

Sensory Integration Notes by Winnie Mading

Sensory Integration, Sensory Processing Disorders and Breastfeeding presented at ILCA 2008 by Cathy Watson Genna – This would make a great presentation at a WALC conference, but this particular presentation lacked her usual organization. I would want to be sure it was more organized before asking her to give it. She did acknowledge that it needed more work.

Sensory Integration (SI) is a neurological process that organizes sensations from within the body and the outside environment and helps use the body effectively in that environment to get one's needs met.

Normal newborns have reduced SI secondary to inexperience, immaturity and the transition from interuterine environment – the new environment is not what the baby has grown to expect.

In the cycle of SI, we take in sensory info, process it in the brain, plan and organize behavior, adapt our behavior, forward model, and incorporate feedback for future use.

Forward modeling is the subconscious expectations of what we will experience based on past experiences. In a new situation we say to ourselves, "I've experienced this before" or more commonly, "I had a previous experience that seems to most closely match such and such previous experience so I will respond as if it is the same as that previous experience". As an example, when we reach for a can of soda, we know how much it will weigh and use our muscles accordingly. If it is either heavier or lighter than we anticipate, it can lead to momentary confusion. We either "create a new data file" or we can become confused and frustrated with the mismatch.

Infant state will affect how info is integrated. Consistent parental responses especially to early cues are important.

(Too much info about how it related to normal feeding to cover here so I will just cover some isolated "gems" of info)

When using a nipple shield it is time to try without it when baby looks excited to see the breast without it.

With an SI problem, the individual may overreact to sensory input or require more input than normal

Sensory defensiveness can occur if the person is unable to effectively deal with sensory input.

A tactually defensive infant may respond better to deep touch than light touch-swaddling and/or nursing with baby in a sling may help.

Skin-to-skin often helpful as well as swinging.

A mother with SI may do better with some cloth between her and baby.

There are sensory integration therapists – <http://www.sensoryint.com/therap.html> or <http://www.spdnetwork.org> – info for parents and directory of therapists

Yahoo Groups AP_Sensory (Attachment Parenting for parents of kids with SI issues) <http://groups.yahoo.com> find AP-Sensory to join

Good resource – Ayers, A. Jean, *Sensory Integration and the Child* Western Psychological Services, 1979 – she is the top expert in the field

Cathy W_G's *Supporting Sucking Skills....*” Also has good info

Wolf and Glass's *Feeding and Swallowing Disorders in Infancy*

“Voldemort” and Health Professional Knowledge of Breastfeeding – Do Journal Titles and Abstracts Accurately Convey Findings..... Presented by Julie Smith et al from Australia Julie.smith@anu.edu.au

(for the Harry Potter impaired – Voldemort is the ultimate characterization of evil in the books. Since to even mention his name can bring doom and gloom on the speaker, he is referred to as “he who shall not be named”)

If you look at much literature about infant feeding, it seems like formula is “that which shall not be named”

She analyzed the titles and abstracts from 78 studies cited in the AAP statement on BF from 2005.

Among titles, only 5% specifically named formula feeding as a health risk exposure. About 30% were misleading by falsely linking breastfeeding to the illness or disease being studied (e.g. “Breastfeeding and Childhood Obesity” which in the content actually stated that NOT breastfeeding increased the risk). 65% were neutral in conveying no information about which feeding method was linked to evidenced higher health risks.

Among abstracts, 8% named the exposure and 73% did not mention infant formula as the exposure.

The content of the articles may have named formula feeding (or not breastfeeding) as risk factors. Unfortunately, too many people (yes, that includes HPs!) do not read such articles in depth and often make judgments based on only the title or abstract!

If we don't start naming “Voldemort” (formula) as the “culprit” in health studies, how can we hope to change the current paradigm so breastfeeding is always presented as the norm?!