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SUCCESSFUL ADULT NURSING

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If you are a couple new to adult nursing or a nursing couple looking for useful tricks then this discussion was written for you. It contains information about adult nursing in general and specific tricks that allow you, as a nursing couple, to be more successful with less stress. As I write this my wife and I have been nursing for about five years. During that time we have made a ton of mistakes and have paid for them with both physical and emotional stress. This could have been avoided had we known the information presented here first. I suggest you read this discussion twice, first to get an overview, then again more slowly to absorb most of the information.

Why nurse? Adult nursing is incredibly intimate and loving, much more so than sex. It is hard to describe but there is simply no comparison to the deep, primal emotions generated within a nursing relationship. We have become emotionally and physically closer to each other than we ever imagined possible. If you become a nursing couple your nursing relationship will impact every aspect of your lives, from where and how much you work to how you schedule errands, vacations, and visits with family. Almost every decision you make will be judged by how it will affect your life together as a nursing couple.

Adult nursing is extremely intimate and loving but it also creates needs and obligations for each of you that are very real and serious. Physical discomfort and embarrassment may result if your obligations to each other are denied. Entering a nursing relationship together will create a high level of physical and emotional dependency between you that many people would be uncomfortable with and, therefore, must not be taken lightly! Once you reach a certain response level, postponing your obligations to each other for a day or two is NOT an option! Adult nursing is not for everyone. It means adjusting your daily lives to put your relationship with each other first, above all other relationships and obligations, and this is not an easy task in our fast-paced and complex society. It means physically offering yourselves to each other daily, within an intimate setting, with built in reprimands if you don't! It means providing for each others' day to day physical and emotional comfort in a very real and tangible way.

In some ways adult nursing sounds pretty horrible, doesn't it? It really is not because the positive benefits of nursing together far outweigh the negative aspects, and the negatives are easy to avoid if you know how. One day you will realize that you would prefer to spend time together, alone with each other, rather than do almost anything else. Adult nursing is a lot like riding a bike. When you first try you fall, then one day you get your balance and you hardly ever fall again. Just remember a few simple tricks and together the two of you will become a successful nursing couple.

How do you, as a nursing couple, measure your success? If you read some of the posts on this site and others you might get the idea that success is ONLY achieved if a measurable quantity of milk is produced. To this end some people are using drugs and pumps and working overtime to reach their goal. This is fine if that is what you wish to do, but why work that hard if it is not necessary to be successful? It all depends on how you measure your success.

Remember, it is about commitment and intimacy, not about milk. If you are a nursing couple and you measure your success in intimacy and loving commitment to each other, then you can be successful without producing a single drop of milk. You can be committed to each other, have a closer & more intimate relationship with each other, and have a physical NEED for each other by nursing up to a state of partial lactation, rather than full lactation. This will give you most of the positive effects of nursing together without some of the negatives.

When my wife and I started nursing she was very concerned that she might leak. She is a business woman and didn't want the possibility of embarrassment. I also work a lot of hours more than 30 miles from home, so nursing 3 or 4 times a day was not an option. Our social schedule varies too, and there are times when nursing twice a day is not practical for more than a few days. We decided that pumping was also not an option because we are doing this for us, not for a pump! So with these realities in place what did we do? Our schedule dictated nursing only once or twice a day, depending on our activities. We made a lot of mistakes, but we learned a lot by trial and error.

We have found that it is relatively easy to reach a level of partial lactation and maintain that state. The primary requirement is REGULARITY over time. Together, you must pick a regular schedule you can stick to and stick to it like glue. Do not vary this schedule more than 10% and you will be pleasantly surprised with the results. Gauge her state of lactation by being aware of her physical responses. Here are 10 lactation indicators in roughly the order they will occur.

1. Her breasts "feel" softer after a nursing session.
2. He "feels" her fluid on his tongue while nursing.
3. Her bra cup increases one size (buy new bras).
4. She becomes uncomfortable if a nursing session is skipped.
5. He swallows her fluid occasionally while nursing.
6. Her bra cup increases one size (new bras again).
7. He swallows her fluid regularly while nursing.
8. She will leak if a nursing session is skipped.
9. Her bra cup increases one size (more new bras).
10. She can hand express and spray milk.

Each of these items is a measure, or level, of her lactation response. Item 4 is a major milestone that demands a higher level of commitment from each of you. If she becomes physically uncomfortable if a nursing session is skipped, then he must be more readily available to her, and she to him, to maintain her comfort. At this time she will be unable to express milk on her own so she cannot relieve herself even if she tries. This, by itself, means that partial lactation is in some ways more demanding than full lactation. Item 8 is another milestone because it adds the possibility of embarrassment and inconvenience to your relationship and you must be even more committed to each other to keep your private life private.

If her response level reaches item 10, then she is fully lactated and now has the option of expressing or pumping occasionally instead of nursing if she chooses. This will give you more flexibility and perhaps allow adding sessions to your schedule that you couldn't support at lower levels because you could not be together every time she would need relief. Be careful! Skipping a session now will mean completely soaked clothing and could also contribute to very painful engorgement!

We now nurse once a day on a limited schedule so how are we doing? We are currently at level 6 but we were at level 4 for a long time. Level 4 is a good place to be. It gives you all of the closeness of nursing together along with a physical need to be together. We could stay at level 4 forever and be happy together but recently we learned the tricks necessary to move up without working too hard. These tricks are simple and they work well, but you have to understand why they work for them to be useful.

Trick 1. Pick a schedule you can stick to and stick to it like glue! This is the single most important step to success on a limited schedule. Do not vary from this schedule more than 10%! If you nurse once a day that means 24 +/- 2.4 hours. So, if you finish nursing at 7:00 am then you must nurse again between the hours of 4:40 am and 9:20 am the next day. If you nurse twice a day that means 12 +/- 1.2 hours. So, if you finish nursing at 7:00 am then you must nurse again between the hours of 5:50 PM and 8:10 PM that night. You also must nurse 9 or 10 out of every 10 scheduled nursing sessions. If the schedule you are on cannot be maintained in this manner for at least 30 days then pick a new schedule and stick to it!

Trick 2. Do nurse outside of the schedule if necessary for her comfort! She must be as comfortable as possible so if you miss a scheduled session and she becomes uncomfortable then nurse outside of the schedule as necessary for her comfort if you can. If you cannot she will probably bounce, meaning she will become engorged to the point where she will be too uncomfortable to be nursed for a few days until her breasts "turn off". Her response will drop at least 2 levels and it might be a week or more before she can be nursed again. Bouncing is very discouraging and stressful for both of you.

Trick 3. Do NOT nurse outside of the schedule UNLESS it is necessary for her comfort! This is by far the hardest thing to do. The two of you lead busy lives and have established a schedule you can stick to. Suddenly you have a day or two alone together and add one or more sessions outside of the schedule. When you resume your regular schedule she becomes engorged and bounces because you cannot be together the additional time now that she needs it. This is one of the hard realities of adult nursing and it has happened to us many times. We have just recently identified the cause of this problem and are still learning about it. If she is partially lactating then she can accommodate increased nursing frequency easily, but decreased frequency is especially difficult because she cannot relieve herself. If you must decrease the nursing frequency then you must be together for a few days.

Trick 4. Nurse in sets. Nurse for about 5 minutes on each breast, then rest 5 or 10 minutes for each set. Do 1, 2, or 3 sets in 30 to 60 minutes, then stop until the next scheduled session. A fourth set is usually not productive unless she is very engorged. It is not necessary to do the same number of sets every session, but try to "empty" the breast every time, judging by the softness after nursing. We usually do 2 sets every day during the week and 3 on the weekends. Always snuggle for 5 or 10 minutes afterward, it is about intimacy, not milk.

>Trick 5. Suckle gently. Sucking hard collapses the milk ducts near the front of the breast. This can happen anytime you are trying to draw out faster than the breast will release. The idea is to stimulate the breast to "let go" of the milk it is holding, not to suck it out through a straw. Time any suction with the opening of your jaw so that the nipple is pulled open around its circumference instead of out, away from the breast. Use only enough suction to hold the nipple and areola in your mouth, and learn how to massage her nipple with your lips and tongue to create a rhythmical open/close motion that will stimulate the breast to release milk into your mouth, rather than trying to suck it out through the nipple.

Trick 6. Modify set time if she is engorged. If her breast is stubborn about releasing any milk, then nurse the breast for a total of 3 to 5 minutes if no milk flows, then stop. If a stubborn breast begins to release milk, then keep nursing this breast until it JUST stops, then stop. If a breast that is giving milk suddenly stops while nursing, then stop also. Once you have stopped for any of these reasons, wait for the next set and try again. If the breast is still stubborn after the second set, then increase the rest time on the third and fourth sets. This technique gives the breast time to respond and dilate milk ducts that may be plugged or collapsed. This also helps to release milk from deeper inside the breast. Don't be surprised if you feel a mouth full of solids (and maybe a bit of nipple pain) when the breast decides to release. If no milk at all is released by the third set, stop until the next scheduled nursing session unless she asks to be nursed.

Trick 7. Don't get discouraged if she seems to dry up for 3 to 5 days each month near her period. Her body is holding onto fluid in preparation for menses and our experience is her breasts do not seem to be engorged or otherwise in distress. This can be stressful if he feels he is not relieving her properly. Nurse her one or two sets each session following the rules in trick 6. Do not skip sessions because you want her breasts to "know" when it is time to nurse.

I hope you now have a better understanding of how to be successful as a nursing couple on a limited schedule. You might be asking how far you can go if you limit your schedule to only once or twice a day? We are currently nursing every morning once a day and have been following the +/- 10% rule faithfully for about 4 months. Since then we have stopped bouncing between level 3 and 5 and are now at level 6 and holding steady. We are both much more comfortable without all that bouncing! Last summer we were able to nurse twice a day on schedule for about two weeks. We nursed one or two sets in the morning and three every night and on the weekends for that time. We went to level 7 briefly before we went on vacation with family and had to alter the schedule, when we did she bounced. We have not

gotten to level 7 again but we are confident we can reach any level we want. We are not in a hurry because we have the rest of our lives together to get there. I hope this discussion helps you both.

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