

CASE REPORT

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Impact of childhood burn injuries on breastfeeding: a case report

Zurraini Arabi^{1*}, Ezura Madiana Md Monoto² and Agusmanan Bojeng³

Abstract

Background: Pre-pubescent girls with chest burns are at risk of complication associated with scarring and impairment in breast development. This case illustrates how burn injuries in childhood in a first-time mother have affected her in terms of breastfeeding.

Case presentation: In May 2015, a 20 year old first-time mother at 36 weeks gestation was seen in a district health clinic in Kuching, Sarawak in regards to her ability to breastfeed. She had a history of a flame burn at the age of 5 years old to her chest, abdomen, upper limb and part of her trunk. A skin graft was done on her whole chest and abdomen. Despite the injuries, she had pubertal and antenatal breast development. Her abdomen was able to stretch to accommodate her pregnancy. Physical examination showed a pregnancy which corresponded to date. The skin over her chest and abdomen appeared tight with areas of hyperpigmentation and hypopigmentation due to scarring from the skin graft. Breast tissues were palpable over her chest. The areola and nipple tissue were completely absent with complete scarring of the nipple-areolar complex. There was no duct opening to the areola for milk expression or leakage. Counselling regarding her breastfeeding issues was done. She delivered her baby at full term via spontaneous vaginal delivery with no complication. Oral cabergoline 1 mg was given on the first day postpartum. The baby was given infant formula via bottle feeding as the feeding method of choice.

Conclusion: Counselling plays an important part in the management of a mother with breastfeeding difficulty. Allaying the possible guilty feelings of not being able to breastfeed will fulfil the emotional gap which may arise in a mother with these challenges.

Keywords: Childhood burns, Breastfeeding

Background

Burns are an important cause of morbidity and mortality in children. Burns are the only type of unintentional injury where females have a higher rate of injury than males. Worldwide, the fire related death rate for girls is 4.9/100000 population and 3.0/100000 for boys [1]. In all burn injuries, nearly a quarter occur in children under the age of 16, of who the majority are under the age of five [2].

Pre-pubescent girls with chest burns have a significant risk of long-term problems associated with scarring and breast development [3]. Burns involving the anterior chest wall may cause injuries to the breast and the nipple-areolar complex which can potentially impair and/

or destroy both function and aesthetics [4]. Lactation may still occur after pregnancy as loss or distortion of the nipple-areolar complex due to burn does not necessarily indicate that the underlying gland will not develop completely [4]. Damage to the breast is particularly important to the prepubescent young girl as it could lead to psychological issues due to potential loss of femininity [5]. Issues regarding breastfeeding may have never been considered until they reach the antenatal stage as a preparation of their parenting choice.

Breastfeeding is promoted worldwide because of the importance for infant and maternal health [6]. Women who are unable to breastfeed can experience a sense of guilt due to their inability of giving what is known to be the normative standard of infant feeding and nutrition for their child. These negative feelings can impact on how they adapt and their enjoyment towards motherhood [7].

* Correspondence: zurraini76@yahoo.com

¹Department of Family Medicine, Faculty of Medicine and Health Sciences, Universiti Malaysia Sarawak, Kota Samarahan, Sarawak, Malaysia
Full list of author information is available at the end of the article

