



My Relactation Story

by Kelly O'Neill

On January 16, 2010, I decided to re-lactate! What prompted me to do this? A very good friend of mine, Jenn – the best of friends really - provided me with

information and gentle encouragement. Jenn had the faith and belief in me that I didn't have at that time in myself and guided me back into a wonderful and fulfilling breastfeeding relationship with my son. Much to my surprise, I learned that I could work toward bringing my milk back in – even though I hadn't breastfed in about seven weeks and was completely dry. And so, with her support, I started the process.

My story goes like this:

I stopped breastfeeding soon after my son's birth – not because I didn't want to breastfeed – but because of a number of medical issues that he and I had. I had dreamt of breastfeeding my baby since the moment I knew I would have another baby. My son was born six weeks premature, via c-Section due to risks with my pregnancy, and he spent more than two weeks in a NICU. My milk never did come fully in.

I worked with a lactation consultant and followed a rigorous pumping schedule in an effort to increase my milk supply. Any milk that I pumped was fed to my baby through a feeding tube. I spent long, twelve-hour days at the NICU with my son, pumping by the side of his incubator. At home, I woke every three hours during the night to ensure I was sending my body all the right signals to keep making milk! I also made sure I did as much kangaroo care at the hospital as was permitted. In spite of my efforts, I wasn't producing very much milk. I also tried a prescription for domperidone, which seemed to increase my supply a little.

I was feeling very discouraged, as well as exhausted from the process of trying to increase my milk supply and the long days spent at the NICU. Also, once I left for the day, I had another son at home waiting to see mommy.

During this time, I also began having difficulty with my C-Section incision, which became infected and had to be treated with packing and antibiotics over a period of six weeks.

I become overwhelmed with the issues I was having: my incision, the physical pain and the fact that I wasn't seeing enough results from all my work to increase my milk supply – all combined with the fact that my baby was in a NICU. After about twelve days, I gave up pumping and asked the nurse to start bottle-feeding Braeden. I knew that the faster Braeden was eating on his own, the faster he would come home. The point had come when he no longer required any oxygen or IV and he was just there to learn how to eat. I wanted my baby to come home! It seemed very wrong to have given birth to my baby, and then to leave the hospital without him.

Braeden learned to feed from a bottle and was finally discharged at fifteen days old. When he was discharged from the NICU, my home care continued, but I did not continue to pump. My milk supply still didn't appear adequate after all the pumping I had done and the medication I had taken. Overwhelmed and exhausted, I had decided to give up.

I later regretted the decision and yearned for that closeness to my baby. I wanted to be the provider of his food. When Jenn mentioned the process of relactating, she sparked my interest and I thought that just maybe there was still an opportunity to breastfeed my baby. I was tired and worn out from the NICU experience and issues with the incision and wondered if I would have the energy. I thought long and hard and decided since my baby had so many struggles in his first days here on earth, I wanted him to have the very best he could have and that meant my breast milk – not formula. So with my friend's support, I began putting my baby to the breast again and pumping.

I knew that sometimes after a baby had been bottle-fed, it may be a learning process for the baby to learn how to suckle at the breast. To my surprise, he latched as if he had always been at the breast! This was the first step to a beautiful nursing relationship with my son.

I continued latching and pumping, began the domperidone again and this



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time added some herbal supplements as well and my milk came back! At first, it was small amounts, but gradually started to increase. Braeden initially used my breast for soothing himself to sleep rather than to eat. But it didn't matter because any amount of suckling at the breast stimulated milk production.

Jenn told me about a support group called La Leche League and suggested I seek the support of a local breastfeeding clinic as well. I searched the internet, found La Leche League in my area, and then called a group Leader. The LLLC Leader made herself available to me almost constantly yet I never felt like I would be judged if I didn't continue.

I also found a breastfeeding clinic where I received help from a fantastic nurse/lactation consultant. This nurse, Shawna, worked with me for several months and provided the strong encouragement and positive reinforcement that I needed. Shawna always went the extra mile to make sure I felt supported, encouraged, but not pushed or judged. I met with her once weekly, sought support through my friend and started attending the monthly La Leche League meetings. I had surrounded myself with a network of supports and looking back, I truly could not have done it without each and every one of them.

Over the course of my time at the breastfeeding clinic, my milk supply increased to the point that I was almost able to exclusively breastfeed my son. I couldn't believe the progress I had made and was thrilled that my son could reap the benefits.

I love the close, nurturing relationship Braden and I have, and I love being his sole source of food and comfort. There truly is nothing like the bond of a nursing relationship with your little one. I wanted to write my story for all of those women struggling with their supply or contemplating relactation. It is a lot of work -- I won't deny that -- but it is a truly rewarding and worthwhile experience.

I offer this story as a tribute to my friend Jenn, my nurse Shawna and the Durham La Leche League Chapter. And of course let's not forget Braeden

who also did a lot of work to bring mommy's milk back!

Braeden is seven months old now and I plan to continue to breast feed for as long as I can. I hope my story encourages other mommas to forge forward -- even through challenging times -- because you and your babies will reap so many benefits.

For more information about relactation, see:

<http://www.llli.org/FAQ/relactation.html>



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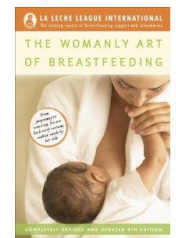
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LLLC Supporting Young Mothers Where They Are

Teen mothers are somewhat less likely to decide to breastfeed than women over 20 and can encounter some additional challenges. La Leche League Canada breastfeeding groups for young mothers can provide appropriate support for those young women who choose to breastfeed.

In June of 2009, a group of La Leche League Canada volunteers in Calgary responded to a need in their community and started LLLC meetings especially for young mothers.

“We started this group because we felt there was a need to help teen mothers in their own environment. Teen mothers often have different issues than other mothers”, says Leann Cleckner, who coordinates the team of four volunteers.

The Calgary teen group originally met at Elizabeth House, a Calgary organization that provides housing and support to teen mothers while they are pregnant and after the birth of the baby for up to a year. Most young women who live at Elizabeth House attend the Elizabeth House school, are working or seeking employment.

After meeting at Elizabeth House for nearly a year, in February 2010 the group moved to Louise Dean High School. The LLLC volunteers visit the school day care centre twice a month at lunchtime and are available to answer questions. The volunteers find that the informal atmosphere helps the mothers to feel more comfortable. Usually about ten mothers attend the sessions. The babies range in age from newborn to about nine months. Older babies are cared for in a different section of the day care facility.

The topics discussed follow the La Leche League Canada series meeting

topics but are specifically tailored to respond to issues and questions raised by the young mothers. Volunteers also share LLLC Information sheets and website resources with participants.

Leann feels that the location and informal nature of the meetings has helped to make LLLC’s mother-to-mother support accessible and relevant to the needs of the young women who attend Louise Dean High School. She feels that the program is making a difference in the lives of these young mothers and their babies.

Fiona Audy, LLLC Leader in Edmonton Alberta, agrees. Fiona has been coordinating a noon-hour breastfeeding drop-in for young mothers at the Braemar School for eight years.

“Teen mothers can give off an aura of being knowledgeable and self-aware and often have a hard time admitting when they are struggling with breastfeeding or parenting issues.” says Fiona. “They are oriented to their peers and therefore much of their information about breastfeeding and babies can come from people who are equally ill-informed.”

She finds that one of the interesting side effects of holding the Braemar School group meetings in a common room is that girls who do not plan to attend the meeting are in the room and find themselves drawn into the discussion. Often they will speak about how their experience of breastfeeding did not go well, leading to discussion about how to prevent and overcome problems and where to find support and information for breastfeeding. Their experiences can encourage the expectant mothers to do some forward planning (a challenge for many teenagers) to improve their chances of successfully meeting their own breastfeeding goals.

Girls who have struggled with breastfeeding and given up gain some knowledge about the circumstances that created the challenges, the information that could have helped turn things around and the support systems that could have helped them through the challenging times. They come to realize that their bodies did not fail them and they become better-informed peer supporters for the other teen mothers around them.





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Fiona has discovered that the issues that young mothers deal with are often different from those of adult mothers. For example, at Braemar they are required to be back at school two weeks after giving birth. For many of them this requires over an hour on the bus with at least one change. Some have no qualms about breastfeeding in public but for most in those early weeks, it is hard to handle any additional strange looks beyond what they are already getting as a teen with a baby in tow. Helping them figure out how to manage the trips with the judicious use of a bottle or a soother to keep the baby calm can make the difference between continuing to breastfeed while at school and at home or giving up completely.

Alcohol use, smoking, street drugs and birth control are other issues that come up far more often in the teen group. Fiona finds that reading straight from the *Breastfeeding Answer Book* provides the information they seek without any hint of judgment creeping in. She has noticed that the girls are often far more openly judgmental of each other's choices in these areas than adults would be but the perception of adult judgment will shut down communication very quickly.

"Working with young mothers is a privilege. They are as determined, passionate, funny, self-absorbed and energetic as any other teens." Fiona concludes. "They are also caring concerned mothers who want the best for their children just as adult mothers do."

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give all year long!



*We hope you enjoy this
montage of photos from
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