



## Doctors Make the Difference: Incorporating Breastfeeding into Prenatal Care

**Discuss breastfeeding at every prenatal visit. Studies show, the more often breastfeeding is discussed during pregnancy, the more likely it is that women will initiate breastfeeding.**

In populations traditionally less likely to breastfeed, provider encouragement significantly increased breastfeeding initiation by more than threefold among low-income, young, and less educated women; by nearly fivefold among black women; and by nearly 11-fold among single women.

(Lu, M., et al. 2001. Provider encouragement of breast-feeding: evidence from a national survey. *Obstetrics & Gynecology* 97:290–95.)

### **On the initial history and physical, ask:**

“Any past surgeries or problems with your breasts?” “How did you feed your other babies?”  
“Have you thought about how you’ll feed this baby?” “What do you know about breastfeeding?”

### **If she has breastfed before:**

“How long did you breastfeed?” “Are you still breastfeeding?”  
“Why did you stop?” “Any problems with breastfeeding?”

### **If she has formula-fed before:**

“What made you choose formula-feeding?” Acknowledge concerns and explore beliefs.

“Did you know that breastfeeding is healthier for you? It’s linked with a lower risk of breast cancer, ovarian cancer, and osteoporosis. It may also lower the risk of many lifelong chronic diseases in your child, such as diabetes and obesity.”

If the mother has a personal or family history of other diseases linked with lower rates of breastfeeding (e.g., inflammatory bowel disease), she should know that her child may be at particular risk. You may be the only person to tell her this specific information.

Distribute breastfeeding literature — or breastfeeding gift bags — early in the pregnancy. (However, literature or gift bags on the first prenatal visit may not be effective if the pregnancy was unplanned.)

### **On subsequent visits, ask:**

“Are you noticing changes in your breasts?” Use this as an opportunity to tell her, “Your breasts are getting ready to make milk,” and to continue to explore concerns mentioned earlier. Check nipples for inversion, and breasts for asymmetry.

“How long do you plan on breastfeeding this baby?” This establishes breastfeeding as the normal way to feed a baby.

“How does your partner feel about breastfeeding?” Include the partner in discussions. Discuss bonding and point out benefits to the mother’s and the child’s health. Acknowledge any concerns the partner has.

### **Later visits:**

When you tell her what to expect in the hospital, advise her to nurse within one hour of birth, to sleep with her baby in her room, and to refuse pacifiers and all supplements, especially in the early weeks.

Encourage her to learn all she can about breastfeeding before the baby arrives.

Make her aware of postpartum resources, such as breastfeeding counseling and breast pumps available through WIC.

Adapted from Massachusetts Breastfeeding Coalition material

*Breastmilk. 100% natural ingredients.*