

The hidden dangers of breastfeeding misconceptions: A deep dive

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In the exclusive interview, Dr. Christie del Castillo-Hegyí, co-founder of the Fed is Best Foundation, sheds light on breastfeeding misconceptions and their devastating impact

The narrative surrounding breastfeeding often paints a rosy picture, emphasising its numerous benefits for both mother and child. However, a growing body of evidence suggests that many common misconceptions about breastfeeding can lead to serious health consequences for infants.

In the exclusive interview, Dr. Christie del Castillo-Hegyí, co-founder of the Fed is Best Foundation, sheds light on breastfeeding misconceptions and their devastating impact.

Breastfeeding misconceptions: The myth of exclusive breastfeeding

One of the most pervasive myths is that almost all mothers can exclusively breastfeed their infants for six months. Dr. del Castillo-Hegyí highlights that this ideal, promoted by prominent health organisations, can lead to significant harms to both mothers and babies.

“It’s crucial to recognise that low milk supply is a real problem,” she explains. “Many mothers struggle to produce enough milk to meet their baby’s needs, leading to frustration and potential health risks to the infant.”

Dr. del Castillo-Hegyí points to research showing that 15% of first-time mothers have true low milk supply even with lactation support. Factors such as high BMI and other medical conditions increase that risk. While most parents are told following certain practices all but guarantee a full supply, many cases of low milk supply are truly out of a mother’s control.

The dangers of excessive weight loss

According to Dr. del Castillo-Hegyí, when mothers receive the ubiquitous message that low milk supply is rare and that any amount of formula can lead to breastfeeding failure, it can lead those with true low milk supply to persist in exclusive breastfeeding even if her infant shows signs of persistent hunger. This can lead to excessive weight loss, most commonly occurring in the first days after birth. Another common misconception is that newborn infants can safely lose up to 10% of their birth weight. However, recent research suggests that even modest weight loss below 10% can have significant health consequences.

Excessive weight loss from poor feeding can lead to:

- Hypoglycemia: Low blood sugar
- Jaundice: High blood bilirubin, which turns the skin yellow
- Dehydration: Low body fluid that can lead to electrolyte abnormalities

If severe enough, all three conditions can result in brain and/or vital organ damage, seizures, permanent disability, and even death. Dr. del Castillo-Hegyí has studied global data on feeding complications that increase risk of developmental problems and has found they occur commonly in the first days of exclusive breastfeeding. She stresses that the time-dependent nature of these devastating conditions is why education on parent-led supplementation with formula or banked donor milk is a critical element of safe breastfeeding education.

The impact on maternal mental health

The pressure to exclusively breastfeed can take a toll on a mother's mental health. The guilt and shame associated with struggling to meet the breastfeeding standard, as well as its physical and emotional demands, can lead to postpartum depression and anxiety. Healthcare providers play a crucial role in combating breastfeeding misconceptions by providing accurate information and offering non-judgemental support to protect the health and well-being of both infants and mothers.

A personal perspective

Dr. del Castillo-Hegyí's personal experiences as a breastfeeding mother profoundly shaped her advocacy work. It led her to co-found the Fed Is Best Foundation, along with Jody Segrave-Daly, RN, retired IBCLC.

She shares in their new infant feeding book, *Fed Is Best*, how she prepared herself to exclusively breastfeed according to the WHO guidelines through breastfeeding books and classes. She soon discovered these trusted resources provided incomplete information on the health risks that exclusive breastfeeding with low milk supply posed to her infant. Her infant suffered all three feeding complications and now suffers from severe life-long developmental disabilities.

She later found that complications of insufficient feeding during exclusive breastfeeding were among the leading causes of readmissions of term newborns. She, along with other health professionals, including a family physician, a neonatologist, and pediatric endocrinologist met with top WHO officials in September 2017 to address these issues. She was shocked to learn that these complications were well known to them, that health professionals were tasked to look for infants at risk, and that informing parents of the signs and consequences of these complications had not been identified as a top priority. She has since made it her top priority to raise awareness of these issues.

A call for systemic change

To address the issue of breastfeeding misinformation, Dr. del Castillo-Hegyí advocates for a systemic change in healthcare practices, public health policies, and societal attitudes.

This includes:

- Updated evidence-based reform of hospital breastfeeding guidelines with greater focus on preventing feeding complications rather than meeting exclusive breastfeeding targets
- Open and honest parent education on how to recognize adequate versus inadequate feeding and when supplementation is needed.
- Hospital policies that respect parent autonomy regarding infant feeding choices and provide informed consent on the consequences of feeding complications.
- Challenging the stigma associated with formula feeding.

Conclusion: Driving change

The issue of breastfeeding misinformation is complex and multifaceted. By understanding the underlying causes and consequences, we can work towards creating a more supportive and informed environment for mothers and infants. Dr. del Castillo-Hegyí's work provides a valuable contribution to this important conversation and offers hope for a future where all mothers and babies receive the support they need to thrive.

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