

Gebelik ve Tandem Emzirmede Ebelik

Midwifery in Pregnancy and Tandem Breastfeeding

ÖZET

Emzirme sürecinin, ilk altı ay sadece anne sütü ile ardından anne sütüne ilave olarak ek gıdalarla iki yaşına kadar sürdürülmesi anne ve bebek sağlığını olumlu yönde etkilemektedir. Emzirmenin bilinen birçok yararı olmasına rağmen anneler yeni bir gebelik oluştuğunda bebeğini emzirmeyi devam ettirme konusunda karar vermekte zorlanmaktadırlar. Tandem emzirme, annenin büyük bebeğini emzirirken, yenidoğan bebeği ile aynı zamanda emzirmesidir. Bu derlemenin amacı, emzirme döneminde gebe kalan annelerin emzirmeye devam etmelerinin yani tandem emzirmenin anne ve bebek sağlığına yönelik yararlarını açıklamak, tandem emzirmeye yönelik olumlu davranış geliştirmek ve ebelerin güncel literatür doğrultusunda bilgilendirilmesini sağlamak amacıyla yazılmıştır. Literatür taraması Google Akademik, Pubmed ve Science Direct veri tabanlarından gebelik, emzirme, gebelikte emzirme ve tandem emzirme anahtar kelimeleri kullanılarak zaman sınırlaması olmadan Türkçe ve İngilizce olarak aranmıştır. Anneler beslenmesine dikkat etmesi, demir desteği ve vitamin takviyeleriyle sağlıklı bir gebelik dönemi geçirebilir. Ayrıca, fetüs, yenidoğan ve bebeğin büyüme gelişmesinin izlendiği kanıtlar yetersiz olduğundan çocuk sağlığını etkileven calısmalara gereksinim bulunmaktadır. Gebeliği ve tandem emzirme sürecinde sağlığı olumsuz etkileyen bir durum yoksa anneler emzirme konusunda cesaretlendirilmeli ve teşvik edilmelidir.

Anahtar Kelimeler: Gebelik, emzirme, gebelikte emzirme, tandem emzirme, ebe

ABSTRACT

Continuing the breastfeeding process with only breast milk for the first six months and then with complementary foods in addition to breast milk until the age of two has a positive effect on the health of the mother and baby. Although breastfeeding has many known benefits, mothers find it difficult to decide whether to continue breastfeeding their baby when a new pregnancy occurs. Tandem breastfeeding is when a mother breastfeeds her older baby at the same time as her newborn baby. The aim of this review is to explain the benefits of tandem breastfeeding for the health of mothers and babies, to continue breastfeeding, that is, to continue breastfeeding, to develop positive behaviors towards tandem breastfeeding, and to inform midwives in line with the current literature. The literature search was searched in Turkish and English using the keywords pregnancy, breastfeeding, breastfeeding during pregnancy and tandem breastfeeding from Google Academic, Pubmed and Science Direct databases without a time limit. Mothers can have a healthy pregnancy by paying attention to nutrition, iron support and vitamin supplements. In addition, there is a need for studies that affect child health since there is insufficient evidence to monitor the growth and development of fetuses, newborns and infants. Mothers should be encouraged to breastfeed if there is no adverse health effect during pregnancy and tandem breastfeeding.

Keywords: Pregnancy, breastfeeding, breastfeeding during pregnancy, tandem breastfeeding, midwife

INTRODUCTION

Breastfeeding is a crucial practice in newborn nutrition, facilitating the transfer of essential macro and micro-nutrients from the mother's milk to the baby, thereby safeguarding maternal, child, and community health. It also contributes to the development of secure bonding between the mother and the infant during the breastfeeding period. Breast milk stands as the most ideal nutritional component supporting both the physiological and psychological aspects of infant and maternal well-being (Morns et al. 2021). It has been reported that breastfeeding positively influences infants' intellectual development, protects against infectious diseases, and reduces the risk of obesity and diabetes later in life (2,3). Women who breastfeed their babies tend to have better psychological health and a reduced risk of type 2 diabetes, osteoporosis, cardiovascular diseases, breast cancer, endometrial cancer, and ovarian cancer (WHO, 2017; UNICEF 2023).

The World Health Organization (WHO) and the United Nations International Children's Emergency Fund (UNICEF) recommend initiating breastfeeding within the first hour after birth, exclusive breastfeeding for the first six months, and continued breastfeeding along with complementary foods for up to two years or more (WHO, 2017; UNICEF 2023). According to global breastfeeding data, between 2015 and 2021, 47% of newborns were breastfed within the first hour after birth, 48% of infants under six months were exclusively breastfed, 70% were breastfed for up to one year, and 45% continued to breastfeed up to two years old (Global Breastfeeding Scorecard 2022). In Turkey, as per the 2018 Turkey Demographic and Health Survey (TDHS) data, 40.7% of babies were exclusively breastfed, 65.6%

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were breastfed for up to one year, and 33.5% were breastfed for up to two years. Additionally, it was reported that 28.4% of babies were fed with infant formula, cow's milk, or other animal milk (TDHS 2018).

Despite breastfeeding being a common practice in Turkey, it is often prematurely terminated before the age of two due to factors related to both the mother and the baby, such as inadequate prenatal care, insufficient breast milk production, infant refusal to breastfeed, infant illness, or the mother becoming pregnant again (TDHS, 2018; Uysal and Akdolun Balkaya 2022). Mothers who become pregnant while still breastfeeding can continue to breastfeed both the newborn and the older child after childbirth. This breastfeeding practice is referred to as tandem breastfeeding. It has been reported that the composition of the mother's milk changes according to the nutritional needs of the infants, making it advisable to continue breastfeeding to meet their dietary requirements (O'Rourke and Spatz 2019; Rodriquez Vazquez et. al. 2023). Continuing tandem breastfeeding can also help mothers maintain the closeness they established with their first child through breastfeeding and enhance their bonding perception (O'Rourke and Spatz 2019).

This review aims to inform pregnant mothers about the benefits of continuing breastfeeding during the breastfeeding period and the advantages to maternal and infant health during tandem breastfeeding. It also seeks to promote positive behavior and provide midwives with updated information in line with current literature.

IMPACT OF PREGNANCY AND TANDEM BREASTFEEDING ON MATERNAL HEALTH

Mothers often decide to discontinue breastfeeding, fearing that continuing while pregnant might jeopardize the healthy progression of their pregnancy or negatively affect the health of the breastfeeding infant. A study conducted in Madrid examined the tandem breastfeeding process of 15 mothers reported that the decision to continue breastfeeding during pregnancy increased their motivation to sustain it (Rodriguez Vazquez et. al. 2023). In a casecontrol study involving 259 mothers by Erdoğan and Turan (2023), despite most mothers experiencing a perception of insufficient milk, they preferred to breastfeed both babies and made efforts to continue breastfeeding. Providing mothers who breastfeed their babies with information about the content of breast milk can help reduce their anxiety and concerns (Uysal and Akdolun Balkaya 2022). A study that analyzed the milk of 14 mothers who breastfed during pregnancy revealed that breast milk adequately met the nutritional requirements of both older and younger children (Sinkiewicz-Darol et. al. 2021). However, another study reported that breastfeeding pregnant mothers experienced more fatigue, sleep disturbances, and eating issues compared to pregnant non-breastfeeding women (Aker et al. 2023). Pregnant breastfeeding mothers require psychological and physical support to maintain their health and that of their baby throughout pregnancy. Support should encompass helping with infant care, spending time with their partners and social circles to meet their social needs during pregnancy and breastfeeding (Aker et al. 2023). The nutritional requirements of pregnant breastfeeding mothers increase for fetal, infant, and maternal health. Evidence regarding the specific nutritional needs of pregnant breastfeeding mothers is currently lacking (Güler et. al. 2019). Furthermore, due to insufficient time between pregnancies, it is believed that the iron and folic acid requirements of breastfeeding mothers may increase according to trimesters (Güler et. al. 2019). A study conducted in our country found that breastfeeding pregnant women gained less weight and experienced a decrease in hemoglobin levels (Ayrım et. al. 2014). Minh et al. (2021), in their review studies, examining the fetal and maternal outcomes of breastfeeding during pregnancy, stated that breastfeeding pregnant mothers had similar risks of abortion, hyperemesis gravidarum, and postpartum hemorrhage as non-breastfeeding pregnant mothers (Minh et. al. 2021). In a study by Shaaban et al. (2015), it was reported that breastfeeding mothers who experienced inadequate nutrition during the breastfeeding process were at higher risk of abortion, prolonged labor, and increased prevalence of cesarean section (Shaaban et. al. 2015). It should be noted that weight loss in tandem breastfeeding mothers, as reported in the literature, is a negative condition affecting maternal health-this underscores the importance of healthy and balanced nutrition for breastfeeding mothers during pregnancy. Iron supplementation is recommended for tandem breastfeeding mothers to prevent iron deficiency anemia (Uysal and Akdolun Balkaya 2022). The literature suggests that tandem breastfeeding may lead to weight loss, fatigue, and anxiety, which can negatively impact maternal health. These adverse effects are believed to be related to complications during pregnancy (Uysal and Akdolun Balkaya 2022). Midwives should conduct qualitative and quantitative studies examining mothers during pregnancy and tandem breastfeeding. An increase in studies on tandem breastfeeding could positively influence mothers to continue breastfeeding.

IMPACT OF PREGNANCY AND TANDEM BREASTFEEDING ON FETAL, NEONATAL, AND INFANT HEALTH

During pregnancy, breastfeeding mothers may experience uterine contractions due to nipple stimulation. Many mothers contemplate discontinuing breastfeeding during this period, fearing it might have a negative impact on their pregnancy. Research has indicated that continuing breastfeeding during pregnancy increases the risk of abortion by 29%, but it is reported to have no effect on initiating labor (Molitoris 2019). In another study, it was found that there

ournal Of Social, Humanities And Administrative Sciences	2023 9 (70) NOVEMBER	
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was no statistically significant difference in birth weights between infants of mothers who continued breastfeeding during pregnancy and those who did not (Shaaban et. al. 2015). Likewise, no differences were observed in the head circumference and length of the newborns. Pregnant breastfeeding mothers should be closely monitored to encourage them to continue breastfeeding. The nutritional content of breast milk varies according to the physical needs of both infants (Sinkiewicz-Darol et. al. 2021). Changes in the nutritional value and taste of breast milk can influence the sucking desire of the older infant (Cunniff 2017). During tandem breastfeeding, the changes in breast milk and the adequacy of macro-nutrient values contribute positively to the healthy development of infants (O'Rourke and Spatz 2019; Rosenberg et. al. 2021). In a case presentation examining breastfeeding of two siblings at different ages, both infants' growth and development were closely monitored, and they did not experience any health problems (Durmuş and Potur 2022). The evidence regarding the impact of pregnancy and tandem breastfeeding on fetal, neonatal, and infant health is conflicting in the literature. Therefore, it is recommended that midwives conduct research on the effects of tandem breastfeeding on fetal, neonatal, and infant health.

ROLES AND RESPONSIBILITIES OF MIDWIVES IN PREGNANCY AND TANDEM BREASTFEEDING

Midwives are healthcare professionals who primarily engage with mothers from the preconception period through pregnancy, childbirth, and the postpartum period. Thus, midwives should provide breastfeeding counseling to mothers throughout the monitoring and care of the mother, fetus, newborn, and infant (O'Rourke and Spatz 2019). Mothers breastfeeding during pregnancy often experience conflicts with midwives regarding continuing pregnancy and breastfeeding if an unwanted pregnancy occurs. Midwives may recommend terminating the pregnancy due to concerns about uterine contractions caused by nipple stimulation, potential adverse effects on the healthy growth and development of the fetus, and a lack of information on current literature (O'Rourke and Spatz 2019; Aker et. al. 2023). However, there is no harm in mothers continuing to breastfeed when the health of the mother, fetus, newborn, and infant is good. In situations where breastfeeding mothers experience anxiety and stress due to uncertainty, midwives should provide information and counseling to mothers about how it might affect the baby, fetus, and their own health (Uysal and Akdolun Balkaya 2022). Midwives should assist mothers in making individual decisions about pregnancy and tandem breastfeeding. Pregnant and tandem breastfeeding mothers should be monitored through a multidisciplinary approach involving pregnant women, midwives, nurses, dietitians, obstetricians, and pediatric experts (Rodríguez Vázquez et. al. 2023). Mothers who decide to proceed with pregnancy and tandem breastfeeding should receive iron supplementation, be encouraged to use folic acid and be provided with nutritional education. Breastfeeding mothers who become pregnant should be informed about the importance of monitoring and follow-up for the fetus, baby, and both infants. They should also be educated about the health implications and directed to a healthcare professional in case of adverse health issues (O'Rourke and Spatz 2019; Coşkun Erçelik 2022; Serhatlioğlu and Yılmaz 2020). In cases where mothers in the tandem breastfeeding process have a perception of insufficient milk, they should be encouraged and empowered to continue breastfeeding. Additionally, mothers should be educated about supplementing the older baby's diet with complementary foods and the importance of ensuring that the younger baby receives sufficient breast milk (Serhatlioğlu and Yılmaz 2020).

CONCLUSION AND RECOMMENDATIONS

It is recommended to closely monitor mothers, fetuses, and babies to encourage mothers to continue breastfeeding. In the literature, it has been reported that mothers who continue breastfeeding during pregnancy do not experience any unwanted conditions except for weight loss and anemia. Mothers can have a healthy pregnancy by paying attention to their diet and taking iron and vitamin supplements. However, due to insufficient evidence regarding the impact of tandem breastfeeding on child health, studies need to monitor the growth and development of the fetus, newborn, and infant. Midwives should closely follow evidence-based breastfeeding practices and conduct careful prenatal and postnatal monitoring for potential issues in the health of the mother, baby, and fetus. Mothers should be encouraged and supported in tandem breastfeeding as long as it does not adversely affect pregnancy and maternal health.

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Journal Of Social, Humanities And Administrative Sciences	2023 9 (70) NOVEMBER	
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