Implementing the 10 Steps to Successful Breastfeeding: Steps 6 & 9

Sahira Long, MD, FAAP, IBCLC
President, DC Breastfeeding Coalition
Assistant Clinical Professor of Pediatrics
George Washington University School of Medicine
Children’s National Medical Center

DC Perinatal Lactation Quality Care Collaborative
July 20, 2011
Disclosures

• I do not have any financial interest/arrangements or affiliation with one or more of the corporate organizations offering financial support or educational grants for this continuing medical education program.
Objectives

By the end of this presentation, the listener will be able to:

• Identify at least 2 BFHI expectations of facilities regarding exclusive breast milk feedings
• Identify steps that must be taken if a mother requests breast milk substitutes, bottles/artificial nipples or pacifiers; and
• State the theme of World Breastfeeding Week 2011.
Evidence for Steps 6 & 9

- Strong association shown between supplementation and pacifier/artificial teat use and early breastfeeding cessation, but difficult to show causal relationship
- Probable psychological interference
- Cost-effective to not distribute formula

In facilities where most of the Ten Steps were in practice mothers were 6x more likely to achieve exclusive breastfeeding
Give infants no food or drink other than breast milk, unless medically indicated.

**STEP 6**
Exclusive Breastfeeding

- EBF shall be the expected method of feeding from birth to discharge
- Eligibility criteria for EBF based on the definition in Joint Commission’s Perinatal Care Core Measure Set (#PC-0510)
- Any decisions to give BF babies food/drink other than breast milk should be for acceptable medical reasons and require written order documenting when and why supplement indicated
Joint Commission Definition

- Includes **all liveborn newborns discharged from the hospital except:**
  - Discharged from the NICU
  - Diagnosed with galactosemia before discharge
  - Fed parenterally during the hospital stay
  - Experienced death
  - Length of stay >120 days
  - Enrolled in clinical trials
  - *Documented Reason for Not EBF*
BFHI EBF Expectations

• Facility will track EBF rates according to TJC definition

• Facility will compare its annual rate of supplementation of BF babies to CDC’s NIS data for the geographic-specific region in which facility is located

• Year-by-year decrease in non-medically indicated supplementation in Baby-Friendly designated facilities
What if mom requests it?

• Explore the reasons for this request
• Address the concerns raised
• Educate her about the possible consequences to the health of her baby and/or BF success.
• *If mother still requests substitute, grant request and document process and the informed decision.*
Discussion Questions

• Does your facility track rates of exclusive breast-milk feeding? If so, how?
• What steps does your facility take to ensure that supplementation occurs only when an acceptable medical reason exists?
Give no pacifiers or artificial nipples to breastfeeding infants.

STEP 9
Bottles and Artificial Nipples

• Health care professionals must educate all BF mothers on how the use of bottles and artificial nipples may interfere with the development of optimal BF.

• Any fluid supplementation should be given by tube, syringe, spoon or cup in preference to an artificial nipple or bottle.
What if mom requests it?

• Explore the reasons for this request
• Address the concerns raised
• Educate on the possible consequences to the success of BF
• Discuss alternative methods of soothing and feeding
• *If mother still requests bottle, grant request and document process and the informed decision.*
Pacifier Use

• Health care professionals must educate all BF mothers on how the use of pacifiers may interfere with the development of optimal BF.
• BF babies should not be given pacifiers by the staff of the facility
Acceptable Use of Pacifiers

- Decrease pain during procedures when the baby cannot safely be held or BF
- Babies who are being tube-fed in NICU
- Other rare, specific medical reasons
What if mom requests it?

- Explore the reasons for this request
- Address the concerns raised
- Educate her on the possible consequences to the success of BF
- Discuss alternative methods for soothing
- *If mother still requests pacifier, grant request and document process and the informed decision.*
Discussion Questions

• What education is provided to BF mothers regarding the use of bottles, artificial nipples and pacifiers?
• How does your facility limit the use of bottles, artificial nipples, and pacifiers by BF babies?
"Talk to me! Breastfeeding - a 3D Experience".

WBW 2011
World Breastfeeding Week

- August 1-7, 2011
- Celebrated globally
- 2011 theme: “Talk to me! Breastfeeding - a 3D Experience”
3 Dimensions

- Time (prenatal to weaning)
- Place (home, community, hospital, etc.)
- Communication
  - includes cross-generation, cross-sector, cross-gender, and cross-culture communication and encourages the sharing of knowledge and experience, thus enabling wider outreach.
Communication

“Communication is an essential part of protecting, promoting and supporting breastfeeding. We live in a world where individuals and global communities connect across small and great distances at an instant's notice. New lines of communication are being created every day, and we have the ability to use these information channels to broaden our horizons and spread breastfeeding information beyond our immediate time and place to activate important dialogue.”

Source: www.worldbreastfeedingweek.org
DCBFC WBW Activities

• 2011 Breastfeeding Friendly Workplace Awards Call for Nominations
• 2011 DC Breastfeeding Friendly Hospital Initiative
Discussion Questions

• What plans does your facility have to celebrate WBW 2011?
References