



A STUDY ON BREASTFEEDING AWARENESS AMONG POSTNATAL MOTHERS WHO DELIVERED IN CIVIL HOSPITAL, AHMEDABAD

Obstetrics & Gynaecology

Rushita Minesh Shah

MBBS Final Year Student

Sanchit Mehta

Final Year MBBS Student,

Shrishti Agarwal

Final Year MBBS Student

Vansh Patel

Final Year MBBS student

Rajvi Kalpesh Baxi

Final Year MBBS Student

Sahil Kaushik

kumar Devmorari*

MBBS Final Year Student *Corresponding Author

Shailja Bhatt

Final year MBBS Student

ABSTRACT

A newborn's first diet should be human milk since it gives them all the nutrients they need and lowers their risk of infection. After the baby is born, the postnatal period lasts for six months. To gauge postpartum mothers' awareness of breastfeeding. Once informed consent was obtained, information was gathered for statistical analysis, myths were eliminated, and a questionnaire was given out. Only 42% of women knew how frequently to breastfeed, and about 45% were aware of expressed milk. In contrast, nearly 98% of women knew how long exclusive breastfeeding should last. Even if awareness is growing, methods such as health care, media, school curricula, etc. still need to be put into place to further raise the awareness.

KEYWORDS

Breastfeeding, Postnatal, Awareness

INTRODUCTION

Human milk is a newborn's first naturally occurring food, giving them all the energy and nutrients they need in their first few months of life. Good nursing practices lower the risk of diarrhea, otitis media, necrotizing enterocolitis, and sudden infant death syndrome in newborns and children. It's well known that nursing encourages lactational amenorrhea and lowers the incidence of breast and ovarian cancer. It also benefits women's ability to space out their pregnancies. Exclusive breastfeeding (EBF) for the first six months of life, early nursing starting within the first hour of life, and continued breastfeeding until or past the age of two years are the ideal breastfeeding practices. More than 80% of newborns in practically every nation receive human milk, but more than 80% of babies are fed human milk in nearly every country; yet, only approximately half of them start nursing during the first hour of life, and most of them have rates of exclusive breastfeeding that are significantly lower than 50%. (1)

The postnatal period begins immediately after the birth of the baby and is divided into three phases. The first six to twelve hours after giving birth are considered the acute stage. There is a chance for crises including eclampsia, uterine inversion, amniotic fluid embolism, and postpartum hemorrhage during this period which happen very fast. The subacute postpartum phase, which lasts for two to six weeks, is the second stage. The body is going through significant changes in terms of metabolism, genitourinary healing, hemodynamics, and emotional state during this phase. However, compared to the acute postpartum phase, the changes occur more slowly, and the patient can usually recognize concerns on their own. These could range from common worries about perineum irritation to severe postpartum depression or peripartum cardiomyopathy.

The delayed postpartum period, lasting up to six months, is the third phase. Modifications during this stage are very gradual and pathologies are very rare. This is when restoration of muscle tone and connective tissue occurs in the pre-pregnant state. (2)

The 1200 bed unit located In Ahmedabad Medicity campus was inaugurated by Prime Minister Narendra Modi for pediatric, gynecology and obstetrics treatment. It is a tertiary care institute providing preventive, curative, and rehabilitative care. (3)

Despite several interventions, breastfeeding awareness is still low in

developing countries. The present study was done to assess the knowledge, attitude, and practices of breastfeeding and to assess factors related to breastfeeding practices among postnatal women who delivered at a tertiary center. (4)

AIM

To study breastfeeding awareness among postnatal mothers who delivered in civil hospital.

OBJECTIVES

To assess the Awareness and mother's intention to exclusively breastfeed for six months. To find out the problems faced by breastfeeding mothers. To assess the awareness about the time when to initiate breastfeeding. To assess the awareness about the use of various instruments like spoons, bowls and bottles for breastfeeding

MATERIALS

Sample group: 500 postnatal mothers who delivered at Civil Hospital, Ahmedabad

Study area: 1200 bed hospital, Civil Hospital, Ahmedabad

Study method: Cross-sectional study

Sample size: 500

Inclusion criteria

- All mothers who recently delivered in 1200 bed Civil, Hospital Ahmedabad
- All mothers who gave consent were included in the study.

Exclusion criteria-

- All mothers who did not give consent were not included in the study.
- Those mothers who have had spontaneous abortions.

METHOD

The patient's consent was taken.

The patient was asked questions from the questionnaire in an understandable language.

Once all the questions were asked and answered, myths and misconceptions were resolved and the patient was informed about any ill practice she was following.

The data was collected and statistical tables were made.

RESULTS AND ANALYSIS

Table 1: Study Participants' knowledge about breastfeeding

Attribute	Frequency (in %)	Number (out of 500)
*Duration of Exclusive Breastfeeding		
6 months	98.2%	491
< 6 months	0.9%	5
0 months	0.9%	4
*Timing of initiation of breastfeeding post-delivery		
0-30 mins	35.7%	179
30 min-1 hour	30.4%	152
1-4 hours	21.4%	107
<24 hours	2.7%	13
2nd day onwards	0.9%	5
3rd day onwards	0.9%	4
Wasn't able to breastfeed	8 %	40
*Till what time should the baby be allowed to breastfeed		
Till the time the baby wants	73.2%	366
15-30 mins	14.3%	72
0-15 mins	12.5%	62
*When should you initiate the breastfeed?		
when they wake up, start moving their heads and open their mouths	44.6%	223
when they start crying	55.4%	277
*Frequency of breastfeeding in 24 hours		
3-8 times	41.9%	210
>= 8 times	58.1%	290
*Should pre-lacteal feeds be given?		
should not be given	92.9 %	465
should be given	3.6%.	18
maybe	3.6%	17
*Do you know how to express milk		
Yes	54.5%	273
No	34.8%	174
Not sure how	10.7%	53
*Methods of artificial feeding		
Spoon and Bowl	78.6%	393
Bottle	13.4%	67
Don't know	8%	40
*Opinion of benefits of breastfeeding to mother and child over other milk (eg. cow milk)		
Beneficial	75.9%	380
Not beneficial/ same as other milks	13.4%	67
Don't know/ Not sure	10.7%	53
*Awareness about the complete vaccination schedule to be followed for their infant?		
yes	72.3%	362
no	16.1%	80
not fully aware	11.6%	58
*Common problems faced by mothers during breastfeeding		
Breast engorgement	42.9%	215
cracked nipples	4.9%	24
Disproportion of size between both breasts	4.9%	24
Not enough breastfeeding	8 %	40
Mastitis	8.1%	41
No problem	31.2%	156

DISCUSSIONS

1. Of the women, 98.2% were aware of the recommended duration of time for exclusive breastfeeding. An independent, favorable predictor of breastfeeding initiation and duration is awareness of the recommendation to breastfeed exclusively for six months. Improving mothers' awareness of the recommendation and strengthening their intention to breastfeed could lead to improved breastfeeding initiation and duration. Few studies have examined whether mothers truly comprehend the WHO's recommendations for breastfeeding and what those recommendations mean to them (5).

The mothers who have an intention to meet the recommendation to breastfeed exclusively up to 6 months are more likely subsequently to initiate breastfeeding and thus creating awareness about the same is very important.

2. Only 66% of women were aware of the WHO guidelines about breast feeding their child within one hour of birth. This is in comparison to data In India where 78.9% of deliveries take place in hospitals, but only 42.6% of new women start breastfeeding within an hour of giving birth, according to the National Family Health Survey-4. (6).

The rest of the women did not know the significance of this. According to studies Mother-infant pairs living together, more number of ANC visits prior to delivery, and vaginal delivery were the factors that independently predicted the practice of early initiation of breastfeeding. Also factors like the mother's age, ethnicity, the newborn's birth order, if the mother and infant shared a room, whether the newborn received pre-lacteals, or infant milk formulae, and higher five-minute APGAR scores also impacted early initiation of breastfeeding (7). To initiate EIBF, healthcare personnel and nursing staff must be made aware of these challenges and explained various breastfeeding positions, including the practice of breast-crawling during cesarean sections. In order to increase the EIBF, this also calls for suitable policies and standards surrounding deliveries at the healthcare facility.

3. 73% of women feel that the baby should be allowed to breastfeed till the baby wants to. Ideally, babies who are feeding well will feed for between five and 40 minutes at each feed. The baby will let you know when they've had enough milk. They will usually come off the breast themselves, look sleepy or calm, and look around. Although, there is no general rule to this. Women should not worry about duration, and ensure that the baby is getting enough breast milk by feeding frequency, wet and dirty diapers, and weight gain.

4. Of the women, 41.9% of mothers believed in breastfeeding 3-8 times in a day and the rest 58.1% of females breastfed more than 8 times. On average, most exclusively breastfed babies will feed about every 2 to 4 hours. Some babies may feed as often as every hour at times, often called cluster feeding. Or may have a longer sleep interval of 4 to 5 hours. Therefore on average a baby will breastfeed about 8 to 12 times in 24 hours. (8)

These findings supported that many mothers were not able to identify the cues for breastfeeding and the babies were not given adequate feed.

5. Even though preterm feeding is a nutritional malpractice that is deeply ingrained in poor nations, it hinders the adoption of appropriate breastfeeding techniques and raises the risk of infant disease and mortality. In the studied area, prelacteal feed was only 3.6% prevalent. Additionally, 3.6% of mothers were in the dark. Mothers knew that prelacteal feeding should not be administered, according to 92.9% of them. Compared to women who received breastfeeding counseling, mothers who did not receive such counseling were five times more likely to engage in prelacteal feeding. This conclusion is supported by a study conducted in Maharashtra, India (9). This could be the result of insufficient training in breastfeeding advice or a lack of understanding regarding the significance of colostrum and its effects on health.

6. 34.8% of mothers were ignorant of the process of expressing breast milk, 10.7% of women were unsure of how to do so, and 54.5% of mothers knew how to express milk. Breastfeeding is being expressed more and more, especially in wealthy nations. Simultaneously, breast pumps have developed into more advanced and visually pleasing devices that are suitable for home usage and are easier to find. When Labiner-Wolfe et al. examined data from the Infant Feeding Practices Study II (IFPS II) in the United States, which was conducted between

2005 and 2007, they discovered that 85% of nursing moms whose babies were in the youngest age group had expressed milk successfully at some point after the baby was born. Only discussing the preceding two weeks, 68% of the nursing moms of the infants in this.

7. 78.6% of mothers said that spoon and bowl were their preferred artificial feeding methods. Mothers chose bottles 13.4% of the time, while 8% were unaware of artificial feeding techniques. The World Health Organization advises against using bottles and teats for feeding and in favor of cups or spoons for feeding when expressed breast milk or alternative feeds are medically needed. When it comes to safety, research on respiratory stability indicates that cup feeding is just as stable, if not more so, than bottle feeding for healthy pre- and full-term neonates. The fact that a higher percentage of oxygen-desaturated preterm and regular-term newborns were bottle-fed raises the possibility that cup-fed babies have more stable physiological conditions (11). As a result, policymakers and healthcare professionals should consider these knowledge gaps when planning future actions.

8. From the study, 75.9% of the women believed that breastfeeding had significant benefits to both mother and child compared to other milk sources like cow milk. Indeed breast milk is superior to most milk sources for a newborn. According to WHO (12), breast milk is a significant source of energy and minerals for infants aged 6 to 23 months. It can meet half or more of a child's energy requirements between the ages of 6 and 12 months, and one-third between the ages of 12 and 24 months. Breast milk is also an important source of energy and nutrition during illness, and it helps to prevent mortality in malnourished children. Longer breastfeeding periods benefit mothers' health and well-being as well by lowering the incidence of ovarian and breast cancer and allowing for more spaced pregnancies.

Exclusive nursing of newborns under 6 months has a hormonal effect that causes a lack of menstruation for that period, known as Lactation Amenorrhea, a risk-free (though not fail-proof) natural birth control strategy for the mother. Therefore, awareness creation about the benefits of breast milk is important to guide new mothers towards exclusive and efficient breastfeeding practices.

9. Childhood immunization involves preventing, managing, or eradicating a variety of pediatric infectious diseases while also increasing an infant's life expectancy (13) and halting infant and child deaths due to preventable causes. In our study, 72.3 % of mothers had complete knowledge of the vaccination schedule that was to be followed for their infant. The rest of the mothers had inadequate or unsatisfactory knowledge. Postnatal time can be considered the most appropriate time to counsel nursing mothers about infant vaccination.

In accordance to a similar study conducted in Malaysia (13), demographic factors such as age, education, and occupation are important factors in determining the knowledge and attitudes of postnatal moms towards vaccination, and it is anticipated that low education, particularly among middle and older moms, contributed to lack of adherence to the immunization schedule.

Therefore, proper measures should be taken to address this negative attitude of mothers towards vaccination effectively.

10. Breastfeeding problems are one of the biggest barriers for mothers to adhere to the practice of consistent and exclusive breastfeeding.

In our study, 68.8% of the mothers faced one or more breastfeeding problems during the postnatal period, the most common being breast engorgement(42.9%), followed by not enough breast milk(8%), mastitis(8.1%), cracked nipples(4.9%) and disproportion of size between both breasts(4.9%).

In accordance with a similar study conducted in Kinshasa (14), the first month following delivery is critical for the occurrence of such problems. The majority of these issues can be avoided by using proper nursing techniques and emptying the breasts frequently and thoroughly.

Therefore, proper health assistance and awareness delivered through healthcare professionals should be encouraged to treat and prevent such issues.

CONCLUSION

This study analyzed breastfeeding awareness and practice in postnatal mothers who delivered in Civil Hospital, Ahmedabad using a questionnaire. More than 95 percent of women were aware of the concept of exclusive breastfeeding till 6 months. Major problems faced by women were breast engorgement during feeding followed by not enough milk and mastitis. Only 50 percent of women knew how to express milk and therefore women need to be made aware of these techniques. Less than 45 percent of mothers knew the significance of initiating breastfeeding within 1 hour of delivery. Educating the mothers through health personnel and nursing staff will significantly increase these numbers. About 75 percent of mothers used a spoon and bowl during artificial feeds and they knew that it reduced the chances of infection as compared to bottles.

So to conclude, though the awareness regarding proper techniques of breastfeeding is increasing, still a lot needs to be done by all the sectors of the society. Effective strategies include improving the current healthcare system, promoting it in the media, and adding a mandatory grade 12 course that addresses common health issues (such as acute respiratory tract infections, acute gastroenteritis, and the disadvantages of infant milk formula) as well as the benefits of breastfeeding.

REFERENCES

1. Rajak, P., Krishna Mandal, A., Kumar Jana, J., & Gayen, S. (2023). Knowledge of Breastfeeding Practices Among Mothers Attending a Tertiary Care Setting in East India. *Cureus*, 15(4), e37146. <https://doi.org/10.7759/cureus.37146>
2. Romano, M., Cacciatore, A., Giordano, R., & La Rosa, B. (2010). Postpartum period: three distinct but continuous phases. *Journal of prenatal medicine*, 4(2), 22–25.
3. *Women and children & #8217; s wing of Ahmedabad Civil Hospital reopens for regular patients*. (2021, September 18). The Indian Express. <https://indianexpress.com/article/cities/ahmedabad/women-and-childrens-wing-of-ahmedabad-civil-hospital-reopens-for-regular-patients-7517568/>
4. Kumar, R., & Mundhra, R. (2021). A Cross-Sectional Study of Knowledge, Attitude, and Practice toward Breastfeeding among Postnatal Mothers Delivering at a Tertiary Care Center in Garhwal, India. *International journal of applied & basic medical research*, 11(2), 64–69. https://doi.org/10.4103/ijabmr.IJABMR_605_20
5. Wen, L. M., Baur, L. A., Rissel, C., Alperstein, G., & Simpson, J. M. (2009, January 1). *Intention to breastfeed and awareness of health recommendations: findings from first-time mothers in southwest Sydney, Australia*. *International Breastfeeding Journal* - Electronic Edition -. <https://doi.org/10.1186/1746-4358-4-9>
6. Mary, J. J. F., Sindhuri, R., Kumaran, A. A., & Dongre, A. R. (2022). Early initiation of breastfeeding and factors associated with its delay among mothers at discharge from a single hospital. *Clinical and experimental pediatrics*, 65(4), 201–208. <https://doi.org/10.3345/cep.2021.00129>
7. Boakye-Yiadom, A. P., Nguah, S. B., Ameyaw, E., Enimil, A., Wobil, P., & Plange Rhule, G. (2021, June 30). *Timing of initiation of breastfeeding and its determinants at a tertiary hospital in Ghana: a cross-sectional study*. *BMC Pregnancy and Childbirth* (Online). <https://doi.org/10.1186/s12884-021-03943-x>
8. *How Much and How Often to Breastfeed*. (2022, April 11). Centers for Disease Control and Prevention. <https://www.cdc.gov/nutrition/infantandtoddlernutrition/ breastfeeding/how-much-and-how-often.html>
9. Dawal S, Tambe IF, Saleem T, Priyanka S, Doibale MK (2014). Study of prelacteal feeding practices and its determinants in a rural area of Maharashtra. *Sch J Appl Med Sci*. <https://journals.indexcopernicus.com/api/file/viewByFileId/364092.pdf>
10. Labiner-Wolfe, J., Fein, S. B., Shealy, K. R., & Wang, C. (2008). Prevalence of breast milk expression and associated factors. *Pediatrics*, 122 Suppl 2, S63–S68. <https://doi.org/10.1542/peds.2008-1315h>
11. McKinney, C. M., Glass, R. P., Coffey, P., Rue, T., Vaughn, M. G., & Cunningham, M. (2016). Feeding Neonates by Cup: A Systematic Review of the Literature. *Maternal and child health journal*, 20(8), 1620–1633. <https://doi.org/10.1007/s10995-016-1961-9>
12. *Infant and young child feeding*. (2023, December 20). <https://www.who.int/news-room/fact-sheets/detail/infant-and-young-child-feeding>
13. Balbir Singh, H. K., Badgujar, V. B., Yahaya, R. S., Abd Rahman, S., Sami, F. M., Badgujar, S., Govindan, S. N., & Ansari, M. T. (2019). Assessment of knowledge and attitude among postnatal mothers towards childhood vaccination in Malaysia. *Human vaccines & immunotherapeutics*, 15(11), 2544–2551. <https://doi.org/10.1080/21645515.2019.1612666>
14. Babakazo, P., Bosonkie, M., Mafuta, E., Mvuama, N., & Mapatano, M. A. (2022). Common breastfeeding problems experienced by lactating mothers during the first six months in Kinshasa. *PloSone*, 17(10), e0275477.