

Human Milk Insights

September 2017

The Human Milk Insights newsletter presents the latest breastfeeding topics and clinical practice solutions, addresses coding issues challenging the lactation community, features a lactation service, as well as announces upcoming webinars and conferences.

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FEATURED STORIES THIS MONTH

NEWS YOU CAN USE

- Human Milk Protocols
- Benefits of Human Milk
- Human Milk in the NICU
- Human Milk and Government Organizations

HUMAN MILK EDUCATION

- Education Opportunities

TOOLS YOU CAN USE

- CDC Breastfeeding Report Card Infographic

CLINICAL PEARLS IN LACTATION

- What is “Normal” in Breastfeeding?

SPOTLIGHT ON PRACTICE

- The Breastfeeding Center for Greater Washington

NEWS YOU CAN USE

HUMAN MILK PROTOCOLS

Academy of Breastfeeding Medicine Protocols

The Academy of Breastfeeding Medicine has updated several protocols. Some of them are available on the ABM website; others are only available for purchase from the Breastfeeding Medicine website at this time. They will all be available on the Academy of Breastfeeding Medicine's website in the near future at

<http://www.bfmed.org/Resources/Protocols.aspx>

ABM Clinical Protocol #8: Human Milk Storage Information for Home Use for Full-Term Infants, Revised 2017

<http://online.liebertpub.com/doi/full/10.1089/bfm.2017.29047.aje>

ABM Clinical Protocol #22: Guidelines for Management of Jaundice in the Breastfeeding Infant 35 Weeks or More of Gestation—Revised 2017

<http://online.liebertpub.com/doi/full/10.1089/bfm.2017.29042.vjf>

ABM Clinical Protocol #3: Supplementary Feedings in the Healthy Term Breastfed Neonate, Revised 2017

<http://www.bfmed.org/Media/Files/Protocols/Protocol%203%20Supplementation%20English%20Version.pdf>

ABM Clinical Protocol #27: Breastfeeding an Infant or Young Child with Insulin-Dependent Diabetes

<http://www.bfmed.org/Media/Files/Protocols/Protocol%2027%20Breastfeeding%20an%20Infant%20or%20Young%20Child%20With%20Insulin%20English%20Version.pdf>

BENEFITS OF HUMAN MILK

Breastfeeding and the Risk of Maternal Cardiovascular Disease: A Prospective Study of 300,000 Chinese Women

According to a study in Journal of American Heart Association, among Chinese women, a history of breastfeeding was associated with a $\approx 10\%$ lower risk of CVD in later life and the inverse association was stronger among those with a longer duration of breastfeeding. Women who breastfeed longer had even lower rates of heart attack and stroke.

<http://jaha.ahajournals.org/content/6/6/e006081>

Global Breastfeeding Reports, from 1,000 Days

As part of the Global Breastfeeding Collective, 1,000 Days has helped develop and launch a new report entitled, "Nurturing the Health and Wealth of Nations: The Investment Case for Breastfeeding." The report shows how targeted investments in breastfeeding can save lives, improve health and build prosperity.

<https://thousanddays.org/resource/global-breastfeeding-collective-investment-case-breastfeeding/>

Lack of Breastfeeding History in Parous Women with Inflammatory Breast Cancer Predicts Poor Disease-Free Survival

A lack of breastfeeding history in parous women with inflammatory breast cancer may predict worse prognosis. We speculate that breastfeeding-induced alterations in the breast microenvironment may alter the aggressiveness of inflammatory breast cancer.

<https://www.ncbi.nlm.nih.gov/m/pubmed/28819368/>

HUMAN MILK AND THE NICU

Beyond Necrotizing Enterocolitis Prevention: Improving Outcomes with an Exclusive Human Milk–Based Diet

Extremely premature infants who received an exclusive human milk diet had a significantly lower incidence of NEC and mortality. The human milk group also had a reduction in late-onset sepsis, BPD, and ROP. This multicenter study further emphasizes the many benefits of an exclusive human milk diet, and demonstrates multiple improved outcomes after implementation of such a feeding protocol.

<http://online.liebertpub.com/doi/full/10.1089/bfm.2015.0134>

Goals for Human Milk Feeding in Mothers of Very Low Birth Weight Infants: How Do Goals Change and Are They Achieved During the NICU Hospitalization?

A study that examined the establishment, modification, and achievement of HM feeding goals during neonatal intensive care unit hospitalization for mothers of VLBW infants found that mothers changed their predelivery HM feeding goals after birth of a VLBW infant. Longitudinally, HM feeding goals and achievement reflected less HM use, highlighting the need to target lactation maintenance in this population.

<http://online.liebertpub.com/doi/full/10.1089/bfm.2015.0047>

NICU Human Milk Preparation: Do We Need Dedicated Milk Technicians?

Patrice Hatcher, MBA, BSN, RNC-NIC

Patrice Hatcher discusses the use of dedicated milk prep technicians in neonatal units.

<http://blog.neonatalperspectives.com/2017/08/25/nicu-human-milk-preparation-do-we-need-dedicated-milk-technicians/>

Five Nutrition Myths in Neonatology

Jae Kim, MD, PhD

Dr. Jae Kim enlightens us with five nutrition myths that are pertinent to neonatal nutrition.

<http://blog.neonatalperspectives.com/2017/07/23/5-nutrition-myths-in-neonatology/>

Neonatal Gastric Feeding Tubes, Part 3: Bacterial Risks and Benefits

Sandra Sundquist Beauman, MSN, RNC-NIC

In this third blog, Sandy Beauman discusses the bacterial risks of neonatal gastric feeding tubes, along with the benefits.

<http://blog.neonatalperspectives.com/2017/08/14/neonatal-gastric-feeding-tubes-part-3-bacterial-risks-and-benefits/>

Can Pharmacy and Enteral Nutrition Resources be Streamlined?

Kathy Quellen, RN, BSN

Kathy Quellen discusses the enteral feeding needs for the nursing and pharmacy areas within the NICU.

<http://blog.neonatalperspectives.com/2017/08/08/can-pharmacy-and-enteral-nutrition-resources-be-streamlined/>

Eight Ways to Drive Change Management in Healthcare

Jenny Murray, BSN, RN

Jenny Murray outlines eight ways to drive change in the healthcare arena.

<http://blog.neonatalperspectives.com/2017/08/02/8-ways-to-drive-change-management-in-healthcare/>

Initiation and Coming to Volume: What Powers Breastfeeding in your Patients

Evi Dewhurst

Evi Dewhurst discusses the concept of initiation and coming to volume in breastfeeding and compares it to modern technology.

<http://blog.neonatalperspectives.com/2017/07/28/initiation-and-coming-to-volume-what-powers-breastfeeding-in-your-patients/>

HUMAN MILK AND GOVERNMENT ORGANIZATIONS

CDC Breastfeeding Survey Data

The Centers for Disease Control and Prevention released data on breastfeeding rates from the National Immunization Survey from 2002–2014.

https://www.cdc.gov/breastfeeding/data/nis_data/index.htm

Infographic on the 2016 Breastfeeding Survey Data from CDC

Infographic on the recent 2016 CDC Breastfeeding Survey data.

http://blog.medelabreastfeedingus.com/2015/02/breastfeeding-in-the-us-the-cdcs-2014-data-infographic/?utm_campaign=education&utm_source=facebook&utm_medium=social&utm_content=post_link&utm_term=8_19_17

CDC Handout on Breast Pump Cleaning

CDC's new handout on "How to Keep Your Breast Pump Kit Clean" is available at

<https://www.cdc.gov/healthywater/pdf/hygiene/breast-pump-fact-sheet.pdf>

HUMAN MILK EDUCATION

Please go to www.MedelaEducation.com for education opportunities.

Human Milk Webinar

Lactational Abscess: How Deep Can it Go?

Carol Chamblin, DNP, APN, RN, IBCLC

Wednesday, September 27 1:00- 2:00 pm CST

1.0 Nursing Contact Hours

1.0 Dietitian CPE Credits

For more information and to register:

<http://www.medelabreastfeedingus.com/professionals/Education/Programs/Detail/684>

Register using promo code HMIRN5H4R to get 50% off registration fee.

TOOLS YOU CAN USE

The good news is in – more women in the US (and Puerto Rico) are breastfeeding their babies! That's according to the CDC's 2016 Breastfeeding Report Card. Let's see how far we've come.

National Breastfeeding Objectives are set by a national health promotion and disease prevention initiative designed to address major health issues. And breastfeeding is a major health issue! In 2010, the 10-year national objective plan was released for the year 2020. Breastfeeding indicators include how many women start breastfeeding and how many continue to breastfeed at 6 and 12 months.

Also, included are indicators regarding the support that's in place to help breastfeeding mothers. These data report supportive hospital practices such as giving birth in Baby Friendly Hospitals and not giving formula to breastfed babies in the first 2 days of life. The Report Card also lists the number of support people like La Leche League Leaders, Certified Lactation Counselors and Board-Certified Lactation Consultants in each state.

So take a look at this cute infographic of the CDC's 2016 Report Card, and share it with your colleagues and clients:

<http://blog.medelabreastfeedingus.com/2015/02/breastfeeding-in-the-us-the-cdcs-2014-data-infographic/>

The official document can be found at:

<https://www.cdc.gov/breastfeeding/pdf/2016breastfeedingreportcard.pdf>.

CLINICAL PEARLS IN LACTATION

This column is for lactation practitioners to share clinical challenges and successes, observations and pearls with colleagues. To share a clinical pearl, [submit it here](#). If your submission is selected for publication in future issues of Human Milk Insights, you will receive a \$25.00 VISA gift card

What is “Normal” in Breastfeeding?

So often mothers ask clinicians, “What's normal for my breastfeeding baby?” and often we don't actually know the answers. Dr. Jackie Kent and her colleagues from the University of Western Australia conducted a study several years ago to determine what IS the range of “normal” when it comes to breastfeeding babies.

The babies in this observational study were:

- One to six months of age
- Healthy babies born full-term
- Exclusively breastfeeding on demand
- Growing according to the WHO growth charts

This study revealed some fascinating facts regarding feeding behaviors of thriving breastfed babies – and that the range of “normal” is vast and wide. Let's review some of the research questions and the surprising answers.

How often do babies feed and for how long?

The number of breastfeeding sessions ranged from four to 13 per day. The average time it took for a baby to feed ranged from 12 to 67 minutes.

How much?

Infants will drain the breast once a day, but usually they stop feeding when they have had enough or want to change to the other breast.

From a single breast, the average volume an infant drinks is 75 ml (2.5oz). The range is: 30-135mL (1oz to 4½oz). Also, it's normal for one breast to produce more milk than the other.

On average, a breastfeeding removes 67% of milk from the breast. The average amount of milk intake per breastfeeding session – whether it's from one or both breasts is 54-234mL (2oz to 8oz).

Do babies usually feed from one breast or both?

Surprisingly, babies have varied feeding patterns:

- 30% always take just one breast
- 13% always take both breasts, and
- 57% mix it up and may take one or both breasts – feeder’s choice!

Do babies feed at night?

Mothers are often very concerned that their babies still wake up and nurse during the night. Well, they can rest assured that they’re with the majority of their peers. The majority (64%) of infants breastfeed day and night. These infants spread their milk intake evenly throughout the 24 hours.

Only 36% of infants don’t feed at night (10PM to 4AM). These infants have a large feed in the morning.

Do boys and girls drink the same amount of milk?

Here’s a fun fact: Boys eat more than girls! The average daily amount taken by boys is 831mL (28oz). The average daily amount taken by girls is: 755mL (25.5oz).

How much do babies drink in a day?

Range of daily milk intake of exclusively breastfed infants who are growing according to the WHO charts. 478-1356mL (16oz to 46oz).

So, often the answer to the question, “Is my baby getting enough?” is a resounding, “Yes!” Breastfed infants who are growing well are indeed getting enough milk! As infants get older, they take fewer, shorter, larger feeds, but their 24-hour (daily) intake remains the same.

For an infographic with these facts:

<https://goo.gl/E8V6v7>

1 Kent, J.C. et al. Volume and frequency of breastfeeds and fat content of breastmilk throughout the day. *Pediatrics* 117, e387-e395 (2006).

2 Kent, J.C. et al. Longitudinal changes in breastfeeding patterns from 1 to 6 months of lactation. *Breastfeed Med* 8, 401-407 (2013)

SPOTLIGHT ON PRACTICE

This month we are spotlighting The Breastfeeding Center For Greater Washington

Over 20 years ago, Pat Shelly, RN, MS, IBCLC saw a need to deliver compassionate, evidence-based care to breastfeeding mothers and babies across the breastfeeding spectrum to families living in the Washington D.C. area. In 1997, she founded the well-known and respected Breastfeeding Center For Greater Washington with the vision of offering home and office consults, education, group support and, a retail store. Originally based in Columbia Hospital for Women, The Breastfeeding Center moved to a K Street location in 2002 and recently relocated to its new expanded location, 19th St NW.

The Breastfeeding Center offers a wide range of both free and low-cost classes for expectant, new and experienced mothers of newborns to toddlers. Childbirth, healthy breastfeeding, and parenting classes are popular Center offerings as well as classes on breastfeeding multiples and returning to work while breastfeeding. The Center's most popular offering is its weekly support group for moms with babies up to 4 months old. According to the Center's Clinical Director and Manager of Lactation Services, Gina Boling, a class designed specifically for expectant fathers and partners on breastfeeding basics is also hugely popular and one Gina herself enjoys teaching. Individualized breastfeeding consults are also provided for families both in their own homes or at the Center. The Center is contracted to provide in-network breastfeeding services for United Healthcare and Aetna, Inc. Families covered by other insurance providers can seek reimbursement for care and services. Since first opening, the Center has gained the reputation as a center where mothers receive compassionate, evidence-based breastfeeding care in a comfortable, welcoming and caring environment. In the Center's brand-new location, private rooms for women who need to pop in off the street and nurse, pump, have their infant weighed, or for women who don't have access to a lactation room are also available. This has become a popular service for mothers who are town for a conference or business meeting. The Center offers a boutique setting that provides breast pump rentals and the sale of breastfeeding accessories. It is open Monday thru Saturday and offers services on Sundays by appointment. The first day in the new location, the staff serviced 27 mother-baby breastfeeding dyads.

The Center is staffed by four full-time staff; classes and breastfeeding services are delivered by 13 highly qualified IBCLC's who together have over 150 years of experience! They are committed to optimizing the breastfeeding experience and serve over 300 breastfeeding mothers and their babies in individual consults monthly.

In 2013, the Center became a breastmilk depot for the Mothers' Milk Bank of Austin, TX. Over 20,000 ounces of donated human milk were collected and sent to Austin in 2016.

Although retired and now living close to her family including one grandchild, Pat Shelly remains the Center's owner. Once dubbed, the 'Breast Whisper', her lasting legacy of providing free and no cost breastfeeding and parental education, as well as supportive breastfeeding care to families in the Washington, D.C. area continues. The numerous families who have witnessed the services of The Breastfeeding Center For Greater Washington are forever grateful for Pat's vision, her dedication, and support.

This column is for lactation practitioners and facilities who wish to acknowledge the work of others. We invite you to submit suggested practitioners or facilities you would like to spotlight. If you have a suggestion, [submit it here](#).