

Collected Scientific Research Relating to the Use of Osteopathy with Lactation/ breast feeding

Important:

1) Osteopathy involves helping people's own self-healing abilities to work better, rather than focussing primarily on particular conditions.

2) Each person is different, and osteopathy treats them differently.

Therefore people respond to osteopathic treatment in different ways. Treatments that work for one person cannot be guaranteed to work for another person in the same way. The fact that there is scientific research supporting a treatment in a group of people does not mean that it will always work in the same way (which is probably true of all research).

A number of things make research into osteopathy challenging. These include the two aspects of osteopathy mentioned above, and also the lack of major commercial interests to provide funding in expectation of financial returns. At the same time, there is an emerging body of research demonstrating the usefulness of osteopathic treatment.

More research is being done all of the time. I am not aware of any research which shows that osteopathic treatment, delivered by a qualified osteopath, is ineffective in relation to this area. If you are aware of any studies that show that, please bring them to my attention.

Please note: there is room for debate about the classifications used for these studies. Please let John Smartt know if you believe that any of these classifications are incorrect.

These studies are from peer-reviewed journals

Number
of studies:
4

Clinically and statistically significant results

Number
of studies:
4

Randomised controlled trials

Number of studies: 1

Herzhaft-Le Roy J, Xhignesse M, Gaboury I. 2016 **Efficacy of an Osteopathic Treatment Coupled With Lactation Consultations for Infants' Biomechanical Sucking Difficulties.** J Hum Lact Dec 1:890334416679620 <https://www.ncbi.nlm.nih.gov/pubmed/28027445/>

"Abstract

BACKGROUND:

Despite well-known recommendations from national and international bodies including the World Health Organization, few mothers achieve the goal of breastfeeding exclusively for 6 months. Half of mothers stop breastfeeding due to biomechanical issues in the first month, despite increasing support from lactation consultants. Osteopaths worldwide work with these babies, but there is little empirical evidence for this type of treatment. Research aim: This study aimed to determine the efficacy of an osteopathic treatment coupled with usual lactation consultations on infants' ability to latch. Secondary objectives included assessment of nipple pain and mothers' perceptions of the effect of treatment.

METHODS:

We conducted a single blind, randomized controlled trial at a mother-to-mother support group between January and December 2015. Data were collected at four different times over a 10-day period (T0-T10) from 97 mother-infant dyads using the LATCH assessment tool, a visual analog scale (VAS) to document mothers' nipple pain, and a de novo questionnaire for breastfeeding management and potential treatment side effects.

RESULTS:

There were consistent statistical and clinical differences in the mean LATCH scores between the treatment and the control groups ($p < .001$). However, no significant differences in the VAS scores were reported over time ($p = .713$). Mothers reported no serious or unexpected side effects during the follow-up period.

CONCLUSION:

This study is one of the first to bring together lactation consultants and osteopaths to address infants with biomechanical sucking difficulties. Findings support the hypothesis that the addition of osteopathy to regular lactation consultations is beneficial and safe."

Case series

Number of studies: 1

Fraval M 1998 **A pilot study: Osteopathic treatment of infants with a sucking dysfunction** Journal of the American Academy of Osteopathy http://www.osteopathic-research.com/index.php?option=com_jresearch&view=publication&task=show&id=12345&lang=en

This was a time-series study without independent controls

"A pilot study of six infants".

"At the time of first measurement, the difference between pre- and post fed fat estimations of breast milk was small in infants with a dysfunctional suck. Following osteopathic treatment, the difference between pre- and post fed fat estimations were comparable with the fat estimations from the breast milk of infants who were feeding normally."

Case reports

Number of studies: 2

Lund GC, Edwards G, Medlin B, Keller D, Beck B, Carreiro JE. 2011 **Osteopathic manipulative treatment for the treatment of hospitalized premature infants with nipple feeding dysfunction.** J Am Osteopath Assoc Jan;111(1):44-8 <http://www.ncbi.nlm.nih.gov/pubmed/21258016>

"Premature newborns and infants are usually required to successfully transition from gavage to nipple feeding using breast or bottle before discharge from the hospital. This transition is frequently the last discharge skill attained. Delayed acquisition of this skill may substantially prolong hospital length of stay. The authors describe a case of hospitalized premature twins who had considerable delays in attaining nipple-feeding skills. Because of their inability to take all feedings by nipple, preparation for surgical placement of gastrostomy tubes was initiated. Before the surgeries were scheduled, the inpatient osteopathic manipulative medicine service was consulted, and the twins received a series of evaluations and osteopathic manipulative treatment (OMT) sessions. During the OMT course, the twins' nipple feeding skills progressed to full oral feeding, which allowed them to be discharged to home without placement of gastrostomy tubes. The authors also review the literature and discuss the development of nipple feeding in premature newborns and infants and the use of OMT in the management of nipple feeding dysfunction."

Khraim N 1999 **Osteopathic treatment of an infant with a failure to suck** Australian Journal of Osteopathy 10:1 15-16

"The predominant complaint was inability to suck either at breast or bottle."

"The baby was being fed with a nasogastric tube."

"Osteopathic treatment addressing the cranial and extracranial structures, with particular emphasis on the condylar and sacroiliac compressions, was carried out."

"Immediately following second treatment, he sucked 60ml of formula on his own. The amounts sucked progressed erratically after that next week."

"By that time, Baby X was almost 8 weeks old. He presented on this occasion without the nasogastric tube,"

"At five months of age... he is continuing to thrive. Developmental milestones were age appropriate. Solids were gradually introduced at approximately four months of age."