

BREASTFEEDING AND HYPEREMESIS GRAVIDARUM

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“Wow, you’re just like Kate Middleton!”

If one more person said that to me, I was going to be sick.

Oh, wait. I was being sick. Constantly. That’s why everyone kept comparing me to the Duchess of Cambridgeshire. Unfortunately, having the illness hyperemesis gravidarum is all we have in common. Alas, I don’t have her wealth, her privilege, or a huge number of staff to take care of me and my family the way she does.

Hyperemesis gravidarum is a pregnancy illness that can perhaps best be understood as severe sickness, morning, afternoon, and night. In other words, it isn’t the standard (though still unpleasant) morning sickness and for many women it continues the entire pregnancy. It isn’t clear exactly how many women get it – statistics vary, but it seems to be around 1% - or even why this happens. Some researchers believe it is genetic, or that HG comes from some sort of protective quality gone awry (since women who vomit during pregnancy are known to be less likely to have a miscarriage) but it is extremely serious. Women with HG can’t drink or eat and may lose weight. The illness can lead to a pregnant woman needing

medication, IVs, or hospitalisation, and in earlier times it would likely have meant death for both the woman and her foetus. Some women with HG even choose to abort their babies rather than continue to suffer, although this is not often discussed, which leaves these women without appropriate support.

I’ve had two HG pregnancies and during the second one, I was also breastfeeding my first child, who was nearly three years and four months old when I got pregnant. I hoped I wouldn’t get HG the second time but I’d been told it was very likely, so when it happened, I immediately began looking for support and resources and was disappointed to find few in general, and almost nothing on breastfeeding through hyperemesis in particular. I asked in a couple of HG support groups and found that few people had breastfed during a hyperemesis pregnancy. Those who started off doing so often weaned their older child rather than continue breastfeeding.

In fact, I discovered that women with hyperemesis are actually less likely to breastfeed. This surprised me because personally I felt that I wanted my babies so desperately and had gone through so much to get them that I was going to do

everything in my power to ensure that they and our relationship got off to the right start.

I asked Professor Amy Brown at Swansea University and she told me that some unpublished research she'd carried out confirmed that having HG made women slightly less likely to breastfeed. From talking to a few women, it seems that for them, they wanted control again after feeling out of control due to hyperemesis and that they wanted their bodies to be completely their own as soon as possible after birth. Also, of course, there's the issue that some women are so malnourished from HG that they worry about their ability to help a baby grow; this is something they could do with support for. In short, now I can understand why hyperemesis might put some people off from breastfeeding.

With all this in mind, I thought I'd share what I learned about breastfeeding through hyperemesis, in the hope that we peer supporters and breastfeeding counsellors can be better able to support women who want to breastfeed during or after a hyperemesis pregnancy. All diseases and disorders have their challenges when it comes to breastfeeding and some of the ones I mention here might overlap with

other people's experiences of other illnesses.

First of all, of course, there are all the standard pregnancy-related breastfeeding issues. These include - but are not limited to - hormonal changes that can cause pain (for me, this meant stabbing and slicing pains in my nipples), changes to breast size, needing new positions (due to changing breast and body shape and levels of comfort), breastfeeding aversion, and loss of supply because of hormones. I won't go into these things in more detail here because there is a lot of other information available on them.

More relevant are the hyperemesis-specific topics.

1. Nausea and vomiting

Many of us with HG are nauseated all day long and often the nausea leads to throwing up. This can make every activity, whether showering, shopping, or snuggling, incredibly difficult and even scary. There were many times when I'd be breastfeeding my daughter and either I'd have to get her to calm down her "gymnastics" because she was jiggling me and making me feel worse, or I'd need to run off to be sick. Feeding doesn't feel as cuddly or loving as usual when you're gagging and practically flinging your child off you. There were

times when I couldn't cope with feeding, not due to aversion per se, but because I was in a dark tunnel of queasiness and I couldn't bear to move or be moved, and this made me so sad. Some women handle this by giving their nurslings a countdown for how long feeding can last.

2. Malnourishment/Dehydration

It's very common for people suffering from HG to have trouble keeping any liquids or foods down and this can obviously lead to malnourishment and/or dehydration. Some women end up in the hospital on IV drips, and this can keep them away from their breastfeeding child/ren. Such issues can lead to someone having no energy, which also makes breastfeeding hard and it can make them worry that they can't provide for their growing foetus, never mind their older nursling.

3. Medications

Many of us engaged with breastfeeding are well aware of how few health professionals seem to consider which medications are breastfeeding-friendly, and this is complicated further with HG because doctors also don't always know what to prescribe to help nausea, or even if those medicines are safe for pregnant women to

take. I experienced different doctors telling me that a given medication was or was not safe and sometimes the doctor shrugged and said, "No one knows!" I found that I had to tell them what my own research had suggested about risks to foetuses and nurslings. Here, websites such as Pregnancy Sickness Support and e-lactancia are very helpful (see below for resources). Also, this lack of knowledge increases the reluctance of some people with HG to take medication at all, which can lead to them suffering more than they have to.

4. Smells

A lot of people with hyperemesis find that particular smells make them especially ill. Foods and strong-smelling items, such as coffee or perfume, are frequent triggers, which often means that those with HG try to avoid the kitchen and/or family meals and this can have knock-on effects on family and social life. For some women, the smell of their partner and/or children can make them extremely nauseated. I talked to a number of women who were horrified to find that they didn't want to be near their beloved children because the smell made them so sick; as you can imagine, this would negatively impact on a breastfeeding relationship.



Brett and her daughter, at the Big Latch-On Day

5. Positioning

Finding a comfortable position to feed in when you are dizzy and/or nauseated and/or otherwise ill can be a challenge. I spent around seven horrible weeks basically confined to bed/the sofa, and because I was scarcely moving, I found that my muscles began wasting and I got more pain in my body (I already suffer from chronic pain). That meant I had trouble sitting or lying, and having a wiggly child on top of me – one with pointy knees and elbows that could poke into my queasy stomach – sometimes did exacerbate my problems. Having limits, such as a certain amount of time, can help (not always – see the next point). My daughter understood (reluctantly at times) the concept of me being ill and exhausted and needing to rest and

she usually was willing to shorten feeds and then to just play or read next to me.

6. Emotional issues for you and your child (and of course for your partner, if relevant, and other relatives)

Being so unwell while also having another child to care for can be very upsetting for the hyperemesis-sufferer and can raise feelings of guilt, sadness, anger, resentment, frustration, fear, loss of control and more. I kept feeling like I was a bad mother because I needed to rest so much, rather than being able to play with my daughter as I could do when not pregnant. It was hard not to blame myself, even though rationally I knew I hadn't brought on the HG. Others tell me they blamed their unborn child or their spouse

for the HG. My illness also gave my daughter many worries. She wanted to know if I was going to get better, and she regularly asked about me being sick (“Mama, are you throwing up again?”; “Mama, what’s happening?”; “Mama, will you still have hyperemesis after the baby is here?”), and she began talking about death a lot. She wondered if the HG was going to kill me and if I had to die so that the new baby could be born. We spent much time discussing all these big issues. The anxiety can cause a child to tantrum more, to need more attention, and/or to demand more breastfeeds as a way of being close to the ill parent. There were periods where my daughter really ramped up the amount and length of her feeds because of her worries, and I didn’t want to upset her further by cutting them down.

7. Support

I know I am lucky to have an amazing, wonderfully supportive wife who cheerfully and uncomplainingly took on everything at home –the nursery drop-offs and pick-ups, the cooking, cleaning, laundry, errands, driving, organising, and all the other things required to keep a home running. Not everyone has a partner, relative, or friend like this. If I didn’t have my wife, I don’t know that I would have managed to get through either of

my HG pregnancies and whether I would have felt able to continue breastfeeding during this second one without her encouragement and care is a big question. We breastfeeding-support workers can try to help here by providing information and reassurance to women who are suffering from hyperemesis but who want to breastfeed before and/or after the pregnancy.

But it isn’t all bad. There are some benefits to breastfeeding through hyperemesis, as hard as that is to believe.

1. Resting

Getting to sit/lie down to breastfeed was a way of taking an enforced break. I personally am not good at taking breaks and often try to push through illnesses. I had no choice now, and lying in bed with my beloved daughter at my breast was often comforting and helpful to me.

2. Lessons learned

I think we all learned so much from this difficult situation. My daughter improved her patience skills, since she had to accept that there were times she needed to shorten a feed or wait a bit longer for one (for example, if I was off throwing up and not available to her immediately). She also increased

her empathy; she learned that other people can feel poorly too and that they need care and attention. She helped my wife make breakfast for me to have in bed, she brought me drinks, and she kissed/cuddled me when she thought I needed extra love.

3. Stronger relationships

I believe that this situation strengthened our familial relationships. We spent a lot of time explaining things to our daughter, and helping her get through something very stressful and anxiety-inducing improved our communication skills. By not forcing her to wean because of my illness, I didn't cause her any additional stress, and I didn't make her resent



the coming baby (whom she might have blamed for the weaning); on the contrary, I continued to be a safe place for her, and to provide her with comfort as often as I could.

4. Confidence in breastfeeding

Having breastfed for four years already, I feel fairly confident about my knowledge and my ability to nourish a baby. But breastfeeding through this awful illness and all the pain and sickness it caused has increased my confidence even more. Although there is so little support for breastfeeding in our society, I feel ready to birth and breastfeed the new baby.

Resources

There are some useful resources for those suffering with HG and for people supporting them.

Pregnancy Sickness Support (<https://www.pregnancysicknesssupport.org.uk/>): This charity's website has loads of information and even a great forum for HG sufferers. You can also request a peer supporter.

Medications

For information on breastfeeding-friendly and pregnancy-safe medicines to take when suffering with HG, see E-Lactancia (<http://www.e-lactancia.org/>) or contact Wendy Jones through Drugs in Breastmilk ([https://](https://www.facebook.com/BfNDrugsinBreastmilkinformation/)

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Groups

There are a couple of supportive HG groups, such as on Facebook (<https://www.facebook.com/groups/Hyperemesisgravidarum/>) or BabyCentre (https://community.babycentre.co.uk/groups/a1062975/hyperemesis_gravidarum).

Books

Hyperemesis Gravidarum: The Definitive Guide is the most thorough book out there on HG, although disappointingly, it includes nothing on breastfeeding. I hope they consider revising it to add some information on breastfeeding. There are also a couple of picture books on HG that my daughter enjoyed looking at and discussing, though neither of them is without their issues either. These books are *Mama Has Hyperemesis Gravidarum (But Only For A While)* and *Be An HG Hero*.

Having gone through hyperemesis twice has been incredibly hard. Obviously, the outcome – a child – is worth the suffering, but I think there is more that we support-workers can do to help people with HG breastfeed through and/or after the pregnancy.