

MODULE 4: Discussion Points on Breastfeeding and Concerns about Body Image and Mother’s Health

Body image concerns and body impact of breastfeeding

Some women are concerned that breast size affects their ability to breastfeed—if your breasts are too big or too small you can’t breastfeed. Many women have heard that if your breasts are too small you won’t be able to produce enough milk. Conversely, they have heard that if your breasts are too big you won’t be able to manage breastfeeding. In either case, mothers may not even attempt breastfeeding, because they don’t want to experience failure and want to make sure their babies will be well fed.

Discussion Points:

- Size and shape of breasts or nipples don’t have anything to do with how much milk is produced. The tissue that makes breasts large or small is different from the part of the breast that makes the milk and brings it to the nipples for your baby.
- If a woman has very large breasts, a lactation support person can help her find the best way to hold her baby for feeding so it works.
- The bottom line is that breast size has nothing to do with how well a woman can make milk for her baby.

Breastfeeding makes your breasts sag.

The many changes women’s bodies go through during and after pregnancy can be unsettling. Given how important body image is in our society, concerns about how breastfeeding will affect a woman’s appearance can be barriers to adopting breastfeeding. A very common belief is that breastfeeding makes your breasts sag.

Discussion Points:

- Pregnancy creates changes in a woman’s body, whether she breastfeeds or not. The ligaments of the breast tissue stretch during pregnancy causing breasts to sag.
- Age, genetics and how many times a woman has been pregnant can make a difference in how much her breasts will sag as she gets older.

Breastfeeding hurts and makes your nipples sore.

Mothers may have heard that breastfeeding hurts or causes sore nipples.

Discussion Points:

- If breastfeeding were always painful, it would not be practiced by women all over the world and through the ages. Breastfeeding is not supposed to be painful.
- At first, it may take some time, to get used to the sensations and some initial discomfort. Significant pain means there is a problem that can be fixed.
- Learning about how to care for the nipples and how to help the baby latch on can help prevent problems.
- Just like any new skill, mothers will need to learn how to do it well. They can get help before starting and once they are breastfeeding. Mothers should talk to their breastfeeding support provider about this issue, and their plans should include where and how they will get this support.

I take medicines that are not allowed if I am breastfeeding.

Mothers worry about whether the prescription medications they are taking are bad for the baby and if it will prevent them from being able to breastfeed.

Discussion Points:

- This is an important issue, and it is good a mother recognizes the potential problems.
- However, not all prescription or over-the-counter medicines are prohibited for breastfeeding mothers.
- Mothers can talk with their doctors as they plan to breastfeed to find out which medicines are safe to take while breastfeeding.
- Most of the time the doctor can find something just as effective that will not harm the baby.
- Remind mothers to also consider any supplements, teas and vaccinations they take and discuss them with their health care provider to understand how they affect breastfeeding and the baby.

This handout has been developed as a component of the Building on Campaigns with Conversations: An Individualized Approach to Helping Families Embrace Safe Sleep & Breastfeeding online curriculum. To view the entire curriculum, please visit: <https://www.ncemch.org/learning/building>.

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