



From the editor • Van die redakteur

Breast Feeding Week

Next month, from the 16th to the 17th October, it is breast feeding week. General Practitioners together with nurses see almost all those mothers who will be breast feeding or not, several times before they deliver. It is therefore important for us to consider what influence we have on the rate and quality of breast feeding in our own sphere of influence.

The October issue of SA FAMILY PRACTICE will carry information of some of the latest advances and research in the field of breast feeding.

Some personal experiences of late have prompted me to think about the importance of our personal example and the dangers of miscommunication in this area of life. Both in the education of medical students and patients I have experienced incredulity and even anger in trying to teach them something which they did not consider me to be practising. How many of our patients rather learn from the example of our female colleagues and wives?

Patients often hear something quite different from what we thought we had said. This can be dangerous at times. A mother from a rural area brought in a merasmic baby with diarrhoea to our casualty department one night. In asking about breast feeding she said that a doctor had said that her breast milk was bad and that she should stop breast feeding when she had gone to him with an illness of her first child. That child died not long afterwards. This second one was not offered the breast at all as the first one was killed by the breast!! Do we as doctors really say such things? Perhaps one does occasionally find among us such misguided individuals but on the whole I would say that most of these instances can be ascribed to miscommunication. As we are the ones that claim to have superior knowledge and are known to be those who tell our patients what to do, I think it fair that we should take a large amount of responsibility for any miscommunication.

Sam Felsen