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ORIGINAL RESEARCH

Breastfeeding Support for Teenage Mothers in the Prevention and Management of Severe Acute Malnutrition in Infants: A Case Study Report

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Abstract

Exclusive breastfeeding for the first 6 months of life; prevention and management of acute malnutrition are amongst the recommended High Impact Nutrition Interventions (HINI) essential for child survival. However, suboptimal breastfeeding practices persist, leading to infants' susceptibility to undernutrition, infectious diseases, and childhood mortality. Undernutrition, prevalent in low and middle-income countries, is attributed to 11% of global disease burden and 45% of childhood mortalities. It is estimated that 13.6million (2%) and 3 million (1.5%) children globally and in Africa, respectively, as well as 4.9% and 1.2% of children in Kenya and Nyamira, respectively, are wasted. Masaba North hospital 9 months statistics show 79 deliveries from teenage mothers with 7(8.8%) of infants being low birth weight necessitating targeted interventions. This case study describes the management of a female 1 month old infant of a 16 year old mother who presented with refusal to breastfeed, sunken fontanelle, mild dehydration and cough. The birth weight was 3kg, and the admission weight was 3.5kg, indicating moderate underweight. The mother complained of having insufficient breastmilk. Clinical management involved paediatricians, nutritionists and nurses. Treatment administered was intravenous fluids 3-hourly, first-line antibiotic therapy, expressed breastmilk alternated with infant formula one every 4-hourly via nasogastric tube. Formula milk was reduced as breastmilk production increased, and the mother received breastfeeding support, counselling, and assistance to stimulate milk production. On the 5th day of treatment, the infant's hydration status improved, the mother was producing sufficient milk, and the infant attained 4 kg. The pair were discharged and linked to a Community Health Promoter for follow-up. The key challenges encountered were inadequate private space for breastfeeding within the inpatient ward and the unavailability of therapeutic feeds for infants. This case illustrates the importance of breastfeeding counselling and support for teenage mothers to promote optimal feeding practices. It also demonstrates that in the absence of commercial therapeutic feeds, breastmilk and infant formula are effective alternatives in managing acute malnutrition in infants under 6months of age. Providing teenage mothers with privacy and supportive environments enhances breastfeeding success and confidence. Strengthening breastfeeding counselling and provision of therapeutic intervention for managing acute malnutrition in early infancy, which can be supported by further research on adequate private breastfeeding spaces within health facilities, is critical in preventing and managing undernutrition. This case reinforces the role of breastfeeding not only as optimal infant feed but also as therapeutic intervention for managing acute malnutrition in early infancy which can be supported by further researches in this area.

Key words: Breastfeeding support, teenage mother, acute malnutrition, infant nutrition, therapeutic feeding, child survival