# The importance of breastfeeding to a woman's health

Michal A. Young, M.D.,FAAP
Associate Professor
Director, NICU and Newborn Nurseries
Medical Director, B.L.E.S.S.
Breastfeeding Coordinator, D.C. Chapter AAP

#### Disclosure Statement

- I have no relevant financial relationships with the manufacturers of any commercial products and/or provider of commercial services discussed in this CME activity.
- I do not intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.



### Objectives

- By the end of this presentation, the listener will be able to:
- . List at least 3 health outcomes for women that are impacted by breastfeeding
- List at least 3 practical actions Obstetric providers can take to implement the 10 Steps to Successful Breastfeeding
- State at least 3 of the 5 measures included in TJC PC Core Measure Set



## Benefits to Society

- Reduced health care costs
- Lower employee absenteeism
- Convenient and cost effective
- Environmentally friendly
- Reduced cost of energy and use of natural resources in manufac-turing of infant formula



# Benefits of Breastfeeding for the mother

- For mothers employed outside the home –
   less loss days from work due to infant's illness
- Mothers who experienced gestational diabetes during pregnancy were less likely to subsequently develop insulin dependent diabetes



## Benefits of Breastfeeding

- Superior nutritional content for infant
- Immunological protection for infant
- Improved cognitive outcomes for infant
- Protection from premenopausal breast cancer, epithelial ovarian cancer for the mother
- Improved mother infant bond



# Benefits of Breastfeeding for the mother

- For mothers employed outside the home –
   less loss days from work due to infant's illness
- Mothers who experienced gestational diabetes during pregnancy were less likely to subsequently develop insulin dependent diabetes



## Benefits of Breastfeeding

- Superior nutritional content for infant
- Immunological protection for infant
- Improved cognitive outcomes for infant
- Protection from premenopausal breast cancer, epithelial ovarian cancer for the mother
- Improved mother infant bond

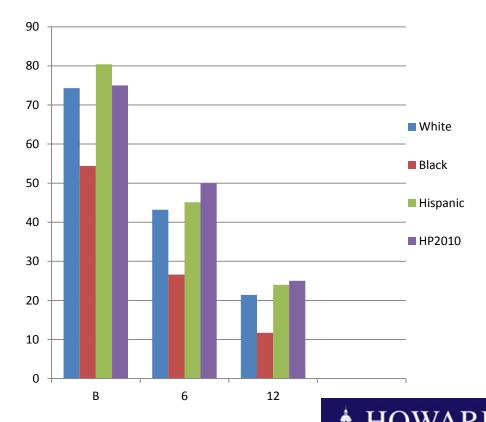




Excess Health Risks Associated with Not Breastfeeding Outcome	Excess Risk* (%)
Among full-term infants	
Acute ear infection (otitis media)	100
Eczema (atopic dermatitis)	47
Diarrhea and vomiting (gastrointestinal infection)	178
Hospitalization for lower respiratory tract diseases in the first year	257
Asthma, with family history	67
Asthma, no family history	35
Childhood obesity	32
Type 2 diabetes mellitus	64
Acute lymphocytic leukemia	23
Acute myelogenous leukemia	18
Sudden infant death syndrome	56
Among preterm infants	
Necrotizing enterocolitis	138
Among mothers	
Breast cancer	4
Ovarian cancer	27

### Current U.S. Breastfeeding Rates

- While breastfeeding initiation rates have improved over the past 7 years we still are below the Healthy People 2010 goals of 75%, 50% and 25% at birth, 6 months and 12 months respectively.
- Therefore still too many mothers and infants do not get a chance to receive the health benefits of breastfeeding





#### Healthy People 2020 Objectives for Breastfeeding Objective

Baseline (%) Target (%)

Increase the proportion of infants who are breastfed

Ever	74.0*	81.9
At 6 months	43.5*	60.6
At 1 year	22.7*	34.1
Exclusively through 3 months	33.6*	46.2
Exclusively through 6 months	14.1*	25.5

Increase the proportion of employers that have worksite lactation support programs 25† 38

Reduce the proportion of breastfed newborns who receive formula supplementation within the first 2 days of life 24.2\* 14.2

Increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies 2.9‡ 8.1

#### Who in the US Breastfeeds and Who Doesn't?

- More likely to Breastfeed:
  - o White upper-middle income
  - o Married/Live-in companions
  - o Higher educational level
  - o Not a WIC recipient
  - o Not born or reared in the United States

- Least likely to Breastfeed:
  - o Non-hispanic blacks and socio-economically disadvantaged groups have consistently lower breastfeeding rates.



### Baby-Friendly Hospital Initiative

- The Baby-friendly Hospital Initiative (BFHI) was launched by WHO and UNICEF in 1991, following the Innocenti Declaration of 1990. The initiative is a global effort to implement practices that protect, promote and support breastfeeding
- Facilities must implement the Ten Steps to Successful Breastfeeding and comply with the International Code on Marketing Breast-milk Substitutes
- Baby-Friendly USA, Inc. is the national authority



### Innocenti Declaration of 1990

- As a global goal for optimal maternal and child health and nutrition, all women should be enabled to practice exclusive breastfeeding and all infants should be fed exclusively on breastmilk from birth to 4-6 months of age.
- Thereafter, children should continue to be breastfed, while receiving appropriate and adequate complementary foods, for up to two years of age or beyond.
- This child-feeding ideal is to be achieved by creating an appropriate environment of awareness and support so that women can breastfeed in this manner.



### Innocenti Declaration of 1990

- Attainment of this goal requires, in many countries, the reinforcement of a "breastfeeding culture" and its vigorous defense against incursions of a "bottle-feeding culture".
- This requires commitment and advocacy for social mobilization, utilizing to the full the prestige and authority of acknowledged leaders of society in all walks of life



# Best Fed Beginnings Learning Collaborative – Our road to Baby Friendly

- The overall aim of the Best Fed Beginnings Learning Collaborative is to enable participating hospitals to be designated as Baby-Friendly by September 30, 2014.
- Howard University Hospital (HUH)is excited about our selection as one of the 90 hospitals (out of 235)across the nation participating in an effort that will allow us to achieve such distinction.
- We are uniquely suited to fulfill the expectations and goals of the BFB project. HUH is located in the Mid-Atlantic region
- Our clients are predominately non-Hispanic Blacks, primarily African Americans, in whom the Breastfeeding rates remain challenging.

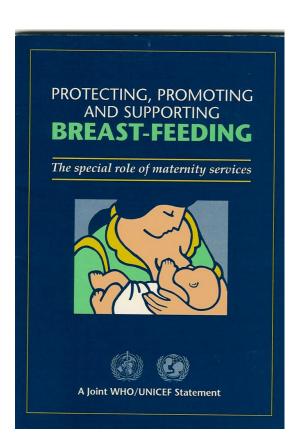


# Best Fed Beginnings Learning Collaborative – Our road to Baby Friendly

- The hospital already works to fulfill the Ten Steps To Successful Breastfeeding by implementing our Breastfeeding policy.
- We have established a team that has outlined specific measurable steps to improve our statistics as it relates to the Joint Commission's perinatal core measure of exclusive breastfeeding in the hospital.
- Working to improve hospital breastfeeding exclusivity is a significant step toward achieving the goal of decreasing the proportion of breastfed infants who receive any formula supplementation in the first two days of life.



### Baby Friendly Hospital Initiative



Care for mother during and immediately after delivery

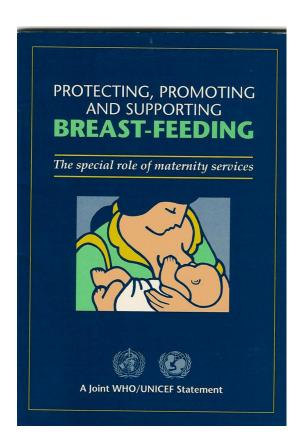
(Joint Statement, 1989 pages 17-19)

TEN STEPS TO SUCCESSFUL BREASTFEEDING Every facility providing maternity services and care for newborn infants should:

- 1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
- 2. Train all health care staff in skills necessary to implement this policy.
- 3. Inform all pregnant women about the benefits and management of breastfeeding.
- 4. Help mothers initiate breastfeeding within a half -hour of birth.
- 5. Show mothers how to breastfeed, and how to maintain lactation, even if they should be separated from their infants.



### Baby Friendly Hospital Initiative



Care for mother during and immediately after delivery

(Joint Statement, 1989 pages 17-19)

TEN STEPS TO SUCCESSFUL BREASTFEEDING Every facility providing maternity services and care for newborn infants should:

- 6. Give newborn infants no food or drink other than breast milk, unless medically indicated.
- 7. Practice rooming-in allow mothers and infants to remain together 24 hours a day.
- 8. Encourage breastfeeding on demand.
- 9. Give no artificial teats or pacifiers to breastfeeding infants.
- 10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

# Actions That Will Encourage/Support a Breastfeeding Choice

- Speak with your patients during the prenatal period about the risks of not breastfeeding
- Dispel misinformation about impact of breastfeeding on breast changes
- Remove formula sponsored literature and samples from your office and replace with breastfeeding supportive literature and posters.
- Encourage the practice of skin to skin after delivery
- Ask mothers how their breastfeeding is going when you make rounds in the hospital and at the post-partum office visit



# Actions That Will Encourage/Support a Breastfeeding Choice

 Dispel misinformation about breastfeeding and birth control

Dispel misinformation about breastfeeding

and sexuality



### In the Office

- Train staff including receptionists, triage, and nurses
- Provide places for breastfeeding moms to feed their child
- Get rid of formula advertising
- Provide incentives
- Know community resources



### Aims that HUH Must Achieve

- By September 2014,
  - we will improve the system of care within Howard University Hospital in order to receive Baby Friendly USA Designation.
  - We will achieve this by implementing evidence based practices (using The Best Fed Beginnings Breastfeeding Implementation Guide) to provide better care to mothers and their healthy infants who deliver at our hospital such that: -
- 60% of infants are fed only breastmilk from birth to discharge;



### Aims that HUH Must Achieve

- 90% of staff caring for mothers and infants receives training on breastfeeding and lactation support, including all medical students, interns and residents rotating through our mother-baby unit.
- 90% of mothers receive prenatal information on the benefits and management of breastfeeding
- 100% of healthy infants go skin to skin for at least one hour after delivery
- 90% of breastfeeding mothers receive assistance and support with breastfeeding



### Aims that HUH Must Achieve

- 80% of all infants room-in with mother and feeding on cue>/= 23 hours/day
- 100% of breastfeeding mothers are referred to our National Breastfeeding Support Center for follow up support after discharge
- 100% of all mother/baby areas will have posters/pictures that promote breastfeeding



# The criteria for a hospital's Baby Friendly accreditation include:

- Meaningful application of the 10 Steps to Successful Breastfeeding
- The program also restricts use by the hospital of free <u>formula</u> or other infant care aids provided by formula companies.
- Since the program's inception, approximately 15,000 facilities in more than 152 countries have been inspected and accredited as "Baby-Friendly



 Breastfeeding is the single intervention that confers a lifetime of health benefits in infancy and beyond. Breastfeeding is not a choice it's a healthcare decision







## BREASTFEEDING

It Rocks!

### References

- Lawrence,RA Lawrence,RM <u>Breastfeeding</u>: A <u>Guide for the Medical</u> <u>Profession</u> 6<sup>th</sup> Edition Mosby Inc. 2005
- Baby-Friendly Hospital Practices and Meeting Exclusive Breastfeeding IntentionCria G. Perrine, PhD, Kelley S. Scanlon, PhD, RD, Ruowei Li, MD, PhD, Erika Odom, PhD, and Laurence M. Grummer-Strawn, PhD Pediatrics June, 4, 2012Dennis CL, Hodnett E, Gallop R, Chalmers B, The effect of peer support on breast-feeding duration among primiparous women: a randomized controlled trial. CMAJ 2002;166 (1):21-8 Available: <a href="www.cma.ca/cmaj/vol-166/issue-1/0021.asp">www.cma.ca/cmaj/vol-166/issue-1/0021.asp</a>
- Evidence Report/Technology Assessment Number 153: Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries AHRA Publication No. 07-E007 April 2007 <a href="www.ahrq.gov">www.ahrq.gov</a>
- Evidence for the Ten Steps to Successful Breastfeeding World Health Organization: Division of Child Health Geneva 1998



### References

- Baby-Friendly USA. Guidelines and Evaluation Criteria for Facilities Seeking Baby-Friendly Designation. Sandwich, MA: Baby-Friendly USA, 2010.
- Declercq E, Labbok MH, Sakala C, O'Hara M. Hospital practices and women's likelihood of fulfilling their intention to exclusively breastfeed. Am J Public Health 2009;99:929-35.
- Vallenas C, Savage F. Evidence for the Ten Steps to Successful Breastfeeding. World Health Organization. 1998
- Rosenberg, KD Stull, JD et al "Impact of Hospital Policies on Breastfeeding Outcomes" Breastfeeding Medicine June 2008 Vol. 3 No.2 pp110-116
- Kristin et al Breastfeeding Rates Among Black Urban Low-Income Women:
   Effect of Prenatal Education Pediatrics. 1990 Nov;86(5):741-6.

