

# Objectives

- Identify three pre-discharge infant breastfeeding issues requiring follow-up care
- Identify two resources available for nonhospitalized breastfeeding families
- Identify two employer issues that breastfeeding women should be aware of
- Discuss methods to sustain breastfeeding for at least two years

# Follow-Up - Pediatric Appointment

- Initially at 3 to 5 days of age
- > Second visit at 2 to 3 weeks of age



# Pre-Discharge Breastfeeding Assessment - Baby Issues

- Excessive weight loss
- Lack of output
- Difficulty with latch
- Difficulty with suckling
- Lethargy



# Pre-Discharge Breastfeeding Assessment - Baby Issues

- Jaundice
- Preterm/late preterm
- Health concerns
- Anatomical concerns



# Pre-Discharge Breastfeeding Assessment - Mother Issues

- Unusual nipple size/shape
- Engorgement
- Sore nipples
- Questionable milk supply
- History of breast surgery
- History of infertility
- History of breastfeeding problems
- Health concerns



# Pre-Discharge Breastfeeding Assessment - Mother Issues

- Lack of social support
- Maternal-infant attachment concerns
- > Potential for postpartum depression
- Lack of confidence
- Inability to breastfeed without help

# Follow-Up - Support Groups

- Foster the establishment of breastfeeding support groups and refer breastfeeding mothers to them upon discharge from the hospital or clinic
- Hospital support groups
- La Leche League
- Women, Infants, and Children Program (WIC)
- Private lactation consultants
- Pediatrician offices



## Follow-Up - Online Resources

- > Support Groups, Breastfeeding Specialists, and Information
  - Maryland Breastfeeding Coalition
  - International Lactation Consultant Association
  - La Leche League

#### Follow-Up - Online Resources

- ▶ Information
- Maryland Department of Health and Mental Hygiene
  - - Click on 'Breastfeeding Services'

- Office on Women's Health
- United States Breastfeeding Committee
- $\frac{bttp://www.usbreastfeeding.org/MothersFamilies/Action1SupportMothers/BreastfeedingFAQs/tabid/117/Default.aspx$

# Protecting Breastfeeding Upon Return to Work - Advantages

#### Mom and baby continue to benefit from

- breastfeeding
- Cost effective
- · Connection between mom and baby





#### Employer

- Reduced absenteeism
- Increased productivity
- Increased morale
- Lower employer healthcare costs
- Lower staff turnover
- Positive return on investment (ROI)

# Protecting Breastfeeding Upon Return to Work - Plan Ahead

- Prior to return to work, convey to supervisor plan to pump upon return to work
- Space needed
- Non-bathroom
- Private, preferably with a locked door
- Can be used for other things when mom not pumping
- How pumping breaks will be handled
- Advantages to employer



#### Protecting Breastfeeding Upon Return to Work – It's the Law!

- 2010 Health Care Reform and Amendment to Federal Labor Standards Act (FLSA) section 7
  - Provide reasonable break time
  - Non-bathroom space
  - Private space, shielded from view of others



#### Sustaining Breastfeeding

- The American Academy of Pediatrics and The American Academy of Family Physicians recommend
- Exclusive breastfeeding for 6 months
- Breastfeeding and solid foods for at least one year and beyond
- The World Health Organization recommends
  - Breast milk alone for 6 months
- Continued breastfeeding along with family foods until at least two years old

#### Conclusion

- Safe discharge for breastfeeding mothers and babies prevents a cascade of breastfeeding complications
- Pre-discharge assessment
- Appropriate referrals
- Places for mothers to receive ongoing support



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