



## Breastfeeding After Cesarean Delivery

A common circumstance is a cesarean delivery, often referred to as a C-section, instead of a vaginal birth. If the C-section is done without prior planning, you may have endured a long and difficult delivery. If that's the case, your doctor may be more worried about your rest and recovery and less likely to encourage you to breastfeed right after delivery. You may also feel disappointed by this unexpected turn of events, which may inhibit the let-down and flow of your breast milk. Women who have planned C-sections, on the other hand, often know what to expect and are fully prepared to breastfeed their newborn.



The good news is that the method of delivery has little effect on your ability to nurse your baby. Your breast milk will come in almost as readily as it would have if you had delivered vaginally. It is especially important to begin breastfeeding as soon as you are able and to continue breastfeeding your baby on a frequent basis to ensure a good milk supply. Even if you need a few hours to recover from your surgery, you will be able to breastfeed as soon as you feel up to it.

## Use of Pain Medicines

Most drugs administered to mothers who give birth by cesarean delivery do not seriously affect the infant. You will probably receive a regional anesthetic, such as an epidural, rather than the general anesthesia that once made women unconscious during the delivery. Since less regional anesthesia gets into your bloodstream than with general anesthesia, it causes less sedation in the newborn. Some newborns tend to be a bit sleepy following an epidural and may suckle with less enthusiasm at first, but no long-term negative effects on full-term babies' development or ability to breastfeed have been demonstrated. Even if you are given general anesthesia, you should be able to breastfeed as soon as you're awake enough. When you are counseled about a cesarean delivery, it is a good idea to remind the obstetrician and anesthesiologist that you intend to breastfeed.

Following a cesarean delivery, your doctor will give you pain medications, initially through your IV and later in pill form, to help make you comfortable. In most cases, little of this medication passes through your breast milk to your baby. Some pain medications may temporarily make your newborn a little sleepy, but the benefits of breastfeeding far outweigh this potential drowsiness. Pain interferes with the release of oxytocin, a hormone which helps your milk to flow readily for your baby, so adequate control of your pain is important. If you have any concerns about the pain medication you are being offered, speak with your doctor or lactation specialist.

## Getting Comfortable

Your abdominal incision may make finding a comfortable breastfeeding position a little more difficult at first. You might adjust some of the basic positions by sitting up in bed, using one or two extra pillows to support your baby on your lap and protect your incision, by lying down on your side with your baby facing you, or by using a football hold with enough pillows to raise your baby's head to the level of the breast.

Make sure to get into a comfortable position before beginning to breastfeed, and don't be shy about asking for help. As your incision heals and you are able to move about more readily, nursing will become much easier—but expect to need some extra rest and assistance until you are fully back on your feet again. Be grateful for the help of family and friends with household chores, so you can concentrate on recovery from surgery and breastfeeding your baby.

**Last Updated** 11/2/2009

**Source** New Mother's Guide to Breastfeeding, 2nd Edition (Copyright © 2011 American Academy of Pediatrics)

The information contained on this Web site should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

