



Syracuse Healthy Start Risk Reduction News

October 2001

Edition 3

This edition devoted to Breastfeeding

Syracuse Healthy Start

Our Mission:

The overall goals of the first round of Syracuse Healthy Start are to decrease infant mortality and adolescent pregnancy in Central Syracuse.

A vital part of Syracuse Healthy Start effort is the Risk Reduction component. The objective of this component is to provide healthcare and human service providers with the information they need to provide support, intervention, and appropriate referrals for women with identified risks. This newsletter is to facilitate the sharing of vital information.

Richard H. Aubry, MD, MPH
Chairman, Risk Reduction
Component

Kira A. Fiutak, WHNP, MS
Maternity In-service Coordinator

In collaboration with:

- * Onondaga County Health Department
- * Upstate Medical University Institute for Maternal and Child Health
- * Family Ties Network, Inc.

The Benefits of Breastfeeding

Breastfeeding is considered the ideal method of nourishing an infant. Breast milk is the most complete form of nutrition for infants. Breastfeeding enhances the infant's immune system and has been shown to lower the incidence of diarrhea, respiratory tract infection, otitis media, pneumonia, urinary tract infection, necrotizing enterocolitis, and invasive bacterial infection. Breastfeeding has also been

found to benefit maternal health by decreasing postpartum bleeding, more rapid uterine involution, easier return to pre-pregnancy weight, and decreasing the risk for pre-menopausal breast cancer and ovarian cancer.

Healthy People 2000 established goals to increase breastfeeding to 75% in the early postpartum period, and to increase to 50% the proportion of mothers who breastfed their babies through 5 to 6 months of age. In Healthy People 2010 an additional goal of 25% breastfeeding continuance through the first year was added.

In 1998, 64% of all mothers breastfed in the early postpartum period in the United States. In 2000, 61.9% of mothers delivering in the Central New York region intended to breastfeed after discharge from the hospital.

For mothers residing in the Syracuse area, the percentage intending to breastfeed after discharge was 54%. However, only 47.8% of mothers residing in

The Surgeon General has set a goal of 75% of mothers breastfeeding their newborns, 50% continuing to breastfeed at 6 months and 25% continuing to breastfeed for 1 year or longer. In the Healthy Start project area, however, only 47.8% intended to breastfeed.

the Syracuse Healthy Start area intended to breastfeed after discharge.

The issue of breastfeeding is vital to the health of our future population. Because of the benefits of breastfeeding to both the infant and mother, the mother's interest in and efforts toward breastfeeding must be fostered from every aspect of patient care.



In This Issue:

- Page 2:** Hospitals Join Forces to Promote Breastfeeding
Grassroots Efforts to Promote Breastfeeding
- Page 3:** Ten Steps to Baby-Friendly Practices
Economic Benefits
- Page 4:** Helpful Resources

Hospitals Join Forces to Promote Breastfeeding

The Breastfeeding Roundtable

Contributed by Pat Aiken, RNC, IBCLC, Breastfeeding Educator, St. Joseph's Hospital Health Center, Breastfeeding Roundtable Member

In an effort to reduce infant mortality by increasing initiation and duration of breastfeeding, Syracuse Healthy Start decided to promote the Baby Friendly Hospital Initiative (BFHI) at the local hospitals. The BFHI is a global program sponsored by the World Health Organization and UNICEF to encourage and recognize hospitals and birthing centers that offer an optimal level of care for breastfeeding families.

Administrators from the three Syracuse birthing hospitals gave their support to this effort and representatives from each hospital were invited to attend monthly roundtable discussions to work toward the BFHI designation. Members of the Breastfeeding Roundtable have brought their

breastfeeding message to Syracuse through local baby fairs, a press conference during World Breastfeeding Week, and local television. Internally, members of the Breastfeeding Roundtable have worked to revise hospital policies to be more consistent and supportive of the BFHI. The members are working towards combining the breastfeeding education required of hospital staff in order to fulfill the educational requirements of the BFHI. In an effort to allow for more detailed surveillance of breastfeeding trends, the members have identified a computer database that they would like to imple-

ment in each hospital.

The Breastfeeding



Roundtable meets monthly to work towards its goal of improving infant health by obtaining the Baby Friendly Hospital designation for each of Syracuse's

birthing hospitals. For more information, call Family Ties Network, Inc. at 424-0009 or Syracuse Healthy Start at 464-5708.

The AAP recommends that babies be exclusively breastfed for the first six months, continue breastfeeding for at least 12 months and thereafter as long as mutually desired.

Grassroots Effort to Promote Breastfeeding

Syracuse Healthy Start Consortium Breastfeeding Committee

Since its inception, Syracuse Healthy Start has recognized the importance of breastfeeding for the health of infants. The community-driven force behind Healthy Start, the Consortium, initiated a working group to address the issue of breastfeeding in 1997. The

Consortium Breastfeeding Committee has become more active recently as a response to the interest of community members. The goal of the Breastfeeding Committee is to heighten community-awareness of the benefits of breastfeeding at the grass roots level. The committee is planning several educational activities, beginning with

informational tables at area grocery stores.

The Breastfeeding Committee meets monthly and welcomes interested community members and healthcare providers to attend. For more information, call Family Ties Network, Inc. at 424-0009 or Syracuse Healthy Start at 464-5708.

The Ten Steps to a Baby-Friendly Obstetric Practice

1. Have a written breastfeeding promotion and support 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 through information and classes.
4. Help mothers initiate breastfeeding within one half hour of birth by placing the infant on the mother's chest to promote the prefeeding sequences of behaviors.
5. If the mother is separated from her infant, confirm that an electric breast pump is available to express at least 8 sessions in 24 hours.
6. Avoid the use of sterile water, glucose water, or formula in the breastfed newborn, unless medically indicated.
7. Encourage rooming in 24 hours a day in the hospital.
8. Encourage breastfeeding 8-12 times each 24 hours on cue, teaching mothers the behavioral cues of the infant.
9. Avoid use of artificial nipples or pacifiers in breastfeeding infants.
10. Have a Nurse Practitioner or lactation consultant whose responsibility can include prenatal teaching, hospital rounds, call-in times, and visits for breastfeeding questions or problems. Or refer to a lactation consultant in the community. Refer mothers to breastfeeding support groups.

The Ten Steps to a Baby-Friendly Pediatric Practice

1. Have a written breastfeeding promotion and support 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 through information and classes.
4. Help mothers initiate and maintain breastfeeding during hospital rounds. Perform newborn exam in mother's room, showing her how well-designed her baby is for breastfeeding.
5. If the mother is separated from her infant, confirm that an electric breast pump is available to express at least 8 sessions in 24 hours.
6. Avoid the use of sterile water, glucose water, or formula in the breastfed newborn, unless medically indicated.
7. Encourage rooming in 24 hours a day in the hospital.
8. Encourage breastfeeding 8-12 times each 24 hours on cue, teaching mothers the behavioral cues of the infant.
9. Avoid use of artificial nipples or pacifiers in breastfeeding infants.
10. Have a Nurse Practitioner or lactation consultant whose responsibility can include prenatal teaching, hospital rounds, call-in times, and visits for breastfeeding questions or problems. Or refer to a lactation consultant in the community. Refer mothers to breastfeeding support groups.

By Marsha Walker

Source: Breastfeeding Promotion and Change

The Economic Benefits of Breastfeeding

At least \$3.6 billion would be saved if breastfeeding were increased from current levels to those recommended by the U.S. Surgeon General (see page 1). This note-worthy figure is an under-estimate because it includes cost savings from the treatment of only three childhood illnesses: otitis media, gastroenteritis, and necrotizing enterocolitis. To expand the cost-consideration to include other well-established infant benefits such as decreased incidence and/or severity of lower respiratory infection, bacteremia, bacterial meningitis, botulism, and urinary tract infection, as well as the possible protective effects against SIDS, IDDM, Crohn's disease, ulcerative colitis, lymphoma, and other digestive

chronic diseases raises this cost-savings estimate considerably. Breastfeeding has also been related to possible enhancement of cognitive development, which is difficult to quantify, but would be a clear cost-saving aspect. When maternal benefits of breastfeeding are taken into account, reduced incidence of pregnancy-induced, long-term obesity, decreased postpartum blood loss, decreased risk of ovarian cancer and premenopausal breast cancer, and enhanced bonding with the infant, the cost savings are truly impressive.

Source: ERS Food Assistance and Nutrition Research Report. March 2001.

Helpful Resources about Breastfeeding

Contacts

Syracuse Healthy Start	464-5708
Family Ties Network, Inc.	424-0009
Upstate Medical University Breastfeeding and Childbirth Classes	464-2169
St. Joseph's Hospital and Health Care Center Childbirth Classes	448-5515
Crouse Hospital "First Steps" Classes and Childbirth Education Classes	472-2464
Lactation Study Center at University of Rochester Medical Center	716-275-0088

Websites

La Leche League	www.lalecheleague.org
World Alliance for Breastfeeding Action	www.waba.org.br

Resources

- Hale, T. Medications and mother's milk. 9th ed. Pharmasoft Medical Publishing, 2000.
- American College of Obstetricians and Gynecologists. Educational bulletin #258, Breastfeeding: Maternal and infant aspects. Vol. 96, No. 1. 2000.
- Healthy Children's Project. The curriculum to support the ten steps to successful breastfeeding: An 18-hour interdisciplinary breastfeeding management course for the United States. 1999.
- Lauwers, J. and Shinskie, D. Counseling the nursing mother: A lactation consultant's guide. 3rd ed. Jones & Barlett, 2000.
- Weimer, J. The economic benefits of breastfeeding: A review and analysis. ERS Food Assistance and Nutrition Research Report. No. 13. March 2001.



**IMATCH
90 Presidential Plaza
UHCC 4th Floor
Syracuse, New York
13202**

RETURN SERVICE REQUESTED