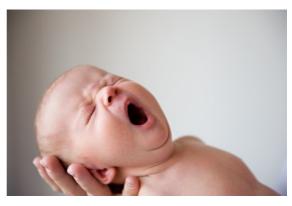
The Importance of Good Breathing in Your Baby- An Osteopath's Perspective

Breathing all starts from the very first gasp of a newborn as it is born and enters the world for the first time. The fluid is squeezed out of your baby's lungs and will be suddenly replaced by air. The first breath is stimulated by a number of factors including hormonal changes during labour, by sensory changes to baby's new external environment, and by the baby's



generalised state of heightened arousal (increased adrenalin) to cope with the birth process.

Factors that influence the quality of this first newborn breath may have lasting effects on the child in months or even years to come.

If labour is very long and exhausting, the cord is around the child's neck, there is delayed delivery due to shoulder dystocia, or baby is especially drowsy on arrival due to effect of the mother's pain relief, its first breath may be premature or ineffective, under-inflating the lungs. Clinically children with recurrent chest infections later in life commonly have a history of an ineffectual first breath. Conversely, if the baby is overstressed or shocked from events around a fast labour, interventions to increase the speed/force of contractions, a forceps or ventouse delivery, or a caesarean, then their first breath can be a sudden huge gasp of air associated with that shock, over-inflating the lungs. Clinically children with asthma, hyperactivity or an over-active nervous system, may have this shock first-breath pattern.

The effects of a poor first breath can be felt in the chest as shallow breathing motion and very often a tensioned diaphragm. The large diaphragm muscle sits between the bottom of the ribcage and abdomen, and is the baby's primary muscle for breathing, as its other breathing muscles are not yet adequately developed. When the diaphragm is in tension babies may sleep in irregular bursts or catnap as they find it difficult to relax into deep, restful sleep.

Feeding may be affected as a baby needs to be able to produce a strong suck using the diaphragm whilst breathing at the same time.

This is hard to do if the baby cannot inflate their lungs properly as their diaphragm is in a state of shock or spasm, and they will tire more easily while feeding. Diaphragm tension can put pressure on the cardiac sphincter, the valve that allows the backflow of milk, contributing to reflux and colic symptoms. The diaphragm also affects the mobility of the lower digestive system, as when it is free to move during breathing, it has a pumping, massaging effect on the abdomen, which helps to pass a bowel motion.

So you can see the importance of the first breath. It lays the foundation for effective breathing in a baby's early days, which aids the basic habits of a newborn in sleeping, feeding and defecating.

Written by Charlotte Dumper

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