Nipple confusion: Toward a formal definition

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The purposes of this article are to introduce a formal definition of nipple confusion and to propose various hypotheses concerning its cause. The term nipple confusion refers to an infant's difficulty in achieving the correct oral configuration, latching technique, and suckling pattern necessary for successful breast-feeding after bottle feeding or other exposure to an artificial nipple. Many early breast-feeding failures are attributed to nipple confusion, although scientific data are lacking to document its prevalence, the mechanisms involved, or various factors that predispose an infant to this phenomenon. Two classifications of nipple confusion are recommended to distinguish the impact of artificial nipples during the newborn period from their influence after breast-feeding is well established. Maternal and infant risk factors making an infant more susceptible to nipple confusion are discussed. Future studies are planned to help elucidate the nature of nipple confusion and identify the circumstances under which infants are most vulnerable to this phenomenon. Meanwhile, it would seem prudent for clinicians to identify newborns at risk for nipple confusion and to minimize the use of bottle feedings in such babies. Medically indicated supplements in the early days of life could be provided by alternative methods, such as cup, spoon, or dropper feeding, until breast-feeding can be established. (J PEDIATR 1995;126:S125-9)

The Committee on Nutrition of the American Academy of Pediatrics strongly endorses breast-feeding as the optimal source of nutrition for infants during the first 6 months of life.[1] Currently, more than half of mothers in the United States elect to begin breast-feeding their infants, but many women discontinue nursing prematurely.[2] The rapid attrition in breast-feeding during the postnatal period reflects the prevalence of early problems in the establishment of lactation and the frequency with which women encounter difficulties in guiding their infants to nurse effectively. As a result of today's abbreviated postpartum hospital confinements, contemporary mothers receive only minimal support and instruction in proper breast-feeding techniques.

Lactation counselors and lay supporters of breast-feeding attribute many early failures to "nipple confusion"—the interference of artificial nipples with the successful initiation of breast-feeding. A newborn infant who alternates between the maternal nipple and an artificial nipple may have difficulty nursing correctly and may soon show a preference for artificial feeding. This observation has been validated by clinicians who work with breast-feeding mothers. A common scenario includes the infant who nurses well right after delivery, receives bottles in the nursery during the night, then fusses and frets at the breast in the morning and will not latch on to nurse.

The concept of nipple confusion enjoys tremendous popularity and has been widely disseminated in literature aimed at parents. Many of these texts imply that nipple confusion is the inevitable and ominous consequence of offering even a single bottle to a breast-fed infant before breast-feeding is well established, as these excerpts indicate:

> Using a pacifier, nipple shields, or supplemental bottles of water, formula, or juice can cause nipple confusion and interfere with a baby's ability to suck effectively at the breast. Just one bottle is enough to confuse some babies, especially in the early weeks.[3]

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