Breastfeeding and Down syndrome

By Margot Elliffe

My daughter Tara is my fourth child and was born with Down Syndrome in the late 1980s. I had breastfed my three boys and was a midwife at the time.

After a quick cuddle, Tara was taken to the labour ward nursery and I watched through the window as the nurse washed, weighed and measured her. Several hours later, following her transfer to the ward, I had my baby in my arms when she started to show her first feeding cues. I unwrapped her and she nuzzled the breast and attached beautifully.

That was the beginning of the next 18 months of feeding. At first Tara needed to be woken for feeds but she graduated quickly to feeds that fitted around a busy large family. Weight gain was slow but consistent and I tried not to weigh too often. At around six months she was introduced to solids as encouraged by her brothers, she wanted to do everything they did, including eating from their plates. I returned to work when Tara was six months, doing evening shifts at the local A&E and she waited for me to come home at 10pm for the last feed of the day.

The early intervention team had recommended that I stop breastfeeding as it was thought that it perpetuated tongue thrusting and therefore by six months, they recommended introducing a cup. As you can probably tell, however, I wasn’t very compliant, preferring to follow my instincts as Tara was a champion breastfeeder and was also happily drinking from the cup.

I am now a Lactation Consultant with 15 years experience, working in the community as a Child and Family Health nurse and supporting many families on their breastfeeding journey.

Times have certainly changed over those years as it is now recommended that following delivery all babies are put skin to skin with their mother, with breastfeeding initiated by baby-led feeding.

Breastfeeding a baby with Down syndrome can be challenging, but with persistence, patience and support, breastfeeding often can become easier as the baby grows in strength and muscle tone. Not every baby will be able to attach and breastfeed adequately, but every baby deserves the opportunity to do so and every baby can receive the benefits of breast milk with expressed breast milk. Hospital grade electric double breast pumps are so effective that expressing milk after the establishment of the milk supply, can take as little as 10 minutes.

There are many benefits to breastfeeding for your baby, including:

- Nutritionally, breast milk is a complete food. It’s easy to digest, aids digestive system maturity and lessens constipation, which is particularly important if the baby has Down syndrome.
- Breastfeeding offers extra stimulation to your baby, through skin to skin contact, providing important sensory stimulation that creates neural connections that can facilitate future learning.
- Breast milk provides protection from infection by decreasing the incidence and severity of infections. Babies with Down syndrome are especially prone to respiratory tract infections and middle ear infection, so the natural antibodies found in breast milk, support the baby’s immune system and protect against numerous auto-immune disorders such as coeliac disease, asthma and allergies.
- Children with Down syndrome often have food sensitivities and more issues with their skin than the average child, including dry skin, eczema and seborrhoea. Breast feeding reduces the incidence of these problems.
- Breast milk has high levels of Omega-3 and Omega-6 polyunsaturated fatty acids which promote optimal brain growth and development and neural pathways.
- Babies with Down syndrome have a different oral structure, such as a flat palate, tongues that may protrude and low facial muscle tone, which may cause attachment difficulties. Breastfed babies, however, have improved coordination and oral development of the tongue, lips and cheeks because of the unique action required in breastfeeding and this impacts positively on later speech and language development.

Margot Elliffe is the Vice Chair of Down Syndrome NSW and has been a member for 28 years. She is a Registered Nurse, Midwife, and Child and Family Health nurse.