

CUIDADO É FUNDAMENTAL

Escola de Enfermagem Alfredo Pinto – UNIRIO

INTEGRATIVE REVIEW OF LITERATURE

DOI: 10.9789/2175-5361.rpcfo.v16.13316

PROMOTION OF BREASTFEEDING IN ADOPTIVE MOTHERS: A LITERATURE REVIEW

Promoção do aleitamento materno em mães adotivas: uma revisão de literatura

Promoción de la lactancia materna em madres adoptivas: una revisión de la literatura

Isabella Souza Santos¹ 

Claudia Santos² 

Isabella Cristina Alves Pereira³ 

Vivianne Mendes Araújo Silva⁴ 

Liana Viana Ribeiro⁵ 

Lucia Helena Garcia Penna⁵ 

ABSTRACT

Objective: to explore relactation and translactation in adoptive mothers, analyzing their definitions, benefits, challenges, and associated strategies. **Methods:** its consists of an integrative review research. The databases used were BVS, PubMed, Scopus, CINAHL, Web Of Science, Cochrane, and Embase, with the following descriptors: "Breastfeeding", "Women", "Lactation", and "Adoption". **Results:** despite the scarcity of quantitative studies, the effectiveness of relactation in promoting breastfeeding was evidenced, providing an emotional bond between mother and child and requiring professional training. **Conclusion:** lactation induction still presents challenges in its stimulation and professionals need to be prepared to offer adequate assistance to adoptive mothers.

DESCRIPTORS: Breast feeding; Women; Lactation; Adoption.

^{1,2} Universidade Federal do Rio de Janeiro, Rio de Janeiro, Rio de Janeiro, Brazil.

^{3,4} Universidade Federal do Estado do Rio de Janeiro, Rio de Janeiro, Rio de Janeiro, Brazil.

^{5,6} Universidade do Estado do Rio de Janeiro, Rio de Janeiro, Rio de Janeiro, Brazil.

Received: 23/02/2024; Accepted: 26/03/2024; Published online: 17/10/2024

CORRESPONDING AUTHOR: Vivianne Mendes Araújo Silva viviannenfe@gmail.com

How cited: Santos IS, Pereira ICA, Silva VMA, Ribeiro LV, Penna LGH. Promoção do aleitamento materno em mães adotivas: uma revisão de literatura, período de 2014 a 2021. R Pesq Cuid Fundam [Internet]. 2023 [acesso ano mês dia];16:e13116 Disponível em:

<https://doi.org/10.9789/2175-5361.rpcfo.v16.13316>



RESUMO

Objetivo: explorar a relactação e translactação em mães adotivas, analisando suas definições, benefícios, desafios e estratégias associadas.

Métodos: consiste em uma pesquisa de revisão integrativa. As bases de dados utilizadas foram BVS, PubMed, Scopus, CINAHL, Web Of Science, Cochrane e Embase, com os seguintes descritores: "Aleitamento materno", "Mulheres", "Lactação" e "Adoção". **Resultados:** apesar da escassez de estudos quantitativos, evidenciou-se a eficácia da relactação na promoção da amamentação, proporcionando vínculo afetivo entre a mãe e o filho e que precisa da capacitação dos profissionais. **Conclusão:** a indução da lactação ainda apresenta desafios na sua estimulação e os profissionais precisam estar preparados para oferecer uma assistência adequada para as mães adotivas.

DESCRIPTORIOS: Aleitamento materno; Mulheres; Lactação; Adoção.

RESUMEN

Objetivos: explorar la relactación y translactación en madres adoptivas, analizando sus definiciones, beneficios, desafíos y estrategias asociadas.

Métodos: consiste en una investigación de revisión integrativa. Las bases de datos utilizadas fueron BVS, PubMed, Scopus, CINAHL, Web Of Science, Cochrane y Embase, con los siguientes descriptores: "Lactancia materna", "Mujeres", "Lactancia" y "Adopción". **Resultados:** a pesar de la escasez de estudios cuantitativos, se evidenció la eficacia de la relactación en la promoción de la lactancia materna, proporcionando un vínculo emocional entre madre e hijo y requiriendo capacitación profesional. **Conclusión:** la inducción de la lactancia todavía presenta desafíos en su estimulación y los profesionales necesitan estar preparados para ofrecer una asistencia adecuada a las madres adoptivas.

DESCRIPTORIOS: Lactancia materna; Mujeres; Lactancia; Adopción.

INTRODUCTION

Breast milk is considered to be the ideal food for children, as it contains nutrients and benefits that promote infant health and also reduce neonatal mortality, as well as providing health benefits for breastfeeding women, such as protection against breast and ovarian cancer, type 2 diabetes mellitus, hypertension and cardiovascular disease, among others.¹⁻² The World Health Organization (WHO) and the Ministry of Health (MoH) recommend exclusive breastfeeding for the first six months of a child's life and complementary breastfeeding for up to two years or more.²⁻³

Through breastfeeding, children get what they need for their growth and development, without the need for other food. Another positive aspect of breastfeeding is the bond formed between mother and baby, which generates psychological benefits for both.⁴

Although breastfeeding offers numerous benefits for the baby, various situations can arise, leading to challenges that affect the continuity of this act, which is so fundamental to the health of the child and the mother. The implementation of strategies such as translactation and relactation has emerged as an effective alternative to stimulate, initiate or even restart the practice of breastfeeding in specific situations, such as women going through the adoption process and trans women who wish to breastfeed.

These practices, although less discussed, emerge as relevant strategies for overcoming obstacles that may arise in the course of breastfeeding. By analyzing the definitions, benefits, challenges and strategies associated with these processes, we seek to understand how they can contribute to promoting maternal and child health.⁵

In both methods, gavage feeding is used via a gastric tube connected to a syringe without a plunger, a cup or a bottle

suitable for these methods. The end of the tube is attached to the mother's breast, close to the nipple, while the other end is inserted into a container containing milk below the level of the breasts. In this way, the baby grasps the breast close to the tube, sucking in both the breast milk and the milk in the syringe.

The distinction between the techniques lies in the fact that, in relactation, the milk in the container is pasteurized or artificial human milk, while in translactation, milk milked from the mother herself is used. This method eliminates the need for bottles, preventing nipple confusion, while promoting, protecting and supporting breastfeeding.⁶

In this context, this study aims to explore relactation and translactation in adoptive mothers, analyzing their definitions, benefits, challenges and associated strategies. By understanding the importance of these practices, we seek not only to expand academic knowledge, but also to contribute to the dissemination of valuable information that benefits health professionals, mothers and families, promoting a comprehensive and informed view of breastfeeding.

METHODOLOGY

This study deals with an integrative review, a research method used in nursing and other fields of the health sciences. The integrative review is recognized as a fundamental approach to evidence-based practice, allowing for the clear and coherent synthesis of results on a given theme. It comprises a systematic process of searching for, selecting and analyzing relevant studies found in the scientific literature. Its aim is to integrate and summarize the results of different studies, providing a comprehensive and up-to-date perspective on a given subject.⁷

Therefore, the integrative review is a valuable tool for nursing professionals, especially in the field of Evidence-Based Practice (EBP), which combines the professional's knowledge and skills with reliable scientific data, expanding therapeutic options and offering patients safer care.⁷

This study was guided by the following question: "*How can relactation and translactation help to promote breastfeeding in adoptive mothers?*", developed using the PICo mnemonic,⁷ which took into account: Population: puerperal women, Interest: breastfeeding and Context: difficulty in breastfeeding.

The searches were carried out by consulting the Virtual Health Library (VHL), PubMed, Scopus, CINAHL, Web Of Science and Cochrane databases using descriptors from the Health Sciences Descriptors (DeCs) database, which were:

"Breastfeeding", "Women", "Lactation" and "Adoption", combined with the boolean "AND".

It was necessary to carry out new searches because there were no articles to analyze in two databases. This search took place in the following databases: Web Of Science, Embase, CINAHL and Cochrane, with the descriptors combined in trio: "Lactation", "Women", and "Adoption" and "Breastfeeding", "Lactation", and "Adoption".

The studies were chosen based on the following inclusion criteria: original articles available in full in the language of publication in Portuguese and English and in the publication period between 2018 and 2023. For exclusion purposes: incomplete articles, duplicate articles, outside the established timeframe and outside the subject matter covered.

Chart 1 – Search with 4 descriptors: "Aleitamento materno", "Mulheres", "Lactação" and "Adoção", Rio de Janeiro, RJ, Brazil, 2024.

	BVS	PubMed	Scopus	CINAHL	Web of Science	Cochrane
Artigos identificados	9	119	203	3	10	1
Artigos Removidos	5	113	200	3	10	1
Artigos Selecionados	4	6	3	0	0	0
Artigos excluídos após a leitura do resumo	2	4	1	0	0	0
Artigos incluídos na pesquisa	2	2	2	0	0	0

Chart 2 – Search using the trio of descriptors: "Lactation", "Women", "Adoption" and "Breastfeeding", "Lactation", "Adoption", Rio de Janeiro, RJ, Brazil, 2024.

	BVS	PubMed	Scopus
Artigos identificados	39	134	4
Artigos Removidos	38	133	4
Artigos Selecionados	1	1	0
Artigos excluídos após a leitura do resumo	0	0	0
Artigos incluídos na pesquisa	1	1	0

RESULTS

After searching the databases, 522 articles were found. After applying the inclusion criteria of time, language, incompleteness and theme, 507 articles were excluded, leaving 15

articles, which were read from the abstracts, excluding 7 articles.

The articles were read in their entirety, and the sample for this study consisted of 8 articles. The analysis was based on the title, objectives, methodology, levels of evidence and results.

Chart 3 – Studies selected for the integrative review, Rio de Janeiro, RJ, Brazil, 2024.

ID	TITLE	OBJECTIVES	METHODOLOGY	LEVEL OF EVIDENCE	RESULTS
A1	Discurso de mulheres e de profissionais de saúde sobre amamentação adotiva	To analyze the discourses of women who wish to adopt a child and of professionals from a milk bank in northeastern Brazil about the breastfeeding process.	Quantitative	2	There is a gap on the subject of relactation. This process requires motivation from the mother.
A2	Induction of Lactation After Adoption in a Muslim Mother With History of Breast Cancer: A Case Study	Demonstrate the case of a Muslim woman with a history of breast cancer who wants to breastfeed her adopted son	Qualitative	4	Using a breast pump and the medication Domperidone, she was able to breastfeed her adopted son
A3	The Intricacies of Induced Lactation for Same-Sex Mothers of an Adopted Child	Induction of lactation in two of the three mothers of a child, the third being a biological mother who also breastfed the child	Qualitative	4	Use of hormone therapy, domperidone, supplements and stimulation, where the two adoptive mothers managed to induce lactation
A4	Case Report: Induced Lactation in a Transgender Woman	To investigate the basic knowledge of breastfeeding induction in the trans population and to estimate the demand for a breastfeeding induction protocol for trans women	Qualitative	5	Breastfeeding through a trans woman had no negative repercussions on the baby's growth and development
A5	Understanding the Challenges of Induction of Lactation and Relactation for Non-Gestating Spanish Mothers	Describe and interpret the challenges faced by mothers who undergo induced breastfeeding and baby relactation	Qualitative	4	According to the women, it pays to go through the process of induction and relactation in order to be able to breastfeed their children, but it has repercussions for the family and work due to a lack of support and also from some professionals

A6	Factors affecting successful induced lactation process among Malaysian women: a qualitative study	Factors affecting the success of adoptive breastfeeding among women who have already undergone an induced lactation process	Qualitative	4	Importance of emotional, psychological and practical support for successful induced lactation
A7	Methods and Success Factors of Induced Lactation: A Scoping Review	To evaluate the different methods used to induce lactation, as well as the factors related to effective breast sucking and human milk production	Qualitative	4	More research is needed to better understand the methods of inducing lactation, the side effects of galactogogues and the factors associated with a successful outcome of induced lactation
A8	Characteristics of breastfeeding by adoptive mothers: Description of the phenomenon in Poland and worldwide	To gather information on breastfeeding of adopted children in Poland and other high-income countries and identify its determinants	Qualitative	4	It is still an uncommon practice in some parts of the world, but with the collaboration of professionals, mothers and babies can experience the benefits of induced breastfeeding

According to the analysis of the results presented by the selected articles regarding the promotion of breastfeeding through relactation in adoptive mothers, there were categories that were divided according to the following themes: analysis of the levels of study, technical aspects and personal aspects.

ANALYSIS OF STUDY LEVELS

Induced lactation is not a recent discovery and studies have shown that there are few studies on the subject.⁹ There is also a shortage of quantitative studies and other levels of evidence.

Finding the topic of breastfeeding in adopted children in the literature is a challenge. This topic began to be addressed in the 1970s and to this day is limited to technical issues, there are no studies on public perception, because the mother who decides to breastfeed her adopted child is seen with many judgments, as if they wanted to prove their true motherhood and even seen as something perverse and/or sexual abuse. This prejudice is due to the sexualization of the breasts, which should be seen as their biological function, which is to promote breastfeeding, and not as a form of sexual satisfaction.¹⁰

TECHNICAL ASPECTS

One approach that is used in the practice of adoptive lactation is equivalent to the technique known as relactation, which starts the process of breastfeeding in a woman who is not pregnant or who has not breastfed for several years.¹¹ This technique involves the use of a probe, the end of which is

positioned on the nipple, while the other end is connected to a container containing breast milk.⁹ Relactation is an effective technique for promoting breastfeeding and is recommended in situations involving difficulties for both mother and baby, such as rejection of a breast, prematurity, difficulties in sucking all the milk needed due to a health condition, delayed milk letdown, when one breast is smaller than the other and when an adoptive mother wishes to breastfeed.¹²

The relactation technique can also be called "adoptive lactation", "lactation induction" or "translactation", when there is a transition from tube feeding to breastfeeding. The technique used is the same and consists of using a device attached to the breast which is connected and/or immersed in a container of breast milk or other milk. As the baby sucks, the liquid is released at the same time as the sucking stimulates the pituitary gland to release hormones such as prolactin and oxytocin.¹²

The practice of induced breastfeeding in adoptive mothers has several benefits, such as favoring the establishment of an affective bond between mother and child, as shown in studies A1, A2, A3, A4, A5, A6^{9, 11, 13-16} reducing the occurrence of breast cancer; as shown in studies A2 and A4.^{11, 14} Study A5 showed that all the participants said that it was worth performing induced relactation in order to be able to breastfeed their child.

Continuous support for the mother should be encouraged, as this affects the outcome of the induction, especially for women with a history of breast cancer, as they are insecure due to their health history, but the A2 study¹¹ showed that this woman was able to produce milk.

This stimulation can occur through pharmacological and non-pharmacological methods. The pharmacological methods are hormone therapy and the use of galactogogues, such as domperidone and metoclopramide. The non-pharmacological methods are: manual stimulation of the breasts, use of a breast pump and sucking the baby to the breast.¹⁷

In the A2 study,¹¹ the woman used a breast pump, domperidone, which is a dopamine antagonist that increases prolactin secretion, fenugreek, which is an herb, and *Trigonella foenumgraecum*, which is also an herb. In the second week after starting the protocol with these aforementioned methods, the woman was already producing a milk-like secretion and with skin-to-skin contact, production was favored due to the release of oxytocin.

In study A3,¹³ the couple used hormone therapy, Domperidone, herbal supplements and breast stimulation. Woman A did not use Domperidone and woman B did. On the 5th day of extraction, woman B began to secrete drops of milk and woman A did not. Both mothers managed to breastfeed for 4 months.

In study A4,¹⁴ the transgender woman used hormone therapy, galactogogues and a breast pump. Three months after starting treatment and two weeks before the expected date of birth, the woman was already producing approximately 236 ml per day. She breastfed exclusively for 6 weeks. The pediatrician reported that the child's growth and development were adequate.

In study A5,¹⁵ it was shown that women who breastfed for the first time had more difficulties compared to those who had breastfed before. The types of breastfeeding did not negatively affect the participants, the benefit of the relationship between mother and child is more relevant than the amount of milk produced, as breastfeeding strengthens the relationship with the child and this relationship weakened after breastfeeding ceased, due to the return to work.

Study A6,¹⁶ shows that the mother's diet directly affects the quality of breast milk. The use of galactogogues is considered one of the options for improving milk supply. The use of breast pumps is also an effective technique for stimulating lactation.

In study A7,¹⁷ women produced enough milk to breastfeed their adopted children. All the women had breastfed before and stimulation took place by sucking the child 10 times a day for 10 minutes, which was successful after 13 days, and after 21 days breastfeeding was exclusive in all cases. The adopted children ranged in age from 8 months to 5 years and all sought the breast. In 60% of cases, breastfeeding was achieved with breast stimulation alone. This study also describes the side effects of using galactogogues, such as gastric problems, drowsiness, tremors, lethargy, hypoglycemia, dyspnea, bradykinesia, sweating, a strong odor in the urine and even depression

PERSONAL ASPECTS

The support of professionals contributes significantly to pointing out the difficulties faced by the mother and it is crucial that there is continuous support during this process so that the mother reaches her goal.⁹

However, some professionals note that there are no training courses to prepare the team for this subject, which is different from the standard childbirth and breastfeeding. It is necessary to disseminate this knowledge in order to ensure that professionals are trained to offer adequate support for the management of adoptive breastfeeding.⁹

In the A2 study,¹¹ the woman had support from her husband and the IBCLC. This directly affects the mother's motivation to continue lactation induction.

In the A5 study,¹⁵ the woman reported that this process not only affected her family relationships, but also her work environment, as she sometimes had to take time off to use the breast pump. In the same study, she reported that the information provided by health professionals was inappropriate, with many prejudiced statements. Induced relactation needs to be studied by professionals, since support increases willpower and generates a feeling of security, helping with the challenges encountered during this process.

In study A6,¹⁶ the women reported support from their husbands, but that there is a prejudice that women who have never been pregnant can breastfeed. The support and encouragement of spouses and family members is the main factor in successful breastfeeding. And this study shows that women need to be informed in order to be successful at breastfeeding. Consultation with a specialist is essential in order to provide this mother with knowledge of techniques, preparations and the necessary support.

In study A7,¹⁷ adoptive breastfeeding in Poland and other regions of the world is not common. However, the assistance of a midwife and/or lactation consultant can make it easier for adoptive mothers and children to experience natural breastfeeding.

With new same-sex family structures, the rate of adoption by same-sex couples is on the rise. In the United States, for example, the number of same-sex adoptions has doubled.¹¹ It is crucial to take a closer look because the adoption process generates anxiety due to practices or policies that decriminalize these women.

The difference between inducing lactation in cis and trans women is the need for androgen blockade.¹⁴

DISCUSSION

The studies analyzed highlight the effectiveness of the various techniques used through hormone therapy, galactogogues, relactation, breast pumps, manual breast stimulation and sucking the baby to the breast. These are both pharmacological and non-pharmacological methods. One technique is called "protocol" and is based on the administration of galactogogues, such as metoclopramide and domperidone, which are commonly used as anti-emetic medications. There is a preference for the use of domperidone over metoclopramide due to extrapyramidal reactions, since domperidone is less permeable to the blood-brain barrier.¹⁸⁻¹⁹

However, there is disagreement on the use of these galactogogues, due to the lack of evidence guaranteeing their efficacy, as

well as concerns about possible side effects for the newborn.¹⁹ The use of non-pharmacological measures is recommended as risk-free alternatives. Breast stimulation is essential for inducing and maintaining lactation. Mechanical stimulation can be associated with relactation, as it combines two non-pharmacological techniques. There is also disagreement between authors about the definitions of relactation and translactation.

By disseminating this technique, a greater number of adoptive mothers, whether cis or trans, and same-sex couples will have the opportunity to breastfeed their children. This will not only benefit the child with its healthy growth and development, but will also strengthen the bond between mother and baby.²⁰

Because we live in a sexist society where women are always judged for their choices and decisions regarding their own bodies. And the fact that women are homosexual and still decide to breastfeed is viewed with a lot of judgment, where mothers feel uncomfortable breastfeeding their children in public places.²⁰ It should be noted that homophobia is a crime, set out in Law No. 10,948 of November 5, 2001.

The support of professionals is fundamental, especially the role of nurses in promoting breastfeeding among adoptive mothers, in order to ensure safe and healthy care. Nurses are properly trained and play a key role in providing education about breastfeeding and recognizing its challenges.²⁰⁻²¹ With the right care, most women are able to achieve successful adoptive breastfeeding.¹⁹

Considering the nurse's role, this assistance should be based on the model of nursing theorist Callista Roy, where the person is a holistic and adaptive system, in which the input, through stimuli, activates regulatory and cognitive mechanisms with the aim of maintaining adaptation; and the outputs of people, as systems, are their responses, that is, their behaviors, which in turn become feedback for the person and the environment, being categorized as adaptive responses.²²

Therefore, induced breastfeeding in adoptive mothers is an example of the human body's ability to respond and adapt to biological and emotional stimuli that generate responses that have a direct impact on the promotion of breastfeeding.

When analyzing the levels of study, there is a lack of studies on induced lactation, especially in the context of adoption. More studies are therefore needed.

CONCLUSION

Induced lactation still presents significant obstacles, such as a lack of information from professionals, a lack of support from family members and the use of medications for hormonal stimulation and physical stimulation, which require a lot of effort.

Relactation is one of the ways to promote and stimulate breastfeeding in adoptive mothers, but there is a disagreement in the interpretation of the term relactation, where in some contexts it is associated exclusively with the use of a probe next to the breast, while in other contexts it is associated with a more comprehensive technique, which includes various strategies to initiate breastfeeding in women who have never been pregnant

and/or breastfed. Therefore, future research should make the meaning of relactation explicit in their studies.

There are few studies on how to help mothers induce lactation, where they often end up resorting to the internet and having access to unreliable information. More studies with a quantitative approach and better levels of evidence are needed, as case studies end up not generating enough evidence, studies on the side effects of using galactogogues and studies published by nurses.

Induction is a practice that is still little used and its success is not impossible, but it needs to be improved. And with the increase in same-sex partners and transgender women starting a family, professionals need to be able to provide adequate and safe guidance and assistance to the mother and her child. The absence of this support from professionals directly affects the success of lactation induction.

Furthermore, it is essential to highlight the importance of prejudices imposed by society, where there should be an inclusive environment for adoptive mothers so that they feel free to breastfeed their children in any environment, free from judgment and discrimination, regardless of their sexual orientation.

This study is just one step towards a broader understanding of maternal and child health, and I hope it will inspire future research and initiatives in this area for more qualified care.

REFERENCES

1. Ministério da Saúde (Br). Secretaria de Atenção à Saúde. Departamento de Atenção Básica. Saúde da criança, aleitamento materno e alimentação complementar. Brasília (DF): Ministério da Saúde; 2015 [cited 2022 Mar 30]. Available from: https://bvsms.saude.gov.br/bvs/publicacoes/saude_crianca_aleitamento_materno_cab23.pdf
2. World Health Organization. Global Targets 2025: To Improve Maternal, Infant, and Young Child Nutrition. Geneva, Switzerland. Geneva: WHO; 2017 [cited 2022 Mar 30]. Available from: <https://www.who.int/publications-detail-redirect/WHO-NMH-NHD-14.2>
3. Ministério da Saúde. Secretaria de Atenção Primária à Saúde. Departamento de Promoção da Saúde. Guia alimentar para crianças brasileiras menores de 2 anos. Brasília (DF): Ministério da Saúde; 2019
4. Pérez ER, Tomori C, Hernández CS, Baker P, Barros AJD, Bégin F, et al. Breastfeeding: crucially important, but increasingly challenged in a market-driven world. *Lancet*. 2023; 401:472-85.
5. Karabayir N, Potak EM, Karaman S, Sebirli MF, Istanbulu MB, Potak M, et al. The Finger Feeding Method and Relactation. *Cureus*. 2022;14(4): e24044.

6. BRASIL, Ministério da Saúde. Atenção Humanizada ao Recém-Nascido de Baixo Peso: Método Canguru. Brasília, 2013.
7. Dantas HLL, Costa CRB, Costa LMC, Lúcio IML, Comassetto I. Como elaborar uma revisão integrativa: sistematização do método científico. *Rev Recien*. 2021;12(37):334-345.
8. Souza MT, Silva MD, Carvalho R. Revisão integrativa: o que é e como fazer. *Einstein*. 2010;8(1):102-106.
9. Nunes BR da S, de Melo MCP, Morais SRS de, Matos KKC. Discursos de mulheres e de profissionais de saúde sobre amamentação adotiva. *J. nurs. health*. 2021;8(12): 243-250.
10. Anuszkiewicz NR, Szyber B, Baranowska B. Characteristics of breastfeeding by adoptive mothers: Description of the phenomenon in Poland and worldwide. *Adoption & Fostering*. 2022;46(4):397-412.
11. Al-Mohsen ZA, Frookh Jamal H. Induction of Lactation After Adoption in a Muslim Mother With History of Breast Cancer: A Case Study. *J Hum Lact*. 2020;37(1):194-199.
12. Oliveira TL de, Moraes BA, Salgado LLF. relactação como possibilidade terapêutica na atenção a lactentes com necessidades alimentares especiais. *DEMETRA*. 2014;9:297-309.
13. Wilson E, Perrin MT, Fogleman A, Chetwynd E. The intricacies of induced lactation for same-sex mothers of an adopted child. *J Hum Lact*. 2015;31(1):64-7.
14. Reisman T, Goldstein Z. Case Report: Induced Lactation in a Transgender Woman. *Transgend Health*. 2018;3(1):24-26.
15. Cazorla-Ortiz G, Galbany-Estragués P, Obregón-Gutiérrez N, Goberna-Tricas J. Understanding the Challenges of Induction of Lactation and Relactation for Non-Gestating Spanish Mothers. *J Hum Lact*. 2020;36(3):528-536.
16. Che ARN, Sulaiman Z, Tengku ITA, Aris T. Factors affecting successful induced lactation process among Malaysian women: a qualitative study. *British Food Journal*. 2020;122(10):3049-3063.
17. Ortiz CG, Obregón GN, Garcia RMR, Tricas GJ. Methods and Success Factors of Induced Lactation: A Scoping Review. *J Hum Lact*. 2020;36(4):739-749.
18. Moreira AGCM, Lopes JND, Pereira SCGR, Zangão MOB. *Indução da lactação em mulheres não grávidas*. Atena Editora 2022.
19. Makabe S. *Galactagogos são eficientes? Quando indicar? são eficientes? Quando indicar?* 2018.
20. Fernandes LCR, Sanfelice CF, Carmona EV. *Indução da lactação em mulheres nuligestas: relato de experiência*. Escola Anna Nery. 2022;26:1-7.
21. de Souza BL. *A Importância Da Amamentação E As Contribuições Do Enfermeiro Educador Em Saúde*. Trabalho de Conclusão de Curso apresentado ao Curso de Graduação em Enfermagem da Pontifícia Universidade Católica de Goiás. 13 de dezembro de 2021
22. Monteiro AKC, da Costa CPV, Campos MOB. *Aplicabilidade Da Teoria De Callista Roy No Cuidado De Enfermagem Ao Estomizado*. *Revista de Enfermagem e Atenção à Saúde*. 2016;5(1):84-92.