

How Can Occupational Therapy Help with Breastfeeding?

At Michigan Pediatric Therapy, we work hand-in-hand with lactation consultants. It is our commitment to work as a team to provide the best service for the child. We know that the best approach is for both disciplines to work together. The mechanics of occupational therapy (OT) help the baby move forward with their functionality. We look at all the working parts that are listed below and address the whole child. By assessing the whole child, the OT can provide their expertise to help the baby achieve success where they can possibly be lacking.

Occupational therapy begins with assessing:

1. Neuromuscular and Musculoskeletal Issues

We address the whole body:

- Joint stability: Can the child maintain the jaw or does it shift to one side?
- Joint mobility: Can the child move the jaw up and down?
- Muscle strength: Can the child express milk?
- Muscle tone: Is the child unable to open their mouth or is the mouth hanging open?
- Muscle endurance: Does the child have the ability to feed over time, i.e., 10-15 minutes?
- Motor reflexes: Help the child gain and learn new skills
- Fascia: Is movement restricted in the jaw, neck, arms, legs, or eyes (craniosacral)?
- Developmental milestones: On tummy, back, sitting, crawling

2. Motor

Position:

- Body positions: Feeding positions for all ages
- Obtaining and holding objects: Toys, bottles
- Reaching and grasping
- Use of hands, manipulates

3. Oral Motor

- Oral motor function: Jaw, lips, tongue, and cheek exercises for higher functioning
- Tethered tissues: How it affects orofacial structure development; how it affects feeding
- Oral motor skills: Suckling, sucking, biting, chewing, swallowing; gross to fine; jaw, lip, and tongue movement
- Management of feeding, eating, and swallowing
- Sustained feeding over lifespan

4. Sensory

- Visual: Child can't find breast on their own
- Hearing: Child can only eat if quiet
- Taste: Child over-responds to taste of formula
- Smell: Child reacts to all smells with crying
- Proprioception: Child can only sleep if on the parent
- Touch: Does not like to be held
- Interception: Child's ability to recognize and communicate
- Pain: Overreacts with crying
- Sensitivity to temperature: Does not like cold milk in bottles
- Vestibular: Needs to be moving all the time
- Regulation: Promotes secure attachment

5. Play

- Activities that are intrinsically motivated; does the child engage with toys?

By working together in this synergy, the lactation consultant and occupational therapist impact areas that will make the child and parent progress rapidly toward success. This synergy also promotes success in feeding for the future. Our goal as two professionals who at times are very different and at times may overlap, is to achieve a **path forward** that provides the child and parent with success. It is our privilege to offer a village of cooperation and teamwork for your journey.

Contact us today to schedule an evaluation.

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