

Helping Mothers Understand

Dysphoric

Milk Ejection Reflex



What is Dysphoric Milk Ejection Reflex?

D-MER is an occurrence that takes place just prior to a mother's milk letting down. About 60 seconds before the mother's letdown, she experiences a myriad of emotional symptoms. This happens when pumping, when nursing, or when experiencing a spontaneous letdown (milk releasing when not nursing/pumping.) Many different words are used to explain the feelings that take place with D-MER. Some of the most common are: Hollow feelings in the stomach * Anxiety * Sadness * Dread * Introspectiveness * Nervousness * Anxiousness * Emotional upset * Angst * Irritability * Hopelessness * Something in the pit of the stomach * General negative emotions

What causes D-MER?

Research has shown us that it is *physiological* not psychological - meaning that it is not past experiences or repressed memories that are causing it. We know that D-MER is caused by inappropriate dopamine activity when the milk ejection reflex is activated. Investigation is still underway to pinpoint the more specific mechanism.

Curing and Treating

Mothers with severe D-MER are encouraged to work with their practitioners in order to find a medication that increases dopamine levels that is right for them. Mothers with more moderate or mild D-MER can work with their lactation consultant regarding natural treatments and lifestyle changes. You can learn more by visiting www.D-MER.org. You will also find information there that you can take to your health care provider.

How Long and How Bad

Some mothers have very mild D-MER, often describing it simply as a "sigh" or a "pang." On the other end of the intensity, there are some mothers who feel extremely intense emotions resulting in suicidal thoughts, thoughts of self-harm or angry feelings. Of course a mother's D-MER will be harder for her to handle if she also has PPD or an anxiety disorder as well. Most mothers notice it within the first few weeks of breastfeeding and for some it will be gone by the time the baby is three months old. For others it continues until weaning, regardless of the child's age. Some mothers find that D-MER gets less severe and slowly dissipates as the baby gets older until they suddenly realize they don't feel it anymore. There seem to be no "norms" when it comes to this, other than that the older the baby gets (3, 6, 9 months and on) the easier it seems to be to manage it.

Visit
www.D-MER.org
for more
information

Good Mothers Giving Good Milk

Mothers can't cause D-MER - it's a hormonal problem. Even though it "feels" like it's in your head, it's not - it's hormonal. You did nothing to cause it. It's not because of a history of depression, or a history of sexual abuse, or because of your birth experience. It's not because you don't love your baby enough or because you're a bad mother. The feelings are not reality; they are hormones that are tricking you. It is simply the hormones sending mixed messages to your brain.

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Weaning

No one should ever have to wean their baby if they are not ready, but D-MER makes mothers feel so uncomfortable when breastfeeding, that some decide to wean. Maybe knowing that's it's just a hormonal problem will help you understand the feelings better. Talking to others and understanding that you are not alone can help a lot. Remembering that just because you don't experience the "warm fuzzies" associated with breastfeeding doesn't make you weird; D-MER is a hormonal "malfunction." It can also get better with time so many mothers look for ways to cope while they hope for improvement. If you decide to wean, find people who understand and support you; there is no need to replace the feelings of D-MER with the guilt you may place on yourself for weaning when you weren't ready.

Out of Control

If during D-MER you feel uncontrollable emotions, a desire to hurt yourself or your baby, or uncontrollable anger, talk to someone and get help. The feelings are brief, but they are intense and can feel very real and scary. There are solutions; you shouldn't have to feel this way when breastfeeding and you shouldn't have to wean because of it if you aren't ready, but your safety and your baby's safety are most important. Take a D-MER handout to a medical professional, someone who wants you to continue to breastfeed your baby, who will help you find a way to control your D-MER.

Nausea, Itching, Depression and Thirst

- The isolated nausea that some women get with letdown is not D-MER. That is just one physical symptom. You can feel nauseous with D-MER but if it's just nausea-it's not D-MER.
- Itching with milk release is a separate physical symptom. D-MER can go along with it, but D-MER always has an emotional affect as well.
- D-MER is not postpartum depression. It is a separate problem, an emotional overload that is fleeting, that sweeps over you like a wave, before milk release. You can have PPD and D-MER, but it's the negative emotional wave at letdown that sets D-MER apart.
- There is a common phenomenon of breastfeeding mothers getting an extreme thirst with milk release (commonly called "letdown thirst"). That is just thirst by itself, nothing more. Many D-MER mothers experience this same thirst, but not all, showing that the thirst is most likely a separate component.

Education

Few professionals are aware of this problem. There has been too little known about it and not enough mothers coming forward to speak about the emotions they experience while breastfeeding. Too often mothers have been embarrassed, thought they were the only ones and been dismissed when they have spoken of it. Women and professionals need to work together to become better educated about D-MER.