

Trial to Triumph

By Ruth P.

My first born child came 2 ½ weeks early via emergency C-section due to fetal distress. I was a first time mom and didn't have a clue as to what was going on. We had come to Labor and Delivery because I wasn't feeling our baby move but I was feeling contractions every 10 minutes. After being evaluated my doctor explained that inducing was too risky for my baby as this was my first labor and it would no doubt take 13-14 hours, even as an induction, and my baby was not showing signs of being able to handle the stress for that long. My husband went outside to call our parents and let them know the baby was coming today while I signed a myriad of papers as they prepped me for the C-section. I was being wheeled to the OR before I had really internalized what was happening. A short while later I was shown my beautiful little girl in a bundle of towels. I recall seeing her little red curls of hair on the top of her head as the nurse, my baby and my husband all left for the nursery while I was closed up and taken to recovery. When I could wiggle my toes I was released to my room and my husband went home to sleep and finish packing for his 2 weeks of active duty with the U.S. Navy Reserves.

I didn't sleep much that night as my nose was constantly itching from the narcotics in my I.V. Around 2 a.m., as I shivered uncontrollably due to my body being in shock, I heard "Code Blue to the Nursery" over the hospital intercom. I thought to myself, "Somebody's baby is having trouble." A couple of hours later a doctor came in to my room to let me know that they had moved my baby to the N.I.C.U. (Neo-natal Intensive Care Unit) and that she had been stabilized there. She proceeded to explain something to me about low blood sugar and oxygen levels but I don't recall most of what she said since I was in disbelief about the whole situation.

The next morning as I woke up I felt gas bubbles in my abdomen and I was sure that it had all been a bad dream and that the baby was still inside me. When I opened my eyes my husband was there next to my bed ready to help me to the N.I.C.U. so I could see our daughter. At the N.I.C.U. entrance I was scrubbed and robed and then wheeled over to my daughter. As I looked at her little 6lbs 8oz, 19 ½ inches body covered with temperature sensors, an Oxygen sensor, an IV and a big upside down salad bowl over her head for Oxygen I felt nothing like what I had imagined I would feel seeing my firstborn child. I wasn't able to hold her that day, I could only stroke her arm as she lay there. Then I felt nauseated and I was wheeled back to my room. The next couple of days were like that. My husband left, my in-laws showed up to take care of me and I developed an infection in my incision. The infection was a silver lining since it allowed me to stay in the hospital as a patient instead of as a boarder since they were not planning on releasing my daughter for at least a week.

My daughter was born on Saturday evening and by Monday morning I hadn't nursed her or held her. My dad came to visit and he was the one that said I needed to be in the N.I.C.U. holding my baby skin to skin to help her and me. He also told me to ask for a breast pump so I could work on stimulating my body to produce breast milk for my baby. By Tuesday night the glucose I.V. wouldn't stay in her vein anymore. It was only then that the nurse in the N.I.C.U. inquired of me if I was planning on breastfeeding? I told her I had been dry pumping for the past couple of days and was still waiting for something to come out. I tried getting my daughter to latch on when I was holding her in the N.I.C.U. to help with stimulation. She had a very weak latch and suck so not much was happening. The nurse informed me that they were monitoring my daughter's glucose levels and if I wasn't able to produce something for her by the time her glucose levels were low then they would have to give her a bottle of formula. I called my friend whose baby was 4 months old and asked if she would be able to come in and try nursing my baby so she wouldn't have to have formula. She gladly agreed, but when she arrived the nurse in the N.I.C.U. wouldn't allow her to

come in since she wasn't family and because the hospital couldn't be held liable for incompatible body fluids! I was so distressed!

Wednesday morning my colostrum finally came in and I excitedly took it in a bottle to the N.I.C.U. My baby was sleeping at the time so I held her and tried to get her to wake up and take the colostrum in the bottle. She wasn't interested so I put it in the refrigerator until later. When I returned to the N.I.C.U. later I discovered that the bottle had been knocked over in the refrigerator and the top wasn't on all the way so most of it had leaked out into the refrigerator. Since she wasn't latching on very well they gave her a bottle of formula after I tried to nurse her. At the time I was receiving I.V. anti-biotics for my infection every 4 hours and the staff wanted my daughter on a 3 hour feeding schedule as they were still monitoring her glucose levels. Eventually the two schedules came together. I phoned the N.I.C.U. to let them know that I was on my anti-biotic I.V. and it would be done in about 15 more minutes so please do not try feeding my baby as I was going to be in there soon to nurse her. The nurse told me he had checked her glucose levels and they were low so he had already given her a bottle of formula. Right about then I wanted to pull out my I.V. and take it in to the N.I.C.U. and use it to strangle that nurse!

Thursday night my savior arrived with the shift change. She didn't usually work at that hospital but they were understaffed so she was asked to come over. She said she loved to work with NICU babies and their families and it showed in how she helped me and my daughter. She showed me how to help my baby wake up and get interested in my breast. She showed me how to stimulate my nipples to make them easier for her to latch on to. She waited for me to come to the NICU and didn't hurry and feed my baby with the bottle. She was so breastfeeding friendly! She stayed for 12 hours and I was sad to see her go, however she had given me such a positive experience that I was empowered to stand up for me and my baby's needs! I didn't have any more problems with nurses feeding my baby before I could get there again and by Saturday morning the doctor said her glucose levels were stabilized and she could go home that afternoon!

The next few weeks I worked on healing from my C-section and feeding my baby. She had a very light suck and sometimes I wasn't sure if she was sucking at all. My friend with the 4 month old baby came over and let me nurse her baby so I would know what it felt like. Then she worked on getting my daughter to latch on to her since her nipples were a different shape than mine and a little easier for my daughter to latch on to. After a few tries I felt confident that things were working as they should. My daughter would nurse every two hours for about 10 minutes at a time and she was peeing and pooping regularly.

Just shy of her 1 month birthday my daughter started sleeping more and eating less and less. Her diapers were not very wet and when she latched on she only sucked long enough to get my milk to let down then she would just let it drip in her mouth and swallow once in a while. When the visiting nurse came to check on my incision I showed her one of my daughter's diapers since it looked like it had a little blood in it. The nurse looked at it and declared that it was urine crystals! She checked over my daughter and saw that she was very dehydrated. She weighed her and she was 4lbs 13 oz (birth weight had been 6 lbs. 8 oz.)! She called the doctor's office and they had me come in right away. They verified that my daughter was very dehydrated and then ambulated her to the hospital to run tests to see why she was so dehydrated. As I watched the nurses draw blood from every vein they could and then do a spinal fluid draw I thought my daughter was amazing that she didn't cry once. I later learned that was because she was too dehydrated to cry. The nurse asked me how many ounces she was drinking at a feeding and I told her I was breastfeeding and that she would only nurse for a minute or two before falling back asleep. Then the nurse had me pump to see how much milk I had. After 15 minutes on each side I had less than 2 ounces. My milk was drying up due to lack of demand! My daughter was admitted to the hospital and hooked up to an I.V. to try and rehydrate her. I spent the night at her side.

When I woke up the next morning and looked at her she looked like a different baby! She was plump! I hadn't noticed her weight loss and how shriveled she looked because I had been with her every day as she was slowly wasting away. 18 hours on a fluid I.V. made an amazing difference! The doctor came in and told me that the tests had all come back negative for any infection. They showed me how her suck was very weak and said that if I wanted to breastfeed I was going to have to help her strengthen her suck or she would get dehydrated again. They sent the lactation specialist in to give me some pointers. She talked with me awhile about my daughter's eating habits and asked to see the bottles we had used for the formula supplement the hospital had sent home with us. The nipples were latex. She rubbed her latex glove on my breast and then put my daughter up to it. As soon as my daughter smelled the breast with the latex rubbed on it she started rooting around. The nurse stated that my daughter had nipple confusion. She then advised us to get rid of all latex nipples and pacifiers and replace them with silicone. Then she gave me a syringe with a little tube attached to it. She showed me how to fill the syringe with breast milk and then put the little tube on the tip of my finger. I put my finger in my daughter's mouth and wiggled it to get her to suck on it. Then the breast milk flowed out of the tube and in to her mouth. This helped her associate the taste of my skin with food. Then the nurse showed me how to use the breast pump to draw my nipples out to make them easier for my daughter to latch on to. That also helped the milk let down so there would be milk ready right away for her. As my daughter's suck improved we moved the little tube and syringe from my finger to my breast. I spent a lot of time pumping since I had to build up my milk supply again and so I had milk in a bottle ready for her to top off with when she was tired of sucking. I did this process for 2 months even with returning to work. (My boss was nice enough to let me bring my baby to work which facilitated this process working after my maternity leave was over.)

One day before my daughter's 3 month birthday she latched on without me having to draw my nipple out first. She nursed a whole 15 minutes on one side and then took a little off the other side before she was done. She declined the bottle, burped and fell asleep. As I sat there looking at her and realizing how much time and effort had passed to bring us to that point I was overcome with joyful emotion and relief. The next feeding worked just as well and each feeding there after. A week later I put my pump away in it's box and vowed that my daughter would nurse as long as she wanted as I was in no hurry to end the process that we had worked so hard to get going. She nursed until she was 11 months old, by then she was only nursing at night, when she declined me repeatedly. I felt a little disappointed that she was done with me, but I felt quite satisfied that I had been able to provide for her for as long as I did. I have since given birth to 4 more children who have all nursed very well.