بسم الله الرحمن الرحيم

شبكة المعلومات الجامعية

التوثيق الالكتروني والميكروفيلم

شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

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ASSESSMENT OF BREAST FEEDING PROBLEMS IN THE FIRST WEEK AFTER CESAREAN SECTION IN PORT SAID

THESIS

Submitted for partial fulfillment of the requirements
for the Master Degree in

"Obstetrical and Gynecological Nursing"

By

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TO MY PARENTS

TO MY HUSBAND

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INTRODUCTION

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Breast-feeding is an art. It is essential to child health in all societies. It has been the acceptable method of feeding an infant for thousands of years in all cultures **(Auvenshine and Enriquez, 1990)**. Breast-feeding is the superior way to introduce a newborn to the world. It is the best food for infants due to its economic convenience, anti-infective properties, better nutritional value, and deeper infant-mother emotional link **(Pantano et al., 1990)**. However, breast-feeding is increasingly an important practice that requires the support of everyone in the society to nurture it back to its full potent strength **(Chiang, 1989)**.

Promoting and supporting breast-feeding is a basic strategy for controlling infant mortality and morbidity. One million infant lives can be saved every year in the developing world by maintaining breast-feeding throughout this critical period of the infant life. In others words, breast-feeding can help prevent the 38,000 daily deaths of infants and young children through its nutritional, immunological and sanitary aspects **(Abd El Rahman et al., 1998)**. The risk of death increases ten to fifteen times for those who are not breast-fed during the first three to four months of life in the developing world. Breast milk provides protection against diseases even before vaccines can be produced **(UNICEF / WHO$_A$, 1992)**.

After cesarean birth, it is very important to initiate early breast-feeding according to mother's ability to respond to her baby. This may occur in the recovery room, if she is responsive, though she may still be sleepy or under the influence of anesthesia. Hospital practices, as anesthesia and pain relief medication, may lead to disorientation of the mother, and interfere with breast-feeding initiation **(Mattson and Smith, 1993)**.

Breast-feeding problems and its time of initiation after birth can be classified into early and late problems. Early breast-feeding problems may occur in the form of soreness, cracking and fissuring of nipples and breast engorgement. They are the main reasons that may effect the time of initiation and the rate of success of breast-feeding. These early problems favor the occurrence of later problems such as mastitis and breast abscesses **(Khashaba, 1990; Bell and Rawlings, 1998)**. There is an urgent need for research into the causes of failure of breast-feeding, the means to revitalize community-based breast-feeding support, as well as to assess the knowledge, attitude and practice of health workers concerning breast-feeding **(Mukasa, 1992)**. The nurse should make every effort to protect, promote and support breast-feeding for new mothers. The present study is aimed at assessment of breast-feeding problems in the first week after cesarean section.