

Close  
to  
the  
Heart



La Leche League Asia  
Late-Year 2010  
Volume 11, Number 3

"Breastfeeding  
is mothering  
close to the heart"

Making More  
Milk

Weaning Twins



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## Mission Statement

La Leche League International is a non-profit, non-sectarian, organization. Our mission is to help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education and to promote a better understanding of breastfeeding as an important element in the healthy development of the baby and mother. All breastfeeding mothers, as well as future breastfeeding mothers, are welcome to come to our meetings or to call our Leaders for breastfeeding help.

## Contribution Deadlines

**Contributions received by  
1<sup>st</sup> March, 2011 will be included  
in the Early-Year 2011 issue.**

Contributions received by  
1<sup>st</sup> July, 2011 will be included in  
the Mid-Year 2011 issue.

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**Article and stories for  
Close to the Heart  
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If you have a story you'd like to  
share, please let me know! Even if  
you're not a writer, you can tell your  
story and have it written by someone  
else. Contributions may be edited  
for clarity and in order to fit into the  
space available. They may also be  
published in other LLL  
publications

## Editor's Corner

Anyone read a good book recently? I have – *The Womanly Art of Breastfeeding* – 8th edition! I've got a few other editions of Womanly Arts on my bookshelf, from previous years, but I think this new one is substantially different. And I love it! The writing style feels more contemporary and it includes many more stories from 'real life' mothers. There are new sections on sleep, extended nursing and more space given to the concerns of working mothers. In the first twenty minutes of reading it I had already learnt some new facts about breastfeeding.

Perhaps most significantly, the 8th edition of *The Womanly Art of Breastfeeding* treats breastfeeding as the normal food for a human baby. This makes artificial feeding a poor second choice, with inherent health risks for mother and baby. In the past, at La Leche League we've tended to beat about the bush on this. We've talked about the benefits of breastfeeding, but shied away from pointing out the health risks of formula. The 8th edition of *The Womanly Art of Breastfeeding* states plainly the risks of formula feeding and thereby gives us in the La Leche League community the words and authority to do the same.

Christmas is just around the corner. For anyone who celebrates Christmas with present giving – this book would make a great gift for anyone who is pregnant or breastfeeding.

With the new *Womanly Art of Breastfeeding* hot off the press, it was a great moment to welcome one of the book's authors, Diana West, to Hong Kong as keynote speaker at the La Leche League Hong Kong Seminar 'Making More Milk'. Diana was an inspirational and fantastically well-informed speaker. You can read an outline of her talk on page 10.

I hope you also enjoy reading about the ups and downs, joys and frustrations of the 'real life' mothers who have contributed to this issue of Close to the Heart. With articles from mothers in Saudi Arabia, Hong Kong, China, and Japan, we have a great mixture of cultures and experiences. I really enjoy reading your stories - so please keep your contributions coming!

Best wishes,

**Maggie**

## Weaning our Wonderful Twins

It was tough to get going with breastfeeding my twin boys. We had all the usual challenges that come with twins – prematurity, low birth weights, C-section recovery, acid reflux, tight frenulum, and the list goes on. I was determined to succeed though, and after a difficult first week, we were happily breastfeeding during the day.

At night, following our paediatrician's recommendation, we gave two bottles of expressed breast milk with high calorie formula added to it.

The babies were premature and low birth weight, so this was recommended as a temporary measure to give them a boost. As my husband fed the babies I hooked up to the hospital-rented pump and provided the milk for the next night.

After one month our pediatrician said we could stop the bottles and so we were officially “EBFing” (exclusively breastfeeding)! After a few more weeks I figured out how to use the special nursing pillow so that I could feed the boys at the same time. This was the best time

ever...sometimes we stayed on the couch for a nap until the next feed - it was blissful.

I started to venture out with my babies and knew all the nursing lounges around town and planned my day to stop in the right places at the right times. Luckily for me,

the boys fell into a nice schedule, which made life much easier.

Breastfeeding just naturally continued because I saw it as the best nutrition for my babies. Nursing had a wonderful

calming effect on me and it was, above all, the easiest way to feed the boys wherever and whenever. There was no messy formula, no bottles, no washing up and sterilizing and less to carry (a BIG plus to a twins mummy!).

That was the really lovely baby stage. Next came the beginning of the weaning process. For me, weaning lasted almost two years. The boys started solids at about seven months. We started with fruit and cereals and by nine months old they were



eating ground up meat and all kinds of veggies. At Christmas we made our annual trip back home. I remember sitting on the couch nursing and my mother asking “don’t you think you ought to stop doing *that* soon?” I simply responded with “No”, and that was the end of the conversation. Shortly after that trip we found out we were moving to China. Now came the real motivation to keep on nursing - how did I know if the food was safe for my babies in China? In fact, a few months after we arrived in China it turned out that some milk and formula had been contaminated with melamine, an industrial chemical. Some babies died or got very sick after drinking the formula milk - so I was vindicated in my suspicions and very relieved I had chosen to continue breastfeeding.

So, on we went, gradually reducing the feeds down to once a day by the time they were two years old. I always timed it so we nursed at home or at someone's house because I was not comfortable "tandem" nursing in public, but we had a lovely community of mums and babies in our city and everyone was supportive.

It was easy to stop nursing at bedtime because I just asked my husband to put them to bed, but the morning was the last nursing session to go and the one that went on until about 28 months. From about 22 months I had adopted a “don’t ask, don’t get” policy, knowing that we were all ready to start winding down. The hardest thing was the mornings, because mummy was still in her pyjamas, everyone was still sleepy and cuddly and it was a nice time for us, but my older twin was only really

playing; four or five sucks and done. They always wanted to nurse together and it was getting difficult with them getting so big, so then we would have tears from one while I tried to nurse the other. In the end, I went into their room in the morning with a straw cup of imported cow’s milk and explained how “big boys” don’t need to get their milk from mummy any more; they can have their milk from a cup. It really took several months to finally say we were done, and I have no idea of the date we were fully weaned! In fact, my younger twin still asks me to see if there’s any milk left sometimes and he’s almost three and a half. I just tell him that he’s not a baby any more so he doesn’t need to get milk from mummy and he’s happy to have a little snuggle and be proud that he’s a big boy.

I was happy to have nursed my twins for so long. In the peak of toddlerhood it was wonderful to be able to have a little calm, quiet time with my busy boys. We still get that time now they are weaned because they come and snuggle with me every morning when they wake up, sometimes a bit earlier than I would like! I am proud to have given my boys the security and nutrition they needed as babies, in spite of so many people telling me it would be too difficult to nurse twins. Now I can share with other twin mums that “you CAN do it”, and it’s really worth the determination and effort required to get started. Once all the hurdles are overcome, and everyone starts to ask when you’re going to wean, just know that it will happen when you are all ready. It will happen slowly and with love.

## Nursing – a lifestyle choice for a lazy mum?

Another issue of *Close to the Heart* and I begin to think about how many editions I have read; how many times I have nodded in agreement with the philosophies of the writers, recognised the similarities in my own life and laughed and cried. More generally though, I have felt supported and thoroughly engaged by this diverse community.

My own journey with breastfeeding feels like it has been quite a ride, then when I reflect I understand that this means it is also pretty average. My children and I have experienced the spectrum of challenges breastfeeding has to offer, and together we have overcome them. This has encompassed my first son being rushed into the NICU at birth (where breastfeeding was not well supported and expressing milk began), breastfeeding whilst pregnant, tandem breastfeeding, mastitis and thrush, nighttime nursing and surgery whilst breastfeeding. But this is what happens when the journey of breastfeeding incorporates six years and embraces three children.

Today I am breastfeeding my four-month baby, and realise that although the breastfeeding journey has ended for the other two, it is just really beginning for us. I have time to contemplate how I got here.

I can remember the beginning so clearly, I knew I was going to breastfeed. My husband was keen and has always been a great supporter as well as an advocate of breastfeeding. He was there when I couldn't get the expressing unit to do anything in the hospital and when I couldn't get the baby to latch on. He held my hand when I was stamping my foot in pain when the baby didn't latch on quite right. Later he was the one to warm up my expressed milk to bottle-feed the babies when I had to return to work. No one knows more about how to store, prepare and deliver expressed milk as my husband.

I took each day, one at a time, I wanted to reach the six-week milestone and it wasn't easy. But I did it, and then I aimed for three months, although secretly I was really just hoping to get through another day. But then we turned a corner and things began to click. Looking back I think that although I was mastering the skill of breastfeeding and my body was better able to regulate itself, the baby was also developing and becoming stronger, able to hold his head, able to take more of a lead role in breastfeeding.

And therein lies the breastfeeding relationship: sometimes its hard, sometimes its easy, sometimes we breastfeed because I want comfort, sometimes he wants the comfort, sometimes it hurts, sometimes it's rushed, and sometimes I breastfeed simply because he's hungry.

I breastfeed because it feels right (physically and logically), its cheap and its easy, and essentially I am a person motivated by laziness. I believe that we are a part of the natural world and that it



benefits us to live by nature's laws (but that's a whole different story). For thousands of years, breastfeeding was the only way to feed our babies and I don't think that we have managed to improve on this.

I like to breastfeed when my children have inoculations when we travel, and especially when we fly on aeroplanes. Breastfeeding has allowed me a close bond with my very independent children. It has been the first source of nutrients and immunology for my children. As I watch them grow, I am proud to say that they are breastfed and it is just as miraculous watching a pregnancy, as watching a baby grow simply from my milk.

Breastfeeding has played such a huge role in my life, in the lives of all my children and my husband for the last six years that I find it hard to imagine life without it. Breastfeeding is a lifestyle choice; it has dictated my lifestyle for the last six years. I chose it and I embrace it. I wouldn't change it for the world. In the same way that parenting is a lifestyle choice and I chose that too.

But I am human; I have my own aspirations, dreams, and selfish desires. There are some days as a parent when I find it tough, when I don't

know if I am very good at the job, or I feel like I need to get to the end of the day so that we can begin again tomorrow. That is how I feel about breastfeeding, I find that it is quite challenging at times too. I go to LLL meetings and I hear from the mothers with newborns beginning their journeys, finding things tough, sharing stories and needing some support. But its funny, because that need never goes away.

I long for a day when I don't need to think about expressing or if the baby needs a feed, I wish I could have my life to myself again, to go to the hairdressers and get my nails done without having to schedule it, rush it and feel guilty. Yet at the same time, when I contemplate never breastfeeding again... that thought is a little scary! But . . . never having to get my boobs out in public again, that sounds just fine with me!

I know that with my new baby we will have our "ups and downs" too, and our own individual challenges to overcome, but it is good to know that there are other people out there who have been or are going through similar challenges. It doesn't matter how long you breastfeed, support is still a prerequisite for breastfeeding, so thank you La Leche League for being there.



## Pause for Thought

**“My thinking on milk has changed totally. I used to think of it as the best source of nutrition. Now, it's looking like milk is really designed to be protective.”**

**David Newburg**  
**Associate Professor of Paediatrics, Harvard Medical School**

## The Importance of Good Support



My breastfeeding experience is similar to many mothers, but I am very fortunate that I found La Leche League; this contact helped our breastfeeding run more smoothly.

My baby boy— my little treasure — was born by cesarean section at noon on 20<sup>th</sup> February 2009. In the afternoon, the nurse squeezed some colostrum from my breast, confirmed everything was in order and let my baby suckle. I felt so fortunate. Previously I'd been worrying that my breasts were too small and I wondered if they could really produce milk. Now I find those thoughts quite ridiculous, but for a person without prior knowledge of breastfeeding — all sorts of misconceptions are possible!

I stayed in the hospital for three days and then I had a postnatal caregiver to help me. Right from the beginning this woman said I didn't have enough milk and suggested I top up with formula milk after each feed. At the time I was a new mum who didn't know anything about breastfeeding, so I thought she must be right and I did as I was told.

After a few days my breasts started to swell as the milk 'came in'. My baby fed very frequently. Day and night he fed about every two hours. Sometimes the time between feeds was even shorter — on those days he fed 15 to 18 times in one day! He seemed to feed most frequently at night, but he didn't like to feed lying down, so I always had to sit up to breastfeed. It was so exhausting!

When my baby was six months old I went back to work. My office was not too far from my home so I came home every lunchtime to breastfeed and I did not need to pump whilst at work. During this time, I was so grateful to my husband for his support; he gave up his job to look after our baby himself. He believes very strongly in breastfeeding. When he was a child he was breastfed for a long time and he hopes our baby will breastfeed even longer!

I found out about La Leche League from the books written by Xiao Wu, a La Leche League Leader in Beijing. I bought a whole set of her books and then found the La Leche League website. After a while, I started attending LLL meetings in Beijing. I went to my first meeting when my baby was nearly six months old. Every time I went to a meeting I learnt something new. Many of my questions were answered at these meetings and I became more confident and sure about breastfeeding.

In brief, I believe a new mother needs to do some studying and to be aware of the most up-to-date information. She must also be able to distinguish the good information from the bad! This is especially true at present because our environment is not very supportive of breastfeeding.

Now my baby is nearly one year and nine months old and breastfeeding is going smoothly. I do get tired, but seeing how happy and healthy my baby is I have decided to continue. I hope he will be able to wean when he is ready. I'm very happy to tell other mothers about the concepts found at La Leche League and to help keep mothers on the right track so they can avoid some common breastfeeding problems.



# Mothers Making History!

by Anne Batterjee  
Saudi Arabia

La Leche League Saudi Arabia participated in a world-breaking event in Saudi Arabia, when thousands of women came together to form the largest human pink ribbon.

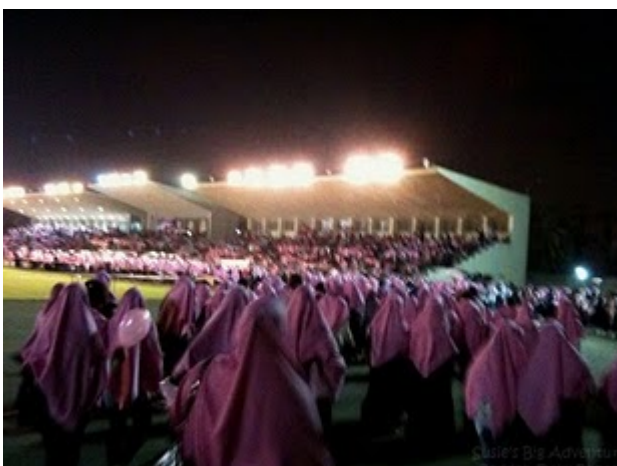


Photo by Rania Razes

The event, in October, was to raise awareness of the battle against breast cancer. Together the women successfully created a new record for the Guinness Book of World Records.

I don't know if the rest of the world actually realizes or appreciates what a seemingly impossible feat this really was to achieve in a deeply cultured and strictly religious country like Saudi Arabia.

Logistically speaking, the odds were against us. Since females are prohibited from driving here what that means is that every single woman who participated in the event was driven to the venue by a man. Organizing and pulling off an event like this was a daunting task in a country where mass gatherings are discouraged and where men and women mingling together in public places is strictly forbidden. There were no men allowed inside the Ministry of Education Sports Stadium, which had never before been used to host an event for women.



Each of the over 6,000 women who entered the stadium was given a flyer entitled "Breastfeeding Reduces Your Risk of Developing Breast Cancer."

The heat, the humidity, the crowds, the pushing, the waiting, the standing, the discomfort, the sweating - was it all worth it? YES!!!

**This was an historic achievement in so many ways for the Kingdom of Saudi Arabia and for women.**

# In the News

## New Languages for LLL

La Leche League welcomes Leaders in Hong Kong and United Arab Emirates who bring new languages to LLL.



In Hong Kong Helen Cho is LLL's first native speaking Korean Leader. Helen says she's really excited at the prospect of starting a new Korean speaking group. "A lot of Korean mothers think breastfeeding is a sacrifice and a painful job, but it's not true. I want to help them to find the joy of breastfeeding", she says.

In United Arab Emirates, LLL welcomes Noura Abbas Al-Khoori who lives in Abu Dhabi with her husband and three children. Noura is keen to reach out to Arabic speaking mothers in her community. "I'm the only Leader here who speaks Arabic and I feel there is always something positive we can do in society to spread the goodness of breastfeeding", she says.

## Successful Cantonese Seminar!

La Leche League Hong Kong held its first Cantonese language seminar in November. Over thirty people attended, many of them pregnant mothers. The seminar looked at how to get breastfeeding off to a good start during the early days after baby's birth. This was followed by small group sessions to encourage discussion among the participants. "We tried to create a cosy atmosphere which encouraged mothers to participate", says LLLHK Leader, Heidi Lam. "I hope we can introduce more mothers to La Leche League in this way", she adds.

## New Hong Kong Meetings!



Watch out for some new LLLHK meetings next year. Regular meetings will begin in Tai Po, New Territories and for working mothers there will be Saturday morning meetings in Braemar Hill, Hong Kong Island.

Check the website for more details: [www.lllhk.org](http://www.lllhk.org)

## LLLHK goes Baby Friendly

La Leche League Hong Kong Leader Maggie Yu has been appointed an Executive Committee Member of the Baby Friendly Hospital Initiative Hong Kong. Her role will include advising on policies to make public hospitals in Hong Kong more breastfeeding friendly.



# Questions Mothers Ask

## Q: Are there any foods I should avoid while breastfeeding?

A: Beef? Crab? Mangos? In Hong Kong, mothers love talking about food. But some mothers worry that the food they eat might give their baby an upset stomach, make baby gassy or cause rashes. Some of my British friends carefully avoided eating chocolate while breastfeeding as they thought it might make the baby fussy.

There are lots of ideas about what a breastfeeding mother should – and should not eat. But in reality breastfeeding mothers can be more relaxed about their food choices than when they were pregnant.

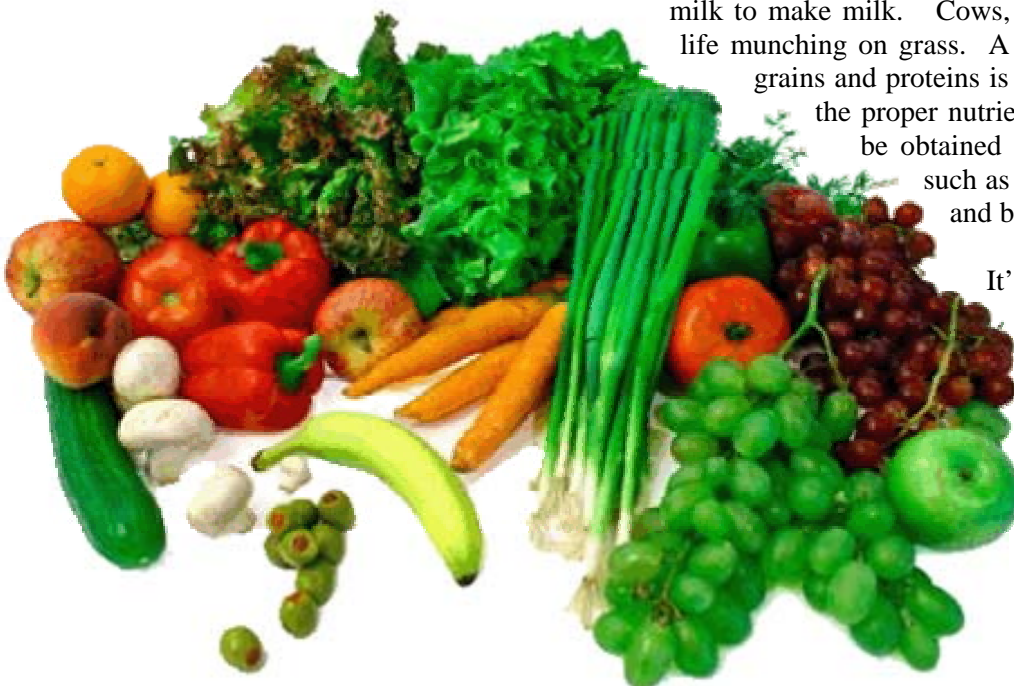
One of the LLLI philosophy concepts states, "*Good nutrition means eating a well-balanced and varied diet of foods in as close to their natural state as possible.*" Thus, in general, no food is excluded from the list of foods a breastfeeding mother should eat. Obviously, it is best to make sure the foods you eat are fresh and healthy. The concept of variety is important, because by eating a number of foods, you can be sure to obtain different nutrients and do not eat too much of any one food.

Every culture has lists of foods that are "good" and "bad" for breastfeeding mothers. It happens very often that foods believed to be good in one culture are considered bad in others! In Italy, mothers are often told not to eat garlic, cauliflower, lentils and red peppers. In India most mothers eat all these things and breastfeed very happily. Actually, in parts of India they believe that garlic helps a mother to breastfeed successfully!

Generally, anything you are happy eating is okay for you to eat while you are breastfeeding. Of course, there are exceptions to this rule. If you have a family medical history of allergy, it is worth being careful about your diet and avoiding known allergens during pregnancy and breastfeeding. If you notice that your baby reacts badly after you have eaten something, it may be best to leave that food out of your diet for a while.

It is usually an advantage to a breastfeeding baby for his mother to eat a varied diet because the flavours from the foods she eats change the taste of her milk, providing her baby with a preview of the tastes he'll experience at the family table when he's older.

Some mothers wonder if they should drink lots of milk in order to help the body make milk. The answer is NO. Look at the rest of the animal kingdom. No other mammal drinks milk to make milk. Cows, for example, spend most of their life munching on grass. A healthy diet of vegetables, fruits, grains and proteins is all that a mother needs to provide the proper nutrients to produce milk. Calcium can be obtained from a variety of nondairy foods such as dark green vegetables, seeds, nuts and bony fish.



It's worth remembering that breastfeeding, on the average, burns 200 – 500 calories per day. That's above and beyond what you need to maintain your pre-pregnancy weight. It's like doing exercise – without doing any exercise. So it seems to me, this would be an excellent time to reach for that bar of chocolate...

# Making More Milk



Diana West, IBCLC, gave the keynote lecture at the La Leche League Hong Kong Breastfeeding Seminar 'Making More Milk'. For those of you who couldn't make it to the seminar, Maggie Holmes recalls the main points of Diana's talk.

As a La Leche League Leader, I would say the most common reason for a call to our hotline is a query about milk supply. Concerns about low milk supply are probably also the number one reason why women quit breastfeeding. So Diana West had an attentive audience as she outlined some strategies mothers can use to make more milk.

There are a number of reasons why a mother may experience low milk supply. However, the methods of increasing milk supply are based on the same principle. The more milk you remove from the breast – the more milk the body will make. A mother with a milk supply problem may

ultimately not be able to create a full supply for her baby. But increasing the amount she makes ensures baby gets as much of this wonderful substance as possible. It can also help the mother feel positive about the breastfeeding experience.

## Maximize Milk Production Before Birth

Mothers who have a previous history of supply problems can get ahead of the game by stimulating the milk production process before baby is born. She can begin hand-expressing milk once or twice a day from the 35<sup>th</sup> week of pregnancy. This is easiest done after taking a hot shower or when the breasts are warm. There is no evidence that expressing milk will cause pre-term labour, but if the mother experiences any cramps or contractions she should stop. The colostrum that she has expressed can be drawn up into a syringe, frozen and taken to the hospital to use if supplementation is necessary.

## How the Hormones Help

A good milk supply is the result of the mother's hormonal response to the arrival of a new baby. The breast contains hormonal receptors, which seem to be established in the breast during the first 2



or 3 weeks after birth. These receptors are created in response to milk removal. So remove more milk during this time and you get more receptors. The more receptors you have, the more effective the hormones are. The more effective the hormones are – the more milk you make. This means that removing extra milk during these first couple of weeks – even if it's only done on a temporary basis – helps create the best possible starting point for the breast's capacity to make milk.

To put this principle into practice, the mother can hand express colostrum during the first few days after birth. Hand expressing can do this job well – pumps can't usually deal with the thick and sticky nature of colostrum. Hand expressing helps move the thick colostrum through the breast and it can be collected in a syringe or small cup. Once the colostrum has changed to the whiter, higher volume breast milk, mother can use a pump to express milk in-between feeds and help build up those hormone receptors.

### Snuggle Up With Baby

If a mother has low milk supply and her baby is latching on well – the most obvious course of action is to increase breastfeeding frequency. In the first few weeks, it's best not to go longer than 2 or 3 hours between daytime feedings or longer than one 4 – 5 hours sleep stretch each day.

You've heard of honeymoons? Well how about a 'babymoon'? Mum and baby go to bed for 2 or 3 days and spend the time cuddling, getting lots of skin-to-skin contact and nursing. Mum can put a TV in the room – pile up the books and magazines and arrange for a supply of snacks and drinks. This concentrated time of increased nursing can sometimes be all

that's needed to get mother and baby over the crisis period and give her milk supply a crucial boost.



### Thoughts on Pumping

Strategies to increase milk production often include pumping. So what's the best way to go about it? There is not one fixed rule that will suit all cases. It's important that a mother is realistic about how much time she can spend pumping. There's no point in pumping to the extent where mother is exhausted or too tired to put the baby to the breast. Flexibility is important both in terms of how frequently the mother pumps and the length of each pumping session. Some general tips include:

- Empty the breast as thoroughly as possible
- Use a hospital grade double pump when possible
- Pump for 2 -5 minutes after the milk stops flowing rapidly
- Short, frequent sessions are most effective

Nighttime pumping takes advantage of higher levels of prolactin (the milk

producing hormone), which occur naturally during the night hours. Ideally a mother can pump at least once during the night. Instead of setting an alarm clock and being woken rudely from a deep sleep, Diana West recommends trying a more natural method of self-waking... i.e. drinking a mug of water before going to bed. This will most likely have the effect of mother waking during the night to go to the toilet –and provides a perfect opportunity for a pumping session.

### Take A Nap!

Mothers who are trying to increase milk supply can easily find themselves overwhelmed. There are only 24 hours in one day – so how do you find the time to pump frequently, store the milk, feed the baby the expressed milk AND get the baby to the breast?

Now is the time to get help with as much of the household work as possible. It's also important to know when to STOP. If all the effort put into pumping is making mother exhausted to the extent that she

can't be a happy, involved mother, then it might be time to take a break.

Diana's advice is to pump like crazy for a couple of days and then take a few days off. The rest days are a time for the mother to catch up on sleep and have uncomplicated cuddling times with her baby – without having to even think of pumping. This time off the 'hamster wheel' can revitalize the mother and give her the inner strength to continue her pumping schedule at a later date.

In fact, Diana's recommendation is that whenever possible, a new mother, pumping or not – will always benefit from a nap. Sleep has been shown to increase levels of prolactin (the milk-making hormone) and we all know that a good chunk of sleep can help us feel more positive about everything.

So when in doubt...

**SLEEP.**



Mother and babies from China at LLLHK Seminar

# Spotlight on LLLToshima

**Toshima is a bustling metropolitan area in North West Tokyo, Japan. It is also famous for a large amusement park with roller coasters, swimming pools and an American carousel brought over from New York. Mothers at the LLL Toshima Toddler Meeting told *Close to the Heart* why LLL meetings are so valuable for mothers of slightly older babes.**

I like the atmosphere of being able to freely share. It is very helpful to find answers for concerns that I have within that day. I also appreciate being able to hear other mother's experiences.

**Rie Hata**

LLL meetings for me are a place to relax and take a breather in a warm enveloping atmosphere. Monthly meetings are a special time that gives me a chance to talk about how things are going for me now and reflect on how much my child and I have changed over the past month. I enjoy being able to share my thoughts about breastfeeding and parenting which normally I would not have an opportunity to do. Listening to other mothers makes me realize that though some of our experiences may vary, yet we have similar concerns and each are trying their best to be a good mother.

**Yumiko Higashida**

I really enjoy being able to share concerns with other mothers. LLL Leaders acknowledging the difficulty that I am going through helps build up my confidence.

**Harumi Maruyama**

I appreciate most being able to be with other mothers who have had similar experiences. There is much to learn.

**Sachie Okano**

**Toshima, Tokyo, Japan**

I am very grateful that we can share the benefits of breastfeeding and concerns we may have to our hearts content and that there are mothers who empathize. I also appreciate being able to hear about other mother's experiences and to confirm what lies behind some common breastfeeding problems.

**Keiko Hayashi**

It is very helpful to be able to hear about breastfeeding and parenting difficulties other mothers have experienced. Knowing that I am not the only one with similar concerns takes a burden off my shoulders and lets me sit back and relax.

**Kyoko Noto**

# Postcard from

## HA'IL, Saudi Arabia

*In November 2002 my American family made a big move. At the time my family consisted of my husband Sekou, my daughter Tasneem (then age four), my son Umar (then age two), and me, 30 weeks pregnant. We moved from Virginia, USA to Ha'il Saudi Arabia. We were so excited about this new life. Yet,*

*bedroom to give them a sense of security in our new home. I had a lot of my own books to bring as well. I had a lending library of books on pregnancy, birth, breastfeeding, and parenting topic as well as other subjects.*



*we were nervous as well. It was a huge move, leaving all our family and friends behind. Plus I was leaving behind my midwives and dreams of a home birth.*

*When we began preparing to move, I started to scale down our possessions. I realized that we had a lot of things. We sold some furniture and other items. I gave some of my childrens' books away to friends. I gave some items that meant a lot to me, to friends who meant a lot to me. When we took our things to the shipping company to prepare them for shipping here, the total weight was 735 pounds (334 kg). Wow! I couldn't believe we still had so much. I wanted to bring the things from my children's*

*A lot of friends came to see us off. My best friend drove my kids and me to the airport in a caravan of cars. It was bittersweet. We said goodbye among tears of sadness and excitement. It was my first time traveling overseas. Our 14-hour flight went well, with only one layover. We got off the plane in Riyadh, the capital of Saudi Arabia. I couldn't believe we were there. I had thought about the moment so many times. Our first Saudi meal was Pizza Hut pepperoni pizza. It was delicious! We had to wait ten hours for our connecting flight to Ha'il. By this time we were all tired. It's never fun to sit for 10 hours in an airport with two young children after traveling for so long AND being nearly eight months pregnant. Yet, somehow we made it.*



*I will never forget my first sight of Ha'il. I looked out the airplane window and all I saw was brown. Brown. Brown. And more brown. Welcome to life in the desert!*

*After living here for eight years I have come to see beauty in this mountainous region of Arabia. There isn't much grass (which I miss), but there is still greenery. Date palms grow plentifully here, as well as acacia trees. Ha'il is in the north central region of Saudi Arabia. We have hot, dry summers that average 40 degrees Celsius. Our winters are mild with daytime highs reaching 10-13 degrees Celsius on most days. Winter nights can be cold though. We usually have a few nights that reach 0 degrees. When it rains here, the people go to the desert to watch the rain come down. It is amazing to see the rain running down the mountains. Even my own family enjoys the rain. (You should see us during our annual summer vacation trips home. When it rains the children run outside to play.) Ha'il is an old city in Arabia. There is a mountain about 45 km away with prehistoric writings. Seeing and touching those writings was a remarkable experience.*

*My family now consists of seven people. Tasneem and Umar are 12 and 10 now. Son Yusuf, almost eight, was born in December, one and a half months after moving here. I had another son Zayd here in December 2004. He'll be six in a few weeks. Last summer we added daughter Lena, who was born back home in the USA. She is four months now. We live in housing provided by the university where my husband teaches English. We are outside of the city and our compound is surrounded by mountains. Our neighbors are all expats from countries including Egypt, Morocco, the United Kingdom, South Africa, Canada, France, Ghana, Japan, Singapore, and many others. While it is sometimes hard living outside of the city, we have the advantage of knowing all of our neighbors. Our children are free to play outside or at the playground in our complex. I often take walks with friends to relax.*

*When we moved here I was excited to move to a land where I expected breastfeeding to be the norm. After all, this is a Muslim country, and breastfeeding is mentioned in the Qur'an. Unfortunately, formula is*

*prevalent here. I do not see many women breastfeeding in public. Once while at a government hospital I saw a mom nursing her baby. I was so happy and wanted to say something encouraging, but I had no idea how. On the other hand, I have nursed my babies wherever I was. I am always covered though, and no skin is exposed. I think many women fear exposing themselves so they prefer to use bottles in public. I often try to tell moms how they can breastfeed while wearing an abayah (black overgarment worn by most women in Saudi Arabia) without exposing themselves.*

*I have met many moms here who give bottles because of advice from medical providers. In fact, when a friend of mine was pregnant and in labor in 2004, I went to her house, planning to accompany her to the clinic as her doula. Her baby had other plans, however, and was born into my hands in her living room. When we got to the clinic, the pediatrician advised my friend to buy formula because, "Her milk was not yet in and would therefore not be enough to satisfy her baby yet." I was too upset to say anything at the time.*

*I love breastfeeding and have enjoyed the many years I have done it with my children. I have tried to think of ways that I can help the local women here in this small, conservative city where traditional values are adhered to. I hope that one day breastfeeding in this Arabian country will again be the dominant method of feeding babies.*



*Stacey Greaves  
Ha'il, Saudi Arabia*



## Breastfeeding prevents baby infections

**Exclusive breastfeeding for six months wards off baby infections, a new study suggests.** Regardless of other factors, such as good healthcare and vaccination programmes, breastfeeding still gives babies a big boost, says a team of researchers at the University of Crete. Interestingly, the benefit only comes with exclusive breastfeeding - mixing breast and bottle will not achieve the same effect.

For the study, the researchers tracked the health of nearly 1,000 infants for a period of 12 months, recording any common infections these babies had during their first year of life. The findings were published in *Archives of Diseases in Childhood*, in September 2010.<sup>(1)</sup>

All the newborns were routinely vaccinated and had access to a high standard of healthcare. Almost two-thirds of the mothers were breastfeeding at one month, but this figure dropped to just under a fifth at six months. Overall, 91 of the infants were exclusively breastfed for a full six months. Subsequently, these infants had significantly fewer common infections during their first year of life than their peers who were either partially breastfed or not breastfed at all. These included respiratory and ear infections, as well as thrush. And the infections they did pick up were less severe, even after adjusting for other factors that might influence the risk of infection, such as the number of siblings and exposure to environmental tobacco smoke. The research team concluded it is the composition of breast milk that helps babies fight infections.

Breast milk contains antibodies passed from the mother, as well as other immunological and nutritional factors that help the baby fight off infections. Human milk is relatively low in protein compared to the milk of other species, yet the primary function of two of the major proteins in human milk -- antibodies and lactoferrin -- is not nutrition but defense against infection. Most milk antibodies are made of a special form of protein called SIgA, which is particularly resistant to digestion. A mother's milk contains antibodies to pathogens that she's recently been exposed to. Chances are, the baby has been exposed to the same pathogens. These SIgA antibodies stick to microbes and stop them from attaching to and infecting cells in the gut. They also make their way into the nose and mouth, where they can defend against airborne diseases.

While each antibody is specifically designed to target one particular pathogen, the major milk protein lactoferrin acts more broadly. It can directly kill bacteria, viruses, and fungi, and it also has an anti-inflammatory effect, which helps reduce the pain, swelling, and high temperature associated with infection. Because lactoferrin is quite resistant to digestion, it passes into the urine relatively unchanged and so helps prevent urinary tract infections.

A newborn baby's immature immune system relies heavily on this protection. Colostrum, the milk produced in the first days after birth, contains higher concentrations of many of these substances. The infant immune system matures during the first year, and is more mature at age two, but the immune system does not reach full maturity until the child is around six years old.

### References

<sup>(1)</sup> <http://adc.bmj.com/content/early/2010/08/24/adc.2009.169912.abstract>