

Lactation Education Resources



Summer Courses 2011

The In-patient Breastfeeding Specialist

George Washington University Hospital
Washington, DC June 10, 2011 \$95
7 CERPs and Nursing Contact Hours

This course is designed specifically for maternity nurses who give assistance to breastfeeding mothers at the bedside. For more information or to register, go to: http://www.LERon-line.com/Inpatient_Breastfeeding_Specialist.html

Clinical Skills Workshop

Kaiser Permanente offices, Rockville, MD
August 3 & 4, 2011 \$195
12.5 CERPs and Nursing Contact Hours

This workshop is designed to be an interactive, hands-on session with videos, demonstrations and case studies. These small group sessions will provide lots of interaction with the instructor and the other students. Essential for those preparing for the IBLCE certification exam, useful for experienced maternity nurses and Lactation Consultants. For more information or to register, go to: http://www.LERon-line.com/Workshop/skills_workshop.htm

Contents

Summer Courses.....	1
Breastfeeding Quick Facts.....	2
SimplyThick Warning.....	2
Baby Friendly Hospital Training.....	3
Monthly Free Parent Handout Increasing Breastmilk Supply....	4&5
Where will you find LER next?.....	6
LER Contact Information.....	6



Breastfeeding Quick Facts

Births in US 4,131,019 in 2009
Birth rate 13.5 per 1,000 population
Low birth weight infants 8.2%
Preterm: infants 12%
Mean age at first birth: 25
Births by cesarean section 32%
Twins 3% of total births
Triplets or higher order multiples .15% of total births
<http://www.cdc.gov/nchs/fastats/births.htm>

Initiate breastfeeding 75%.
Breastfeeding at 6 months 43%
Breastfeeding at 12 months 22%
Exclusive breastfeeding at 3 months 33%
Exclusive breastfeeding at 6 months 13%
<http://www.cdc.gov/breastfeeding/data/reportcard2.htm>

African-American initiate breastfeeding 60%
African-American breastfeeding at 6 months 28%
African-American exclusively breastfeeding at 6 months 8%
African-American breastfeeding at 12 months 13%

Hispanic initiate breastfeeding 80%
Hispanic breastfeeding at 6 months 46%
Hispanic breastfeeding at 12 months 25%
http://www.cdc.gov/breastfeeding/data/NIS_data/2007/socio-demographic_any.htm

State with highest initiation rate Utah 90%
National mPINC Score 65%
States with highest mPIC Score Rhode Island and New Hampshire 81%
<http://www.cdc.gov/breastfeeding/data/reportcard3.htm>

Formula supplementation before 2 days of age 25%
Formula supplementation before 3 months 37%
Formula supplementation before 6 months 44%
http://www.cdc.gov/breastfeeding/data/NIS_data/index.htm

Working mothers with infant <1 year old 56%
<http://www.bls.gov/news.release/famee.nr0.htm>

Healthy People 2020 Health Goals

Increase the rate of infants who are ever breastfed
Baseline 75% Target 82%

Increase the rate of infants who are breastfed at 6 months
Baseline 44% Target 61%

Increase the rate of infants who are breastfed at one year
Baseline 23% Target 34%

Increase the rate of infants who are exclusively breastfed at 3 months
Baseline 34% Target 46%

Increase the rate of infants who are exclusively breastfed at 6 months
Baseline 14% Target 26%

Reduce the rate of breastfed newborns who receive formula supplementation within the first 2 days of life
Baseline 24% Target 14%

Increase the rate of employers that have worksite lactation support programs
Baseline 25% Target 38%

Increase the rate of births that occur in BFHI hospitals
Baseline 3% Target 8%

Source:
<http://www.healthypeople.gov/2020/topicsobjectives2020/objectiveslist.aspx?topicid=26>

Baby Friendly Hospital Initiative Training

Lactation Education Resources announces a new online training program for hospitals wishing to meet the BFHI requirement of 20 hours of staff training. Your training program can be customized to your setting with support statements from your hospital administrators.

Each lesson is recorded in webcast format so the learner sees the power point slides and hears the speaker's voice. Each lesson is 20-45 minutes in length so students can access the materials when they have a short window of time, or can do several lessons when they have a longer period of time to devote to it. Each webcast contains:

- *realistic hospital scenarios*
- *links out to relevant web pages*
- *quick quizzes*
- *fast facts*



The webinar format allows access to the training program 24/7/365. Special "Breastfeeding in Combat Boots" module for military hospitals.

http://www.LERon-line.com/BFHI_Training.html

Contact Vergie Hughes, Program Director, for a personalized proposal including any applicable discounts. 703-868-1849 or vergieh@comcast.net



FDA Warning on SimplyThick

The FDA is advising parents, caregivers and healthcare providers not to feed SimplyThick, a thickening product, to premature infants. The product may cause necrotizing enterocolitis (NEC), a life-threatening condition.

FDA first learned of adverse events possibly linked to the product on May 13, 2011. To date, the agency is aware of 15 cases of NEC, including two deaths, involving premature infants who were fed SimplyThick for varying amounts of time. The product was mixed with mothers' breast milk or infant formula products.

The current situation is unusual because NEC most often occurs in babies within the hospital early in their premature course. But among the ill babies FDA is aware of, some had been discharged from the hospital to home on a feeding regimen that included SimplyThick and then fell ill at home.

Report cases to emergency.operations@fda.hhs.gov.

Information for breastfeeding families

Increasing breastmilk supply



Frequent stimulation of the breasts, by breastfeeding or by using a breast pump, during the first few days and weeks, is essential to establish an abundant breastmilk supply. If you find your milk supply is low, try the following recommendations. If you are consistent you will likely see an improvement within a few days. Although it may take a month or more to bring your supply up to meet your baby's needs, you will see steady, gradual improvement. You will be glad that you put the time and effort into breastfeeding, and so will your baby!!

More breast stimulation

- Breastfeed more often, at least 8-12 times per 24 hours
- Discontinue the use of a pacifier
- Try to get in "one more feeding" before you go to sleep, even if you have to wake the baby
- Offer both breasts at each feeding
- "Burp & Switch", using each breast twice or three times, and using different positions
- "Top up feeds" Give a short feeding in 10-20 minutes if baby seems hungry
- Empty your breasts well by massaging while the baby is feeding
- Assure the baby is completely emptying your breasts at each feeding.

Avoid these things that are known to reduce breastmilk supply

- Smoking
- Caffeine
- Birth control pills and injections
- Decongestants, antihistamines
- Severe weight loss diets
- Mints, parsley, sage (excessive amounts)

Use a breast pump

- Use a hospital grade breast pump with a double kit
- Pump after feedings or between feedings
- Rest 10-15 minutes prior to pumping, eat and drink something
- Apply warmth to your breasts and massage before beginning to pump
- Try "power pumping". Pump for 15 minutes every hour for a day. Or try pumping 10 minutes, resting 10 minutes, pumping 10 minutes and so on, for an hour.

Condition your let-down reflex

- Play relaxing music
- Imagine your baby, look at pictures of your baby, smell baby clothing or baby powder
- Always pump in the same quiet, relaxed place, set up a routine
- Do slow, deep, relaxed breathing, relax your shoulders

Mother care

- Reduce stress and activity, get help
- Increase fluid intake
- Eat nutritious meals, continue to take prenatal vitamins
- Back rubs stimulate nerves that serve the breasts (central part of the spine)
- Increase skin-to-skin holding time with your baby, relax together
- Take a warm, bath, read, meditate, and empty your mind of tasks that need to be done

Herbs, foods and medications

- Eat a bowl of cooked oatmeal daily
- Brewer's yeast 3 T daily, increase by ½ teaspoon daily until results are seen (or equivalent in capsules)
- Fenugreek preparations help many women increase supply. Doses of 3-5 capsules (580-610 mg), three times per day are commonly recommended. Discuss this with your physician. *Avoid fenugreek if you are diabetic, hypoglycemic, asthmatic or allergic to peanuts or other legumes.* Fenugreek is available at most vitamin shops or health food stores. Taken as directed, it may cause a faint maple body odor. That is to be expected and means that the herb is doing its job. To read more about fenugreek, go to http://www.breastfeeding.com/all_about/all_about_fenugreek.html
- Blessed thistle or other herbs or beverages such as Mother's Milk Tea taken as directed on package. A reliable source of herbs and herbal blends is MotherLove Herbals and Gaia Herbs.
- Lactation cookies. By searching the internet and you will find sources for packaged cookies and recipes to make your own.
- Prescription medications sometimes help increase milk supply. Metaclopramide (Reglan) has been used with limited success. Domperidone has been used with more success but is not available in the United States. Discuss the use of prescription medications with your MD.

Provided for you by Lactation Education Resources. May be freely copied and distributed. Please be aware that the information provided is intended solely for general educational and informational purposes only. It is neither intended nor implied to be a substitute for professional medical advice. Always seek the advice of your physician for any questions you may have regarding your or your infant's medical condition. Never disregard professional medical advice or delay in seeking it because of something you have received in this information.

Keep records

- It is important to keep a daily log with the number of pumping sessions, amount obtained, amount you are having to supplement your baby and 24 hour totals - this amount is more important than the pumped amount at each session. This will help you see your progress over the days.
- Keep in touch with your health care provider so he can monitor your progress and modify your advice if necessary.

Retained placenta

- If you are not seeing improvement and you are still having vaginal bleeding after 2 weeks, discuss the possibility of retained placental fragments with your MD. Small bits of the placenta can secrete enough hormones to prevent the milk from coming in.

Low thyroid

- Have your physician check your thyroid levels. Low thyroid can affect milk supply. If you have been taking thyroid, have your levels rechecked after delivery. You may need your thyroid medication adjusted.

If supplementation is recommended

- Determine the amount needed with your MD
- Pump after the feeding
- Offer the supplement in a way that won't interfere with breastfeeding
- First choice method is using a tube or syringe at the breast
- Second choice is a cup, spoon
- Third choice is paced bottle feeding
- Wean your baby off the supplements gradually to challenge your breasts to make more milk

Other resources

- <http://www.lowmilksupply.org/>



Where will you find LER next?

Towards Exclusive Breastfeeding

Englewood Hospital and Medical Center
Englewood, NJ June 1 or June 2, 2011
Contact Kim Morrissey for details or to register
Kim.Morrissey@ehmc.com

The In-patient Breastfeeding Specialist

George Washington University Hospital, Wash DC
June 10, 2011
Register here: http://www.LERonline.com/Inpatient_Breastfeeding_Specialist.html

Assuring Breastfeeding Success

Sparrow Health System, Lansing MI. June 13 or 14
Skills Workshop June 15, 2011

Breastfeeding Conference Albany, GA

August, 2011 Date TBA

Maryland WIC Greenbelt MD

Sept 27, 2011

Clinical Skills Workshop

August 3 & 4, Kaiser Permanente, Rockville MD
October 15 & 16, Reston Hospital Center, Reston VA
More details at http://www.LERonline.com/Workshop/skills_workshop.htm

DUCK Conference Macon, GA Nov 4, 2011

For details contact Sibley.Debbie@mccg.org

Lactation Education Resources

5614 Dover St
Churchton, MD 20733

Voice 703.868.1849
Fax 443.607.8898
Email LERonline@yahoo.com
Website
www.LERon-line.com

Blog – How to Become a Lactation Consultant <http://www.LERonline.com/blog1>

Overview of the IBLCE pathways

<http://www.youtube.com/watch?v=ixgHQAE4VZQ>

Pathway 1

http://www.youtube.com/watch?v=HV5Bq7PJEiQ&feature=mfu_in_order&list=UL

Pathway 3

<http://www.youtube.com/watch?v=YEv59GSJGs&feature=related>

Clinical Internships

<http://www.youtube.com/watch?v=Kq qwfvijUbc&feature=related>

Program Director
Vergie Hughes RN MS IBCLC FILCA



Specialists in online lactation support training

LER Newsletter © 2011
Vergie Hughes, Churchton, MD.
All rights reserved.