw joint) – this can lead to the baby feeding in short bursts, breaking off early, seeming to fatigue easily.

Infants with compression of the maxilla (upper jaw) can exhibit an intensely strong suck that is painful and sore for its mother and can obviously lead to early transfer to the bottle. Other problems that can interfere with normal nursing can be caused by musculo-skeletal issues of the neck or spine that make it difficult for the baby to lie in a particular position or make



it hard to feed off one breast, whilst easy on the other. This is particularly prevalent where there is neck restriction. Hypertonic and reflux babies exhibit painful-looking arching movements when they are laid in certain positions needed for feeding. Often due to irritation of the joints and nerves in the middle back caused by compression during the birth process.

Many chiropractors and osteopaths who treat babies receive young patients via breastfeeding counsellors who have noted aspects of a baby's birth journey and the types of suckling problems they exhibit. Together mothers and babies can benefit from the expert advice and treatment on offer. The correcting measures can make a great impact on how things move forward for the baby and can help provide relief from what is often a very stressful and exhausting experience for the mother.

A Richmond branch NCT member, Julian Keel is a registered chiropractor practising locally in South West London and offering chiropractic and cranial treatment for adults, babies and children. As well as an extensive sports injury and general rehabilitation background, Julian specialises in the care of the mother pre and post natally and the health of babies and children.