Enabling Breastfeeding in the Presence of Maternal Mental Health Difficulties: A Perinatal Psychiatrist and GP Lactation Consultant Working Together to Optimise Care.

Marnie Rowan^{1,2} Felice Watt^{3,4}

- ¹ General Practitioner Lactation Consultant, The Elizabeth Clinic, Perth, Australia
- ² Senior Medical Officer, Department of Psychological Medicine, King Edward Memorial Hospital, Women and Newborn Health Service, Perth, Australia
- ³Director of Psychiatry, Women's Health Clinical Care Unit, Women and Newborn Health Service, Perth, Australia.
- ⁴Clinical Senior Lecturer, School of Women's and Infants Health, University of Western Australia, Perth, Australia.

Background

There is evidence that antenatal anxiety and depression is related to early breastfeeding cessation. Increased breastfeeding self-efficacy in the early weeks is related to higher rates of exclusive breastfeeding, and reduced rates of depressive symptoms at 6 months. Previous studies have described a team approach to management of breastfeeding difficulties

Method

Women with mental health difficulties and a desire to breastfeed_were managed by a psychiatrist and a family physician/lactation consultant in a public perinatal mental health service. Therapeutic interventions included joint sessions where the physical and psychological aspects of breastfeeding were explored in the context of a shared understanding of the patients' mental state.

Results

Two de-identified cases will be presented - a woman with a history of complex trauma, who was highly motivated to breastfeed but experienced flashbacks during breastfeeding, and an anxious mother with triplets born at 33 weeks gestation. Breastfeeding goals were explored, and an individualized plan was made for each mother, bearing in mind breastfeeding goals, the infants' needs, and the need for maternal symptom control and adequate sleep. Full breastfeeding was not the outcome, but both mothers felt that providing breast milk for their babies improved their psychological wellbeing. Education of midwifery and nursing staff around the interaction of mental health and breastfeeding issues facilitated a flexible, empathic approach.

Discussion

These cases illustrate the benefits of a team approach to psychiatric care and breastfeeding support and consideration of the woman's individual

breastfeeding goals and priorities whilst being mindful of her mental health needs.

Keywords

Breastfeeding, anxiety, trauma

References

- 1. Ystrom E. Breastfeeding cessation and symptoms of anxiety and depression: a longitudinal cohort study. *BMC Pregnancy Childbirth*. 2012;12:36.
- 2. Henshaw EJ, Fried R, Siskind E, Newhouse L, Cooper M. Breastfeeding Self-Efficacy, Mood, and Breastfeeding Outcomes among Primiparous Women. *J Hum Lact.* Aug 2015;31(3):511-518.