

Sexuality and Lactation

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Abstract

Masters and Johnson reported twenty years ago that some of their subjects reached plateau level sexual responses while nursing – in some cases even orgasm. Newton and Newton have shown the close relation between lactation and sexual arousal and also showed the role of oxytocin and the relation of this hormone to feelings of pleasure or guilt. The relations between breastfeeding, milk let-down and sexual arousal is well established. The father's reactions to breastfeeding also express themselves in positive and negative ways – from pleasure to jealousy and disgust. Further research on neurohormonal processes, sexuality and emotions in relation to milkproduction and let-down reflex is suggested.

Zusammenfassung

Masters und Johnson berichteten vor 20 Jahren, daß einige der Untersuchungspersonen beim Stillen sexuelle Reaktionen und in einigen Fällen sogar einen Orgasmus hatten. Newton und Newton haben die enge Verbindung zwischen dem Stillvorgang und sexueller Erregung gezeigt, und ebenso die Rolle des Oxytocins dabei und die Beziehung dieses Hormons zu Lust- und Schuldgefühlen. Die Beziehung zwischen Stillen, Milchfluß und sexueller Erregung kann als gesichert gelten. Die Reaktionen des Vaters auf das Stillen können positiv oder negativ sein und von Lustgefühlen zu Neid und Ekel reichen. Die weitere Erforschung der neurohormonalen Prozesse und der sexuellen und gefühlsmäßigen Vorgänge bei der Milchproduktion und beim Stillvorgang wird empfohlen.

The concept of penis envy and castration complex were introduced by Freud, but the corresponding concepts of pregnancy envy and lactation complex have not been given much attention. Recent investigations in Sweden show that every fifth man suffers from some form of illness during the woman's pregnancy – stomachtrouble, increase in weight, toothache, changes in appetite. These symptoms can be called *the couvade syndrome*. Couvade is the custom among some ethnic groups in Africa and Asia, where the father imitates the childbirth during the time of the wife's parturation. He goes to bed surrounded by comforting friends and imitates the delivery activities. In the Swedish investigation it was found that the couvade syndrome disappeared after the wife's delivery. The father's reaction to lactation and breastfeeding can include jealousy of the closeness of wife and baby, of the fact that he cannot have a baby, and that he no longer has the monopoly of the breasts. He can also feel disgust by seeing the dripping breasts.

Lerner writes about a family where the husband resented the wife's breastfeeding. "His sexual interest in her diminished dramatically and he told her that her breasts expelling milk during sexual excitement disgusted him and made him feel that he was sleeping with 'a mother'." Money has noticed that "male-to-female transsexuals are explicit in their envy of breasts and pregnancy."

Masters and Johnson write that 47 of 100 mothers reported a decrease in sexual tension during the postpartum period, while 24 lactating mothers reported highly increased levels of sensuality and sexual tension. On the other hand 6 of these 24 nursing mothers reported guilt feelings about their sexual arousing during breastfeeding. But also a lower level of sexual activities is reported in cases of chronic, painful vasocongestions, nipplesoreness and fatigue, etc. An intense sexual experience while nursing a baby boy may also cause the anxiety due to the "horror of incest" – specially if the baby boy has an erection.

When I in this paper refer to *mothers* it is to be understood that I refer to the woman who actually mothers the child and to whom it becomes attached, which is not necessarily the biological mother.

The relations between lactation and sexual activity includes: 1. Stimulation of the nipples and breasts with subsequent nipple erection. 2. Skin contact. 3. Contractions in uterus and breasts caused by release of oxytocin. Cultural conditions in many parts of the world may also interfere with sexual relations during lactation. A common belief is that abstinence from intercourse not only is an effective contraceptive but also is important for the infant's survival.

When sexual abstinence has become too hard to endure for the husbands some ethnic groups have used polygyny or "substitutes" during the wife's lactation period. The nutritive function of the breasts can thus be confused with the sexual function for both parents and lead to a lowering of the sexual activities.

The post-partum taboo can be a severe deprivation for the mother since suckling generally does not lower the level, but frequently causes an increase in libido. Ford and Beach report extensively on a number of societies. Parents in the Abelam society in Papua are refraining from coitus until the baby can walk. The Alorese in Oceania wait until the child sits up. The Masai are forbidden to have intercourse until the child has cut its teeth. Among the Murias, a Central Indian tribe, the parents are not supposed to have intercourse during the first six

to twelve months of breastfeeding. But if the father before that time observes a smile on the face of the child he can come back and sleep with his wife. Métraux reports about the Abipon, a tribe in Paraguay: After the delivery of the child the suckling period is as long as three years during which time "the mother has no intercourse with her husband who, tired of the long delay, often marries another wife; the women therefore often kill their unborn babies through fear of repudiation". Among the Yorubas in Nigeria there is a belief that coitus poisons the mother's milk. – Margaret Mead observed the Arapesh of New Guinea: "The Arapesh keep the taboo upon intercourse until the child takes its first step, then it is regarded as sufficiently strong to be able to stand the trying contact with its parent's sexuality again. The mother continues to suckle the child until it is three or even four years, if she does not become pregnant again. . . The ideal is for the child to learn to eat more and more solid food, to seek the mother's breast less often for food and more often merely in affection, insecurity or pain until finally only fear and pain will drive it into its mother's arms."

According to Hinshaw many Guatemalan Indians believe that conception during lactation can reduce the supply of milk and affect its quality, thereby reducing the nursing infant's chances for good health and survival. This leads to less frequent or to postponement of coitus during lactation. In one case a wife enforced abstinence one year as she was anxious to keep the child alive because she had lost four of six children.

Commitment to the survival of the nursing child can thus influence frequency of coitus during lactation. There is a fear of not getting enough children in Third world countries, where children's labour and wages are necessary and the only old age insurance for the parents, and where infant mortality is high. This fear can make the parents postpone the resumption of coitus, in order to prolong nursing and thereby increase the survival chances of the newborn.

Information about the relation between lactation and sexuality among the Hindus has been given by Moni Nag who has studied the coital frequency in India. According to Nag fertile rural Bengali Hindu women have a mean intercourse frequency of one to two times a week. Nag also notes the strong desire for a son immediately after marriage, but if children are born too close together it is criticized. It is also a matter of shame for a couple if the wife becomes pregnant after a grandchild has been born. But a grandmother may offer her breasts to the child, even though they are dry. Nursing mothers usually avoid coitus during the first three months post partum. Nag refers to ritual abstention and celibacy or brahmachariya. It is a common Hindu belief that semen, viriya, is a great source of strength for men. By celibacy it becomes rich and viscous, "like cream of unadulterated milk" and is stored in the spine. Every ejaculation is therefore a great loss and jiryan or spermatorrhoea is a dreaded illness. Gandhi tried to uphold the ideal that one should have sex only for the purpose of procreation.

The beauty of the women's breasts is strongly expressed in Indian art and literature. It is, therefore, surprising when Nag writes the "modernization may bring about a change in the concept of female breasts from a symbol of nutritional and emotional nourishment for baby to that of sexual attraction". Let me also

quote Sarvepalli Radhakrishnan who said in his opening speech at 1952 Family Planning Conference in New Delhi: "The poorer we are the more illnourished we are. Sex is the only indoor sport open to us and larger families are produced. It is the poor people that produce large families and not the rich ones".

The success of breastfeeding is closely related to the mother's sexual attitude and experience, the attitude to the maternal role and the culture in which she lives, her childhood experiences of maternal and paternal behaviour, or, to use John Money's terminology, of parentalism. Factors which may contribute to a lowering of interest in sexual relations during lactation are fatigue, vaginal pain and discharge, fear of permanent damage, decreased lubrication, interruption of lovemaking by the baby – crying, changing the napkins, confusion in the maternal and sexual roles and finally – hormonal factors. The secretion of oxytocin and prolactin are brought about by suckling via the sensory nerves of the nipple. Prolactin stimulates the synthesis and secretion of milk while oxytocin stimulates contraction of the myoepithelial cells leading to milk let-down and ejection. The role of prolactin should be dealt with in a separate paper and here I will refer to the work of Niles Newton on the role of oxytocin in coitus, birth and breastfeeding. M. and N. Newton recognized already in 1948 what they called the milk-let-down reflex. Vaginal stimulation is a recognized way of getting a cow to let down her milk. Similar studies in the human female resulted in oxytocin being observed. Milkdrinking during coitus and after orgasm have also been shown related to the presence of oxytocin. N. Newton writes: "In coitus oxytocin appears to be involved in orgasms influencing spermtransport in the male and motility of the fallopian tubes in the female. High levels of oxytocin appear in the later parts of labour. Oxytocin is crucial to the interpersonal act of breastfeeding since it triggers milkejection."

Coitus, labour and breastfeeding are related with oxytocin, but caretaking behaviour is also essential. Birth and breastfeeding trigger caretaking behaviour in the mother. Margaret Mead and Niles Newton notice in regard to coitus that the most usual pattern for males is to care for women with whom they are cohabiting. Also females usually accompany the coital behaviour with care for the man in various ways. Also in studies of mood changes after breastfeeding and coitus in relation to oxytocin it was found that both males and females had a decrease in anxiety and an elevation of mood in form of pleasant feelings. Oxytocin may prove to be one of the key hormones in understanding basic trends in human behaviour.

Masters and Johnson found that nursing women had a greater sexual interest than non-nursing mothers. Nursing women not only found sexual stimulation from sucking but were also keen on resuming intercourse as early as possible. – It has also been found that women who breastfeed are more tolerant in sexual matters such as masturbation, sexplay and erotic imagery and even pornography and prostitution – at least in Scandinavian countries.

Many mothers kiss their babies when sucking is completed. This is a loving, erotic act. According to Eibl-Eibesfeldt the kiss is a ritualised transfer of nourishment which actually is done among some people during the weaning and when the mouth-nipple contact is infrequent. This behaviour can also be observed

among lovers who often transfer sweets, wines, etc. to each other with tongue and lips.

Lactation is a sexual experience and so is birth. Sheila Kitzinger writes: "When the child stops crying, receives caresses, is suckling satisfactorily, relaxes and then sleeps in her arms it gives confirmation to the mother that she can handle the child. It is like a coitus where the feelings are flowing, both parties have orgasm and sleep in the certainty of love." – Kitzinger also mentions the opportunities for the father to lie by the side during breastfeeding – have a bottle if he likes and imitate nursing. Father, mother, child united in close physical – mental – tender embrace.

Alayne Yates writes: "Breastfeeding is a potent gratification for both mother and child. Rhythmic sucking, scent, warmth and closeness combine to produce the optimal erotic congress. Genital pleasure is enmeshed in the total experience. Direct genital stimulation occurs as the mother presses the child's hips against her body. Erections and vaginal lubrication is common. The mother receives pleasure through the repetitive tugging at her nipple. The erotic reciprocity cement her attachment to the baby. Yet few mothers nurse and even fewer permit themselves to savour the experience."

I also like to mention Jean Liedloffs "Continuum Concept": "The sequence of experience which corresponds to the expectations and tendencies of the human species". She refers to the need for continuity of mother-child-relation from the pregnancy through birth, nursing and sexual development. – The International Institute for Prenatal Psychology is also doing research on sexuality and lactation.

Finally I like to quote Vidyapati, a 15th century Bengali poet:

Listen, o lovely darling,

...

Bind me in your arms, hit me with your thighs,

Choke my heart with your milkswollen breasts

Lock me day and night in the prison of your heart.

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