



## **Optimizing positioning in the daily practice of a lactation consultant in private practice**

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### **Biography**

IBCLC lactation consultant in private practice in Paris, France. Consultations at home or in her practice. In addition she started LACTISSIMA, a consulting service which offers to develop a support program in companies for their breastfeeding mothers returning to work.

### **Goals**

To determine in what proportional relationship to the total number of consultations is pain, which could be remedied by the sole expedient of improving positioning, the reason for the consultation

### **Abstract**

This lactation consultant works independently in her office or in home visits. She has examined her last 60 counseling cases to determine how many mothers turned to her because of pain while breastfeeding. She wanted to find out what percentage of these could have been remedied by the sole expedient of improving positioning. In 37 of the 60 consultations, mothers sought help solely because of pain during breastfeeding or in combination with other problems. With 24 mothers, simply improving the positioning technique relieved the discomfort. For the other 13 there were further problems which required other interventions: skin problems (allergy, eczema of the nipple; a tongue-tie; thrush in the mother and child; difficulties with the jaw which entailed osteopathic treatment; and, with one baby, an inadequate sucking reflex that prevented the nipple from being grasped correctly.

The mothers, who turned to the lactation consultant due to pain, had babies between 4 days and one year of age. The average age during the consultation was 32 days.

Measures to improve the positioning technique consisted of a slight backwards extension of the head, employing the chin as the leading part on the breast, having the mouth wide open and the baby's body snuggled up close to the mother. The football hold as it is propagated by Jack Newman and the "biological nurturing" position outlined by Suzanne Colson were the breastfeeding positions used.

The reasons for the poor positioning were primarily the lack of good instruction during the hospital stay as well as inadequate models during childhood.

In summary, it can be said that 2/3 of the consultations due to pain could be avoided if care on the maternity unit were to include an hour of guidance and help for correct positioning.



## **Bibliography**

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