



## **A Survey on Lactation Insufficiency among Post-Cesarean Mothers Using the LATCH Assessment Tool: A Cross-Sectional Study**

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❖ **ABSTRACT - Background:** Lactation insufficiency is commonly reported among post-cesarean mothers, contributing to early breastfeeding discontinuation. The LATCH scoring system provides an objective, structured assessment of breastfeeding effectiveness. **Objective:** To assess lactation performance among post-cesarean mothers using the LATCH score and classify breastfeeding effectiveness into three severity categories: severe (0–3), moderate (4–7), and no insufficiency (8–10). **Methods:** A cross-sectional survey was conducted among 25 post-cesarean mothers after the first 72 hours postpartum. LATCH scores were recorded and categorized. Data were analyzed descriptively. **Results:** LATCH score distribution among 25 mothers showed: 3 (n=3), 4 (n=9), 5 (n=6), 6 (n=2), 7 (n=4), 8 (n=1), 9 (n=1). Based on severity classification: Severe insufficiency (0–3): 3 mothers (12%) Moderate insufficiency (4–7): 21 mothers (84%) No insufficiency (8–10): 2 mothers (8%) The mean LATCH score was 5.04,



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indicating generally moderate breastfeeding difficulties in this population. **Conclusion:** Most mothers demonstrated moderate lactation insufficiency, emphasizing the need for structured breastfeeding support. The LATCH score proved valuable for identifying challenges early and guiding interventions. This survey can serve as foundational data for future pilot studies or randomized controlled trials.

❖ **KEYWORD:** Lactation insufficiency, post-cesarean mothers, LATCH Assessment Tool, Homoeopathy

### ❖ **INTRODUCTION:**

Breastfeeding is essential for neonatal nutrition, immune protection, and maternal-infant bonding. However, lactation insufficiency is frequently reported among post-cesarean mothers due to postoperative pain, post-operative pain, delay in skin contact, and physical stress of the recovery process. Early identification of breastfeeding difficulties is crucial to prevent complications such as poor neonatal weight gain, maternal anxiety, and premature introduction of formula feeding.<sup>[1][2]</sup>

The LATCH scoring system, developed by Jensen et al., provides a structured method to evaluate five critical breastfeeding components: Latch, Audible swallowing, Type of nipple, Comfort, and Hold/Positioning. Scores range from 0–10, with lower scores indicating greater difficulty. For practical clinical use, LATCH scores may be grouped into severity categories:

0–3: Severe lactation insufficiency

4–7: Moderate insufficiency

8–10: No insufficiency

This study assesses breastfeeding effectiveness among post-cesarean mothers using these categories.<sup>[3]</sup>

### ❖ **MATERIALS AND METHODS**

#### **Study Design**

A descriptive, cross-sectional survey.



### **Study Setting**

Postnatal ward of a tertiary care hospital.

### **Sample Size**

25 post-cesarean mothers, selected consecutively.

### **Inclusion Criteria**

1. Mothers aged 18–35
2. Underwent lower segment cesarean section (LSCS)
3. Breastfed within first 72 hours postpartum
4. Provided informed consent

### **Exclusion Criteria**

1. Women with congenital breast abnormalities.
2. Systemic and significant comorbidity (DM, Thyroid)
3. Mothers with severe postpartum complications (sepsis, Haemorrhage)
4. Mothers of preterm babies admitted to the neonatal intensive care unit (NICU) will be excluded from the study.

### **❖ Data Collection Tool**

The LATCH scoring system, assessing five components (0–3 each), total score 0–10.

Severity Classification

0–3 = Severe lactation insufficiency

4–7 = Moderate lactation insufficiency

8–10 = No lactation insufficiency

### **Data Analysis**

Scores were tabulated and classified. Mean, proportions, and distribution were calculated.

### **❖ RESULTS**

#### **1. LATCH Score Distribution (n = 25)**

<b>Score</b>	<b>Mothers</b>
3	3 mothers
4	9 mothers



5	6 mothers
6	2 mothers
7	4 mothers
8	1 mother
9	1 mother

2. Mean LATCH Score

$$\text{Mean} = \frac{126}{25} = 5.04$$

3. Severity Classification

Category	Score Range	Number of Mothers	Percentage
Severe insufficiency	0–3	3	12%
Moderate insufficiency	4–7	21	84%
No insufficiency	8–10	2	8%

4. Interpretation

A large majority (84%) fall in the moderate insufficiency group, highlighting widespread breastfeeding challenges.

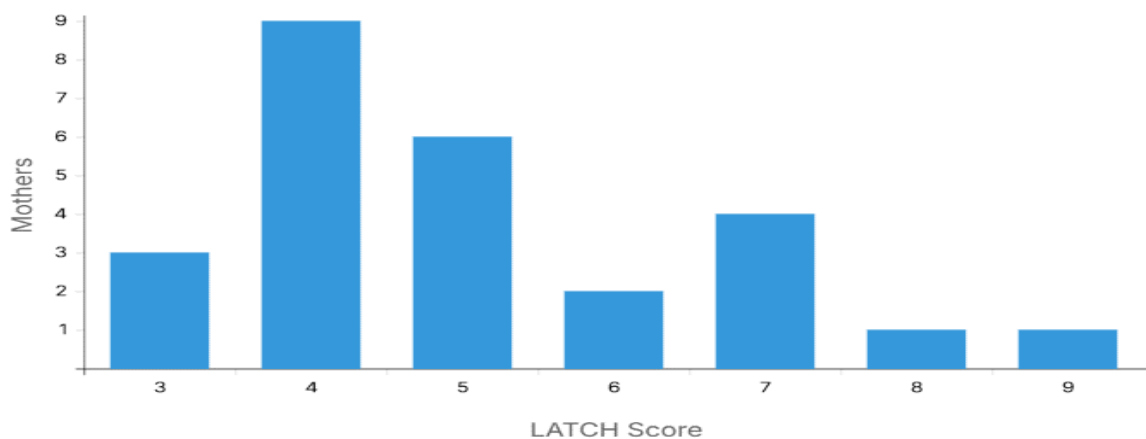


Figure 1: Latch Score Distribution Chart

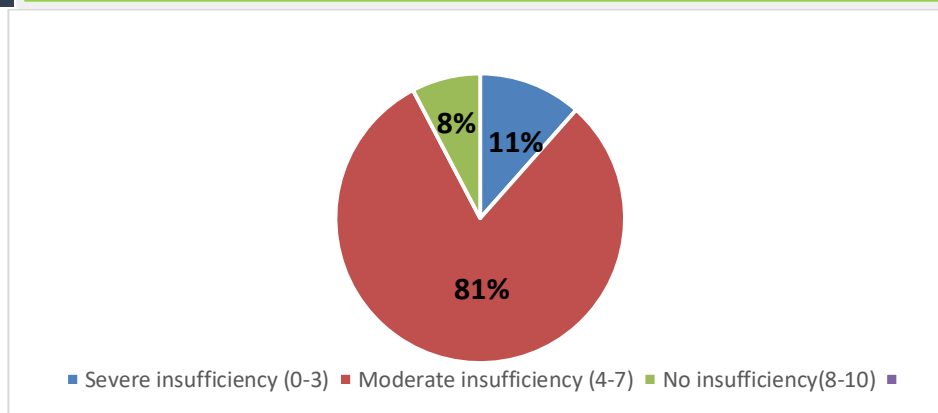


Figure 2: Severity of Lactation Insufficiency Based on LATCH Score

### ❖ DISCUSSION

This survey shows that lactation insufficiency is common among post-cesarean mothers, with 96% scoring below 8 on the LATCH scale. Postoperative discomfort, delayed initiation, and difficulty positioning likely contributed to reduced scores.

The predominance of mothers with moderate insufficiency (scores 4–7) indicates that breastfeeding challenges were present but often manageable with early lactation support. Only 2 mothers scored  $\geq 8$ , representing effective breastfeeding.

The LATCH tool proved to be a reliable and easy-to-use assessment method, allowing objective documentation of breastfeeding challenges. These findings are consistent with existing literature, which notes that cesarean delivery frequently impacts early breastfeeding performance.

This small survey can guide the formation of future pilot studies or randomized controlled trials and structured breastfeeding interventions.

### ❖ CONCLUSION

Lactation insufficiency is highly prevalent among post-cesarean mothers in this survey. Most mothers scored in the moderate insufficiency range on the LATCH scale, highlighting the need for early and continuous lactation support.

The LATCH tool is effective for assessing breastfeeding performance and identifying mothers who require additional assistance. These findings serve as preliminary evidence supporting further clinical research.



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