

# Learning to dance with D-MER

## Dysphoric Milk Ejection Reflex

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The first time it happened I was out going about my weekly shop. All of a sudden I was struck by a sense of dread and I just could not think straight.

I wanted to run for the nearest exit and fast but while I was busy contemplating my escape route, the feeling simply disappeared. What on earth had just happened? Little did I know, this was just my introductory dance with D-MER.

When I was expecting my daughter, I really knuckled down on the baby prep front. From feeding to sleeping, bathing and changing - I spent a good few solid months cramming in what I could about how to raise our little one. It was particularly important for me to get breastfeeding spot on. As a perfectionist-prone mum-to-be I wanted to know it all, read it all and be ready for it all.

In my naivety I simply could not understand the struggles entailed in feeding au natural. Of course, that was until the wonder and complexity of breastfeeding actually kicked in and out trickled all of the small barriers. One by one I struck them down by referring to my knowledge base and working out solutions.

However, there was this one problem that lingered throughout all of my small, hard-won victories. It was a dark cloud, a haunting spectre that refused to die down. For there I was, ready to breastfeed and all of a sudden I would feel a hollow churning in the pit of my stomach. I would be overcome by a deep sadness that seemed to engulf my entire body. I felt anxious and inconsolable and it happened over and over again - always before a milk let-down. The strangest part of it was that around 2 minutes later the feelings would simply vanish. I would then return to my usual happy, chirpy self.

During these frequent episodes (which could occur up to three times in one sitting) I would develop an aversion to food and could not stand the sight or taste of it, I felt claustrophobic and also felt a strong urge to escape the room. No book, no midwife, no leaflet had prepared me for this. I was mystified. In an attempt to make sense of it all, I began to research into my symptoms.

Almost an hour after embarking on my search, my nemesis had a name and an ugly one at that: Dysphoric Milk Ejection Reflex (D-MER). From the scant information littered across the web, I wove together a tapestry of this malicious and newfound condition, realising along the way that there wasn't much information out there.

Forum users afflicted with the same issues gathered together on a lonely part of the net, to post on their dealings with the symptoms. Through lack of medical data available online, all

the women could do was simply muse on its causes. Diet claimed one. Drop in hormone levels claimed another. Too much caffeine! Too little sleep! And so the discussions went without any real answers in sight. Why was it that this condition had been overlooked in all my support material?

In the run up to breastfeeding, parents often become well versed in approaches to minimising any of the potential pitfalls. There is indeed a wealth of literature dedicated to problems that may occur and usually, with right support these issues can be dealt with quickly. What makes D-MER so problematic is not so much the condition itself, but the lack of knowledge of it. There needs to be a heightened awareness of this condition which is said to affect up to 10% of breastfeeding women.

Education is key to ensuring that women feel fully supported by their healthcare professionals and empowered to continue on with their breastfeeding journey. What should be one of the most beautiful and enjoyable experiences for both mother and infant could be marred by a lack of understanding on a fairly common condition.

The good news however, is that the subject of D-MER is gathering momentum and research is slowly gaining ground. Forums and support websites are growing in number and despite the profound lack of medical enquiry, theories are now emerging as to how the physiological condition occurs.

The preliminary data that does exist suggests that the culprit for these emotional disturbances is in fact the hormonal processes that occur before, during and after milk let down. Prolactin helps promote the production of milk but in order to function optimally, dopamine (which in turn aids the secretion of prolactin) must decrease in order to make way for the enhanced prolactin levels.

This whole process is meant to be slow and steady with levels rising and falling at a leisurely pace. It is speculated that in women with D-MER, the aforementioned leisurely fall becomes a rapid descent. Dopamine levels drop far too quickly and wreak havoc on the woman's mood, albeit for a short time. As dopamine levels return to normal (and they often do within the space of 30 seconds to 2 minutes) the dysphoric feelings diminish.

D-MER also appears to belong to a spectrum in terms of the severity of the symptoms. Starting at the lower end with mild dysphoria and progressing on to the more intense manifestations of medium and severe, women experience and describe the feelings of the condition differently.

Words that have been used to describe this plummet have included; feelings of dread, homesickness, agitation, hollowness, anxiety and emptiness. Women suffering from D-MER and health professionals alike may misdiagnose the syndrome as being a variant of postpartum depression, which it is not. These feelings can be extremely unsettling at a time when a mother's mind and body are already adjusting to the demands of life with a new baby.

Overlooking the true origins of the dysphoria could cause further distress. It can also be worrying for partners who, from the sidelines, can only observe the discomfort due to lack of

information. With all of this in mind, the lack of medical research into D-MER is also somewhat of a mystery.

It appears that any concrete solution to taming the problem of D-MER is still quite far off but that is not to say women need suffer in silence. Lactation consultants are now wising up to the newfound condition and although there is currently no cure-all remedy, there are management strategies. I began to rely on breathing techniques to get me through. This calmed the waves and pangs that continually rocked my breastfeeding world.

Exorcizing the caffeine-demon from my diet has also lightened the murky waters and my office desk is now home to a rainbow of herbal teas. It seems that gentle lifestyle changes have made a big difference as to how I experience D-MER and has given me back some sense of control over the condition. Through becoming aware of D-MER as a condition, I have removed the veneer of mystery and feel that it is a great relief to learn that it is not all 'in my head'.

Of course, if the growing number of women that reach out via internet forums is anything to go by, a problem shared really is a problem halved. The realization that you are not imagining it all is liberating. "I thought I was the only one!" is a sentiment echoed over and over again in online discussions. It was only upon stumbling across these posts that I was reassured in knowing that my fears and my feelings were real, valid and needed addressing.

Although D-MER has been an uninvited guest throughout my breastfeeding journey, I cannot say that it has disillusioned my views on nursing. I have not allowed it to hijack my resolve to continue, rather it has limped along and caused the road to be a bumpy one at times. Particularly in the beginning, there were moments when I felt immense disappointment that it was not the rosy textbook version of nursing I once assumed it would be.

On top of the dreadful feelings of D-MER I also questioned my competency as a mother. Why couldn't I just get the hang of it like everybody else? Since becoming enlightened about D-MER, my worries have dissipated. The condition has only really served to reinforce the wonder that lies behind breastfeeding. It is amazing how the intricate bodily processes collude and provide the entire sustenance for the first six months of a baby's life!

My pre-motherhood days were filled with misconceptions about breastfeeding but D-MER has taught me that there is no shame in taking time to perfect such a worthy skill. Obstacles can be overcome with support and understanding and this is a great result for all concerned.

Making the choice to breastfeed and persevere with it has been one of the most empowering decisions I have made for myself and my daughter.

I have managed to endure the regular, two minute visits from D-MER for just over 17 months now and it has all been worth it but I ask myself, would I have been so steadfast if I had not known about my condition?

Just a little awareness can make all the difference and return breastfeeding to what it should be - a loving, fleeting moment in time with benefits for both mother and baby that last forever.