

EFFECT OF ANATOMICAL DEFECT ON BREASTFEEDING**Shagufta Shaikh N.*¹, Dr. Sameer Gholap² and Dr. Prashant Patil³**¹PG Scholar, PTSR Department, Smbt Ayurved Hospital.²GUIDE, Associate Professor, PTSR Department, Smbt Ayurved Hospital.³HOD, PTSR Department, Smbt Ayurved College.Article Received on
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Breastfeeding is a beautiful connection of mother's pleasure and infant's privilege. Stana (Breast) is also termed as pranayatana (where prana resides) by Acharya Bhela, as it is the store of nectar for baby. Nature has designed the breast nearer to heart at the site of anaahat chakra which connects the mother and baby emotionally.

According to the universal epidemiology on breastfeeding, it prevent 8,23,000 annual death in children younger than 5 year and 20000 annual death of mother from breast carcinoma.

Government of India has launched National Breastfeeding Promotion Programme - MAA (mothers' absolute affection) to ensure adequate awareness is generated among masses, especially mothers, on the benefits of breastfeeding.

Concept of breastfeeding in Ayurveda

The ahara rasa, essence of digestion, form stanya in breast. Hence stanya is termed as the upadhatu of rasa. The ejection of breastmilk is mainly due to suckling reflex of baby. The first milk, colostrum is rich in various nutrients, extremely needed for new-born. So it is advisable that the mother should start feeding as soon as possible after birth of baby. It is said guru by acharyas as it contains more protein and less fat than mature milk.

Ayurvedic texts have description about benefits of breast feeding. Acharya Kashyapa described that good breast feeding results in good growth, strength, longevity and good health of child as well as not causing any troubles or diseases to child. Acharya Charaka and Vagbhata give similar description. It is widely recognized that breastfeeding is the best nutrition for human infants. Breast feeding should begin, as soon after birth as possible. Both

baby and mother gain many benefits from breastfeeding. Breast milk contains all the nutrients that an infant needs in the first 6 months of life for normal growth and development including carbohydrates, fats, proteins, vitamins, minerals and water.

Advantages of breast feeding to the child

Breast milk provides both immediate and long-term benefits to infants. Breast milk is free-reducing or eliminating the cost of formula. Breast milk is the optimal food for almost all infants in the first year of life.

Colostrum contains antibodies called immunoglobulin such as IgA, IgG and IgM in mammals. Other immune components of colostrum include the major components of the innate immune system, such as lactoferrin, lysozyme, lactoperoxidase, complement and proline-rich polypeptide. These bioactive agents, which are not found in commercially prepared formulas, boost the infant's immature immune system. Hanson et al. studies find that because of numerous major protective components, including secretory IgA (SIgA) antibodies and lactoferrin, which are present in breast milk results in protection of baby who breastfed against numerous common infections than the non- breastfed. Colostrum also contains carbohydrates, lipids, proteins, vitamin A etc. and sodium chloride, potassium, growth factors and antimicrobial factors. The antibodies in colostrum provide passive immunity.

Benefits to the mother

Breastfeeding is convenient and less time consuming. Breast milk is readily available all the time at the desired temperature. There is no need to buy feeding bottles and artificial milk and no time is wasted for sterilization of bottles and preparation of feeds. Women who breastfed their infants had less anxiety and more mutuality than the women bottle feeding their infants as proved by various studies Breastfeeding soon after birth provides protection against pregnancy due to lactational amenorrhea. Elias et al. study noticed that women remained amenorrhoeic who nursed frequently (more than eight times per day) during exclusive breastfeeding longer than infrequent nursers, introduced supplements later and did not resume menses as promptly thereafter. Decreases in postpartum weight retention also noticed after encouraging prolonged breast feeding.

ANATOMICAL DEFECTS OF BREAST

- LONG NIPPLES

- SHORT NIPPLES
- ABNORMALLY LARGE NIPPLE
- INVERTED AND FLAT NIPPLE
- POLYTHELIA
- ATHELIA

LONG NIPPLES

It leads to poor feeding because the baby is able to latch on to the nipple without drawing the breast tissue into his mouth.

SHORT NIPPLES

It doesn't cause any problem as the baby has to form a teat from both the breast and nipple. Hence Nipple shield or Artificial Nipple is used in this case.

ABNORMALLY LARGE NIPPLES

In this case if baby mouth is smaller hence latching beyond the nipples doesn't occur. Hence of expression breast milk is necessary in this case to initiate lactation.

INVERTED AND FLAT NIPPLES

If the nipple is deeply inverted it is necessary to initiate lactation by expressing.

The nipple on this breast protrudes normally

"PINCH TEST" will show whether nipple is inverted

Using your thumb and index finger, gently squeeze the areola about 1 inch behind the nipple. This technique will make a normal nipple protrude.

POLYTHELIA AND ATHELIA

Polythelia is a condition in which a third accessory nipple is present. The accessory nipple in polythelia may be located either below or above the normally placed nipple.

This region is sometimes referred to as the "milk line". Polythelia is caused by congenital defects that are present since birth.

Athelia refers to a condition in which one or both of the nipples are absent. It is a rare congenital disorder.

Most cases of athelia are unilateral in nature, in which only one nipple is absent.

CONTRADICTION OF BREASTFEEDING ACC TO AYURVEDA

In Ayurvedic texts, acharyas enlisted various physical and psychologically disorders of woman in which mothers breast feeding unfit as the woman who is kshudhita (hungry), shokaarta (having grief), shranta (get tired), dustadhatu (vitiation of bodily tissues), garbhini (pregnant), javerita (suffering from fever), kshina (emaciated), atisthula (obese), and taking non-congenial diets etc., should not give breast feeds to the child. The child whose recently ingested medicine is not assimilated should also not be given the breastfeed etc. In modern medicine, there are also few maternal contraindications to breastfeeding: mothers with septicemia, active tuberculosis, typhoid fever, breast cancer, or malaria should not breast-feed. Some conditions such as substance abuse and severe neuroses or psychoses, mother suffering with active HIV infection and infants with galactosemia are contraindications to breastfeeding.

CONCLUSION

In conclusion, significant and long-term health benefits are associated with breastfeeding for the individual mother, baby and society.

Breastfeeding is the ideal way to feed babies; Breast milk serves both as a source of nutrition and immunological support for the developing infant.

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