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Breastfeeding counselling context of family nursing: A case report

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In recent years, the World Health Organization and United Nations Children's Fund has emphasized that infants should be only fed with breast milk in the first 6 months. The rate of feeding only breast milk the first 6 months of life being worldwide are similar values (38%). Less developed countries are more successful than other countries in the terms of continuing breastfeeding. Breastfeeding is fairly common in Turkey. According to the Turkey Demographic and Health Survey (2013) data, 58% of babies in 0-1 months, 35.4% of babies 2-3 months, 9.5% of babies 4-5 months were breastfed. The median duration of breastfeeding is 16.7 months. According to the years in Turkey, we see that the feed rate with only breast milk is reduced and some factors are affecting the uptake of breastfeeding. In order to avoid this reduction, in this case report emphasis will be made to breastfeeding counseling. Our case comprised of a 26 years old housewife. She married at the age of 18-years, and her first pregnancy was at the age of 19. She conceived twice, both resulting in live births. She was diagnosed with gestational diabetes during pregnancy. To control the level of sugar, she was hospitalized two weeks before giving birth. During home visits, it was determined that the mother had nipple cracks, small size and fullness respectively. She was not concerned about her breast care, which in turn reduced the flow of breast milk. The baby showed resistance to mother's breast, therefore she also seemed to be worried. Mother considered that this was the reason for inadequate weight gain of the baby. First, the feelings of the mother were considered and factors that hindered the baby's breast milk intake were determined. These factors include the failure to breastfeed, the form of delivery (caesarean section), neonatal outcome, newborn status, head cracked nipples and diabetes. It was described to the mother how to cope with nipple crack. Blockage in the milk ducts, symptoms of cystitis were checked. It was observed that she wasn't having trouble with her first child about lactation but there was a lack of knowledge about breastfeeding. For this reason breastfeeding counseling was done. It was informed about how breastfeeding should be, the importance of breast milk and its structure, breast care, breastfeeding technique, technique of feeding with cup, milking with hands and preservation techniques and all these factors helped to gain self-confidence. Mother was followed up thrice with home visits. At the end of these follow-ups, it was determined that breast milk increased, mother nursed her baby in an effective way and nipple cracks decreased. Mother was encouraged for breastfeeding for at least 6 months. Nurses have an important place in breastfeeding counseling. So nurses should carry out the family nursing process by organizing home visits efficiently. Breastfeeding counseling should be done in terms of the survival of the infant, physical and mental development, protection from diseases, mental health, maternal health, environmental health, economic development of family and community.

Biography

Simsek Hatice has completed her Masters in 2011 from the Istanbul University, Public Health Department. She became a Research Assistant in the same year at Celal Bayar University. She is currently a PhD student and Research Assistant at Ege University Nursing Faculty, Department of Public Health Nursing.

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