



# Clinical Perspectives In Lactation

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## World Breastfeeding Week—August 1 - 7, 2010 Just 10 Steps—The Baby-Friendly Way

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### Special points of interest:

\* World Breastfeeding Week 2010—Just 10 Steps

The theme for World Breastfeeding Week 2010 is *Breastfeeding Just 10 Steps!* This year's celebration commemorates the 20<sup>th</sup> anniversary of the Innocenti Declaration, which called for the implementation of the Ten Steps to Baby-Friendly in all maternity facilities. Since the Baby-Friendly Hospital Initiative (BFHI) began, almost 28 per cent of all maternity facilities worldwide or about 20,000 facilities in more than 134 countries have been awarded Baby-Friendly status. Breastfeeding rates have increased worldwide, however, due to reduced BFHI programming worldwide, inadequate training, and weakened compliance with the Ten Steps exclusive breastfeeding rates are stagnating.

Use the 2010 World Breastfeeding Week theme to bring attention to the Ten Steps. Provide a workshop to train maternal and child health care workers on lactation support or take the opportunity to discuss how your facility can become more baby friendly. Help mothers who you work with achieve their breastfeeding goal. Take the World Breastfeeding Week 2010 "Baby-Friendly World" Pledge at [www.worldbreastfeedingweek.org](http://www.worldbreastfeedingweek.org) and place a baby step on the world map for Kansas. Information about World Breastfeeding Week can also be found at <http://www.waba.org>. For more information about BFHI and the Ten Steps see the April 2010 issue of *Clinical Perspectives in Lactation* available at: [http://www.kansaswic.org/breastfeeding/clinical\\_lactation\\_newsletter.html](http://www.kansaswic.org/breastfeeding/clinical_lactation_newsletter.html)

## World Breastfeeding Week—the History

World Breastfeeding Week, the annual celebration of lactation worldwide, is held August first to the seventh every year. These dates mark the anniversary of the *Innocenti Declaration* on the protection, promotion and support of breastfeeding developed in 1990 by the World Health Organization and the United Nations International Children's Emergency Fund (UNICEF.) However, frequently World Breastfeeding Week celebrations occur throughout the month of August. World Breastfeeding Week began in 1992 with the Baby Friendly Hospital Initiative as a part of the World Alliance for Breastfeeding's (WABA) action plan to facilitate and strengthen social mobilization for breastfeeding. WABA continues to set the yearly theme.

Past themes have been:

- 1993 – Women, Work and Breastfeeding, Everybody Benefits; *continued on Pg 4*

## *Joint Commission Endorses Exclusive Breastfeeding as a Perinatal Care Core Measure*

The Joint Commission evaluates and accredits more than 17,000 health care organizations and programs in the United States and is the oldest and largest standards-setting and accrediting body in health care. The Joint Commission's Gold Seal of Approval indicates a level of health care expected by the United States public. Joint Commission standards and performance measures help guide the accreditation process. The Joint Commission's Board of Commissioners recommended retiring the Pregnancy and Related Conditions core measure set and replacing it with an expanded set of evidenced-based measures. The new Perinatal Care core measure set took effect April 1, 2010. The Perinatal Care core measures are:

- Elective delivery
- Cesarean section
- Antenatal steroids
- Health care-associated bloodstream infections in newborns
- Exclusive breast milk feeding

The exclusive breast milk feeding core measure is further defined as "Exclusive breast milk feeding during the newborn's entire hospitalization." This measure is specified as "...a newborn receiving only breast milk and no other liquids or solids except for drops or syrups consisting of vitamins, minerals, or medicines." Breast milk feeding includes expressed mother's milk as well as donor human milk. Either of these may be fed to the infant by means other than suckling at the breast.

The Joint Commission rationale is as follows, "Exclusive breast milk feeding for the first six months of neonatal life has long been the expressed goal of World Health Organization (WHO), Department of Health and Human Services (DHHS), American Academy of Pediatrics (AAP) and American College of Obstetricians and Gynecologists (ACOG.) ACOG has recently reiterated its position (ACOG, 2007). A recent Cochrane review substantiates the benefits (Kramer et al., 2002.) Much evidence has now focused on the prenatal and intrapartum period as critical for the success of exclusive (or any) BF [breastfeeding] (Centers for Disease Control and Prevention [CDC], 2007; Petrova et al., 2007; Shealy et al., 2005; Taveras et al., 2004). Exclusive breast milk feeding rate during birth hospital stay has been calculated by the California Department of Public Health for the last several years using newborn genetic disease testing data. Healthy People 2010 and the CDC have also been active in promoting this goal."

Some infants are excluded from the data collection including infants discharged from the hospital while in the Neonatal Intensive Care Unit, those staying in the hospital over 120 days, etc. In some of the exclusion cases, the infant can and should be exclusively fed pumped mother's breast milk or donor human milk. The United States Breastfeeding Committee (USBC) states that "it is not expected that exclusive breast milk feeding rates will reach 100% in any facility as there will always be a small number of breastfed infants in whom supplementation is medically indicated, even with exemplary implementation of best practices." Data collection in California indicates that less than 10% of breastfed infants are supplemented in top-performing hospitals that range from public institution serving low-income populations to private hospitals. The CDC National Survey of Maternity Practices in Infant Nutrition and Care (mPINC) 2007 report of Kansas data shows 72.1 per cent of healthy breastfed infants receiving non-breast milk feedings in the hospital before discharge.

Supplementation of a breastfed infant is a significant risk factor for early breastfeeding cessation. Supplementation by hospital personnel undermines a mother's confidence in her ability to breastfeed and results in further supplementation and lack of breastfeeding success once the mother/baby dyad go home. Reduced supplementation will be a major policy shift for many hospitals.

Accurate collection of the data needed to comply with the Joint Commission's new Perinatal Care core measure on exclusive breast milk feeding is necessary. The USBC has developed a document to assist hospitals and maternity facilities in accurate collection of data. Sample forms from hospitals already collecting accurate and evidence-based care data are available. This document can be accessed at <http://www.usbreastfeeding.org/LinkClick.aspx?link=Publications%2fImplementing-TJC-Measure-EBMF-2010-USBC.pdf&tabid=70&mid=388>

Authors: Melissa Bartick and Arnold Reinhold

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**“BACKGROUND AND OBJECTIVE:** A 2001 study revealed that \$3.6 billion could be saved if breastfeeding rates were increased to levels of the Healthy People objectives. It studied 3 diseases and totaled direct and indirect costs and cost of premature death. The 2001 study can be updated by using current breastfeeding rates and adding additional diseases analyzed in the 2007 breastfeeding report from the Agency for Healthcare Research and Quality.

**STUDY DESIGN:** Using methods similar to those in the 2001 study, we computed current costs and compared them to the projected costs if 80% and 90% of US families could comply with the recommendation to exclusively breastfeed for 6 months. Excluding type 2 diabetes (because of insufficient data), we conducted a cost analysis for all pediatric diseases for which the Agency for Healthcare Research and Quality reported risk ratios that favored breastfeeding: necrotizing enterocolitis, otitis media, gastroenteritis, hospitalization for lower respiratory tract infections, atopic dermatitis, sudden infant death syndrome, childhood asthma, childhood leukemia, type 1 diabetes mellitus, and childhood obesity. We used 2005 Centers for Disease Control and Prevention breastfeeding rates and 2007 dollars.

**RESULTS:** If 90% of US families could comply with medical recommendations to breastfeed exclusively for 6 months, the United States would save \$13 billion per year and prevent an excess 911 deaths, nearly all of which would be in infants (\$10.5 billion and 741 deaths at 80% compliance).

**CONCLUSIONS:** Current US breastfeeding rates are suboptimal and result in significant excess costs and preventable infant deaths. Investment in strategies to promote longer breastfeeding duration and exclusivity may be cost-effective.”

*Pediatrics* 2010;125:e1048–e1056

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## *Working and Breastfeeding Included in New Healthcare Bill*

The Patient Protection and Affordable Care Act, also known as the health care reform package, included a workplace breastfeeding support provision. The provision states that employers shall provide reasonable, unpaid break time and a private, nonbathroom place for an employee to express breastmilk for her nursing child for one year after the child’s birth. Employers with less than 50 employees are not subject to the requirement if it would cause “undue hardship.” Currently, 24 states, Puerto Rico, and the District of Columbia have legislation related to breastfeeding in the workplace. The new federal provision will provide a minimum level of support in all states, but it will not preempt a state law that provides stronger protections. “This looks to be a strong legal provision, providing for and protecting nursing mothers in the workplace,” says labor and employment attorney Thomas Doyle, JD of Portland’s Bennett Hartman Morris and Kaplan. “The implementation of this law will help women care for their babies while contributing to the United States workforce.”

After championing the most detailed of the state workplace support laws in Oregon (passed in 2007), United States Senator Jeff Merkley introduced “Reasonable Break Time for Nursing Mothers” as an amendment to the Senate HELP Committee’s health reform bill last year. Amelia Psmythe, Director of the Breastfeeding Coalition of Oregon, celebrates Senator Merkley’s impact on shifting the paradigm to recognize that: “Breastfeeding is the natural outcome of pregnancy, and workplace support is the natural outcome of a society where the majority of mothers and babies are separated due to work.” Although the law was effective immediately upon President Obama’s signing of the Patient Protection and Affordable Care Act, the United States Department of Labor must now work to define terms and enforcement procedures. USBC will be closely monitoring and supporting this process and stands ready to support employers and breastfeeding employees with tools, information and resources. Employers, human resources managers and breastfeeding employees who are interested in helping to establish worksite lactation programs at their place of employment can find additional information and Frequently Asked Questions on the USBC Web site. *Source:* [www.usbreastfeeding.org](http://www.usbreastfeeding.org).

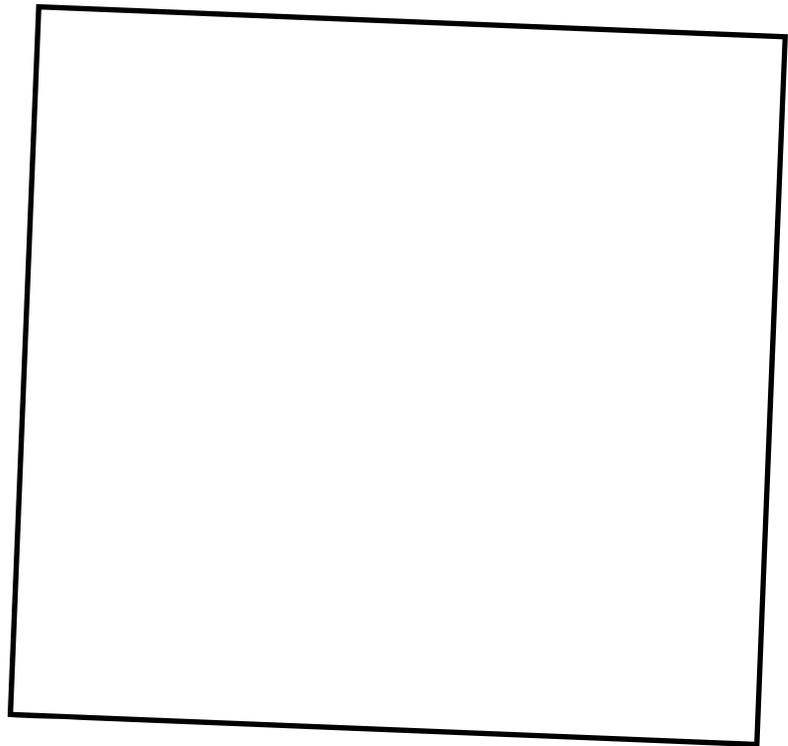
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Our Vision—Healthy Kansas living in safe  
and sustainable environments.



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## ***World Breastfeeding Week—the History continued***

- 1994 – Protect Breastfeeding, Making the Code Work;
  - 1995 – Breastfeeding Empowers Women;
  - 1996 – Breastfeeding, A Community Responsibility;
  - 1997 – Breastfeeding, Nature’s Way;
  - 1998 – Breastfeeding, The Best Investment;
  - 1999 – Breastfeeding, Education for Life;
  - 2000 – Breastfeeding, It’s Your Right!;
  - 2001 – Breastfeeding in the Information Age;
  - 2002 – Breastfeeding, Healthy Mothers and Healthy Babies;
  - 2003 – Breastfeeding in a Globalised World for Peace and Justice;
  - 2004 - Exclusive Breastfeeding, the Gold Standard, *Safe, Sound, Sustainable*;
  - 2005 – Breastfeeding and Family Foods, **LOVING & HEALTHY**;
  - 2006 – Code Watch, 25 Years of Protecting Breastfeeding;
  - 2007 – Breastfeeding, The 1<sup>st</sup> Hour – Save ONE Million Babies!;
  - 2008 – Mother Support, Going for the Gold Everyone Wins!;
  - 2009 – Breastfeeding: A Vital Emergency Response.
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