



Breast feeding week

1-7 AUG 2018



NNF Kerala Academic Module

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Learning Objectives

- ❖ Introduction
- ❖ Breast feeding week -2018
 - Theme & Objectives
- ❖ Revised WHO BFHI 2018 –Ten steps
special stress on
- Role of Antenatal care
 - Advantages of breast feeding
 - Inverted Nipple – correction techniques

Continued.....



Learning Objectives

- Immediate care after birth
 - Skin to Skin contact
 - Early breast feeding
 - LATCH score
- Breast milk – Expression & storage
- Rooming in & Bedding in
- Breast feeding & society



Introduction

- ❖ Exclusive breastfeeding prevents **13 %** of under-five deaths
- ❖ Early initiation of breastfeeding can cut down **22%** of all neonatal mortality.
- ❖ As per National Survey (NFHS-4, 2015-16) India
 - Only **41.6%** children under age 3 years breastfed within one hour of birth
 - Only **54.9%** children under age 6 months exclusively breast fed

WABA World Breast feeding week 2018



Breast feeding
Foundation of Life

1-7
AUG
2018

Objectives



INFORM

people about the links between good nutrition, food security, poverty reduction and breastfeeding



ANCHOR

breastfeeding as the foundation of life



ENGAGE

with individuals and organisations for greater impact



GALVANISE

action to advance breastfeeding as a part of good nutrition, food security and poverty reduction





BFHI

Ten steps to successful breastfeeding (WHO Revised 2018)

Guidance to Protect, Promote & Support Breast Feeding

NNF Kerala

The TEN STEPS to Successful Breastfeeding

- HOSPITAL POLICIES**
Hospitals support mothers to breastfeed by...
 - Not promoting infant formula, bottles or teats
 - Making breastfeeding core standard practice
 - Keeping track of support for breastfeeding
- STAFF COMPETENCY**
Hospitals support mothers to breastfeed by...
 - Training staff on supporting mothers to breastfeed
 - Assessing health workers knowledge and skills
- ANTENATAL CARE**
Hospitals support mothers to breastfeed by...
 - Discussing the importance of breastfeeding for babies and mothers
 - Preparing women to be able to feed their baby
- CARE RIGHT AFTER BIRTH**
Hospitals support mothers to breastfeed by...
 - Encouraging skin-to-skin contact between mother and baby soon after birth
 - Helping mothers to put their baby to the breast right away
- SUPPORT MOTHERS WITH BREASTFEEDING**
Hospitals support mothers to breastfeed by...
 - Checking positioning, attachment and sucking
 - Giving practical breastfeeding support
 - Helping mothers with common breastfeeding problems
- SUPPLEMENTING**
Hospitals support mothers to breastfeed by...
 - Giving only breast milk unless there are medical reasons
 - Prioritizing donor human milk when a supplement is needed
 - Helping mothers who want to formula feed to do so safely
- ROOMING-IN**
Hospitals support mothers to breastfeed by...
 - Letting mothers and babies stay together day and night
 - Making sure that mothers of sick babies can stay near their baby
- RESPONSIVE FEEDING**
Hospitals support mothers to breastfeed by...
 - Helping mothers know when their baby is hungry
 - Not limiting breastfeeding times
- BOTTLES, TEATS AND PACIFIERS**
Hospitals support mothers to breastfeed by...
 - Counsel mothers on the use and risks of feeding bottles, teats, and pacifiers
- DISCHARGE**
Hospitals support mothers to breastfeed by...
 - Referring mothers to community resources for breastfeeding support
 - Working with communities to improve breastfeeding support services

World Health Organization | unicef



1. Hospital Policies



- ❖ Written infant feeding policy
- ❖ Not promoting infant formula, bottles or teats
- ❖ Making breastfeeding care standard practice
- ❖ Keeping track of support for breastfeeding
 - Data management & monitoring



2. Staff Competency

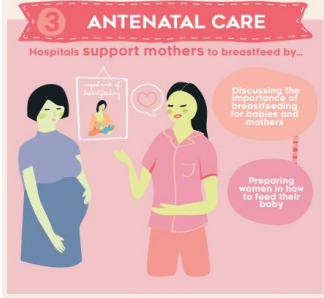


- ❖ Training staff on supporting mothers to breastfeed
- ❖ Assessing health workers' knowledge & skills
 - Anatomy of breast
 - Physiology of breast feeding
 - Practical aspects

3. Antenatal care



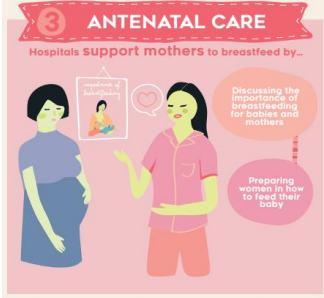
- ❖ Discussing the importance of breastfeeding
 - Health talk, display of posters, distribution of booklets. or pamphlets.
 - Discuss with pregnant women & family members too.
 - Obtain detail history of breastfeeding in previous children.
 - Nutritional & diet counselling



Baby

Advantages of breast feeding

- ❖ Complete food, species specific
- ❖ Easily digested and well absorbed
- ❖ Protects against infection
- ❖ Promotes emotion bonding
- ❖ Better brain growth



Mother

- ❖ Helps in involution of uterus
- ❖ Delays pregnancy
- ❖ Lowers risk of breast and ovarian cancer
- ❖ Decreases mother's work load

Advantages

Family & Society

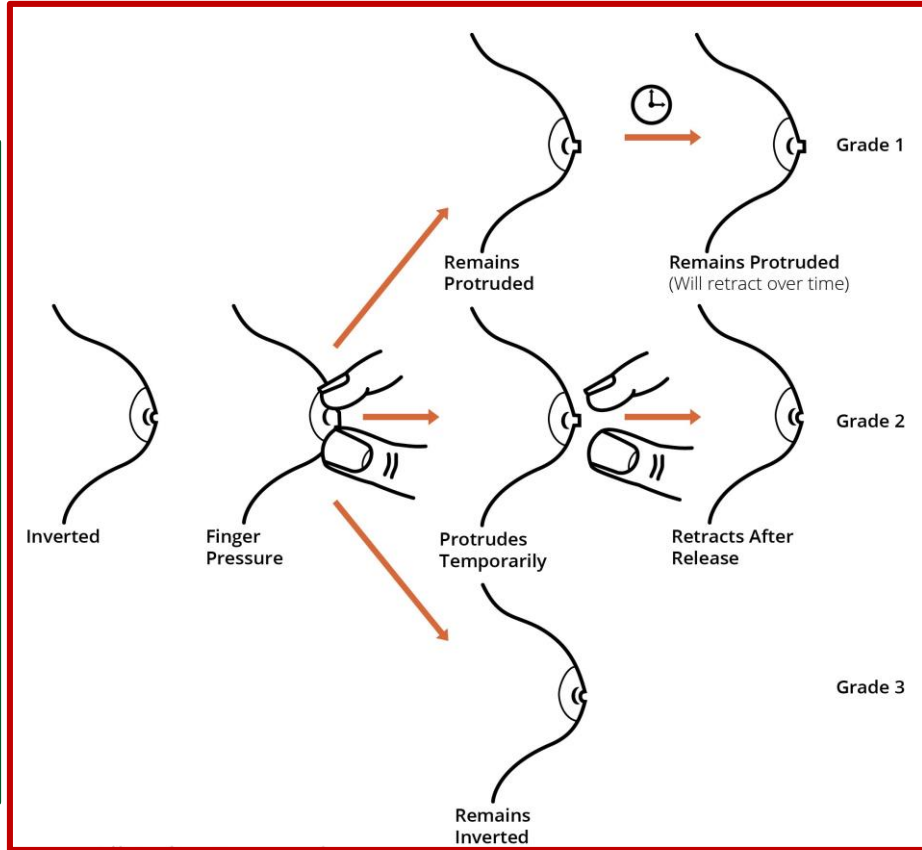
- ❖ Saves money
- ❖ Promotes family planning
- ❖ Decreases need for hospitalization
- ❖ Contributes to child survival



Examination of Breast & Nipple

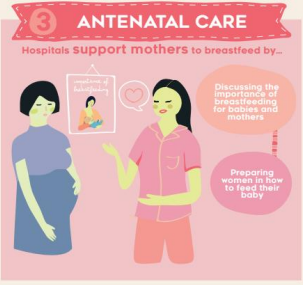


- ❖ During Third Trimester visit
- ❖ Do **Nipple Protractility test** for inverted nipple by obstetrician
- ❖ Explain Correction methods



Inverted Nipple - Correction

- ❖ Immediately after delivery
- ❖ Breast Pump
- ❖ Double syringe method
 - Two 20 ml syringe, IV set rubber connector





4. Care Right after Birth



Immediate skin to skin contact



Early breast feeding



Helping mothers to put their baby to the breast right away





5. Support mother



- ❖ Checking positioning, attachment and suckling
- ❖ Giving practical breastfeeding support
- ❖ Helping mothers with common breastfeeding problems

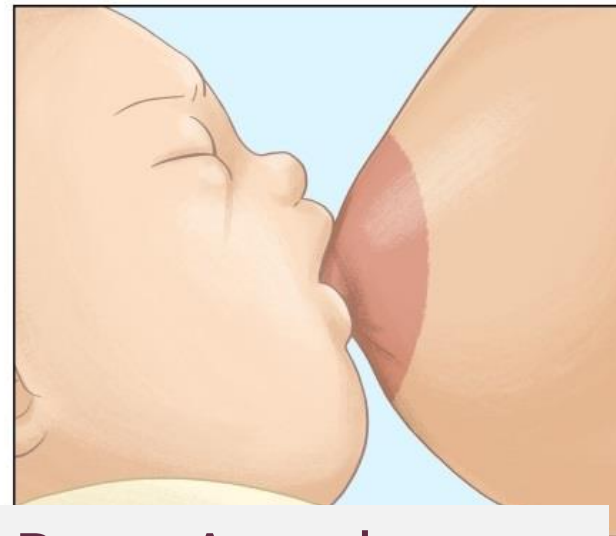


Attachment

1. Mouth should be wide open
2. Chin should be touching the breast
3. More areola should be visible above than below
4. Lower lip should be everted



Good Attachment



Poor Attachment



Positioning

A proper position should satisfy-all the 4 criteria

1. Mother and baby should face each other
2. Should be very close to each other
3. Body head and neck should be in a straight line
4. The baby should be well supported

Common Feeding Positions



Cradle Position



Cross Cradle



Foot Ball



For Twins



Side lying





Feeding problems – Not Enough Milk



- ❖ Antenatal Counselling
- ❖ Early Skin to Skin Contact
- ❖ Position, Attachment & Proper Latch on
- ❖ Encourage Direct Breast feeding – 2 hrly
- ❖ Use objective method – **LATCH SCORE**



LATCH SCORE

L Latch

A

Audible
swallowing

T

Type of
nipple

C

Comfort

H

Hold

TOTAL

L Latch

| | 0 | 1 | 2 |
|--|--|--|--|
| | Too sleepy No sustained latch or suck | Repeated attempts for latch or suck Hold nipple in mouth | Grasps breast Tongue down Lips flanged Rhythmical sucking |

LATCH SCORE



L Latch

A

Audible
swallowing

T

Type of
nipple

C

Comfort

H

Hold

TOTAL

A Audible swallowing

| 0 | 1 | 2 |
|----------|------------------------|---|
| None | A few with stimulation | Spontaneous and intermittent (<24 hrs) |



LATCH SCORE

L Latch

A

Audible
swallowing

T

Type of
nipple

C

Comfort

H

Hold

TOTAL

T Type of nipple

| | 0 | 1 | 2 |
|--|----------|------|--------------------------------|
| | Inverted | Flat | Everted (after stimulation) |



LATCH SCORE

L Latch

A

Audible
swallowing

T

Type of
nipple

C

Comfort

H

Hold

TOTAL

C Comfort

| | 0 | 1 | 2 |
|--|---|---|--------------------|
| | Engorged Cracked, bleeding, large blisters, or bruises | Filling Reddened, small blisters or bruises | Soft Non-tender |



LATCH SCORE

| |
|--------------------------------|
| L Latch |
| A Audible swallowing |
| T Type of nipple |
| C Comfort |
| H Hold |
| TOTAL |

| H Hold | | |
|---|---|---|
| 0 | 1 | 2 |
| Full assist (staff holds infant at breast) | Minimal assist (staff holds, then mother takes over) | No assist from staff Mother able to position and hold infant |





LATCH SCORE

L Latch

A

Audible
swallowing

T

Type of
nipple

C

Comfort

H

Hold

TOTAL

- ❖ **Total score less than 7** requires further monitoring and assistance
- ❖ Teach all staffs –how to do LATCH SCORE
- ❖ Keep LATCH SCORE charts in the post natal ward



6. Supplementing



- ❖ Giving only breast milk unless there are medical reasons
- ❖ Prioritizing donor human milk when a supplement is needed



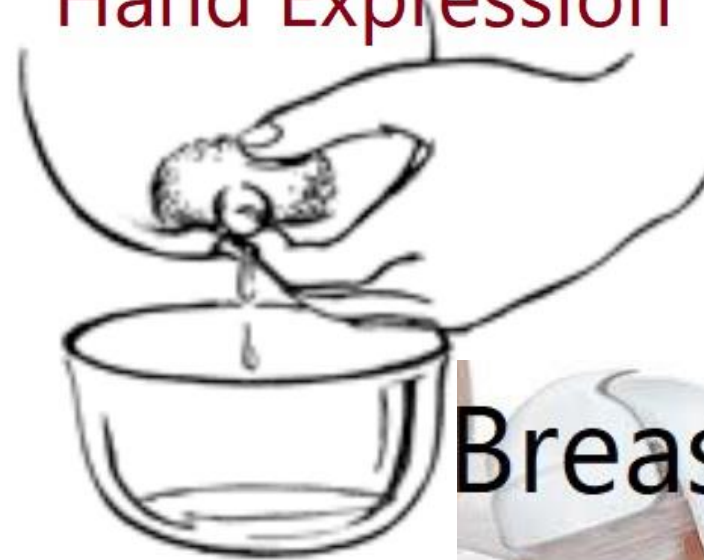
Expressed Breast Milk



Indications

- Working mothers
- Preterm / Sick baby
- Sick mother
- Local breast problems

Hand Expression



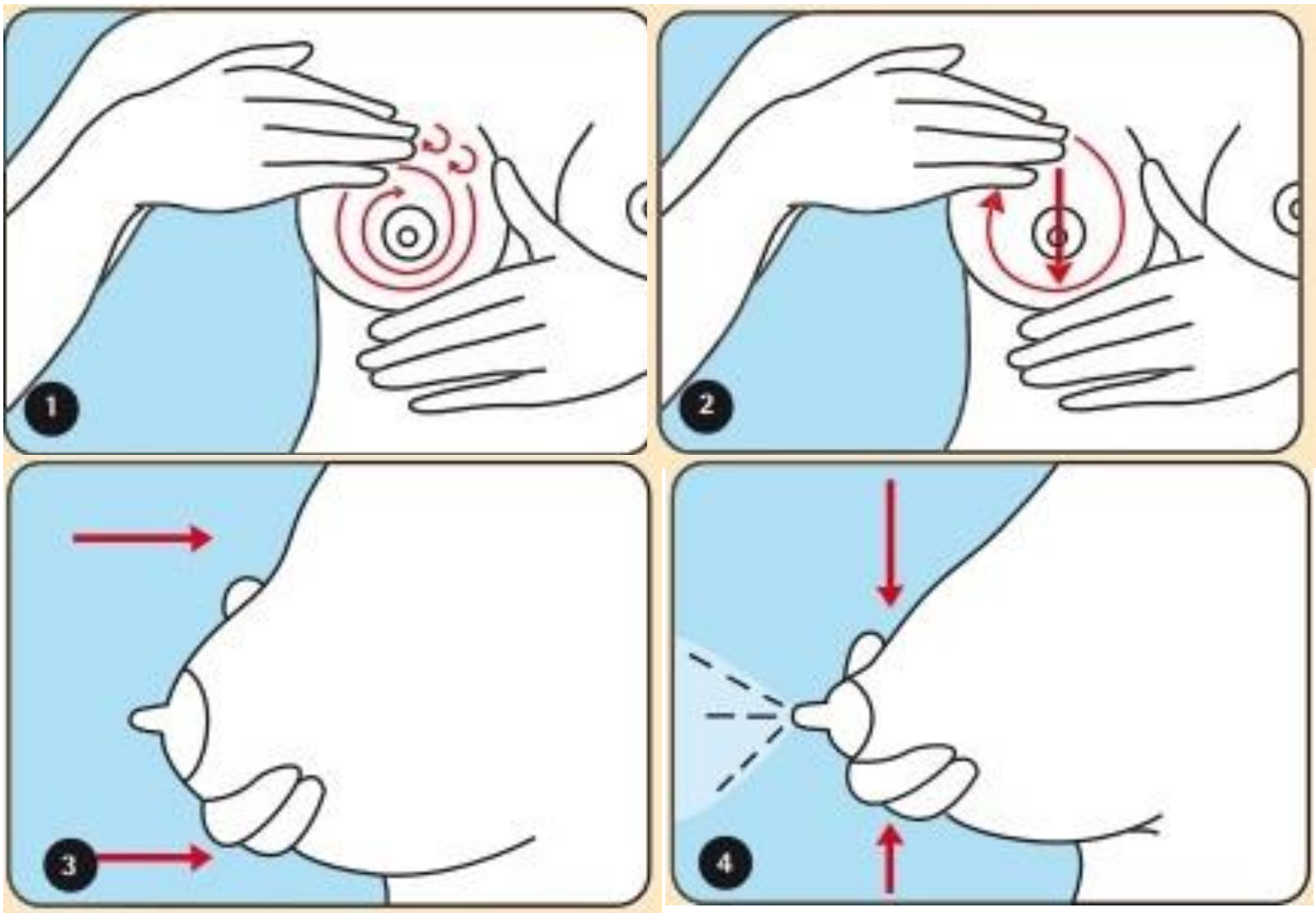
Breast Pump



6 SUPPLEMENTING
Hospitals support mothers to breastfeed by...


- Giving only breast milk unless there are medical reasons
- Prioritizing donor human milk when a supplement is needed
- Helping mothers who want to formula feed to do so safely

Technique - Hand Expression



6 SUPPLEMENTING
Hospitals support mothers to breastfeed by...


- Giving only breast milk unless there are medical reasons
- Prioritizing donor human milk when a supplement is needed
- Helping mothers who want to formula feed to do so safely



Expressed Breast Milk - Storage



Room Temperature



Upto 4 hours

Refrigerator

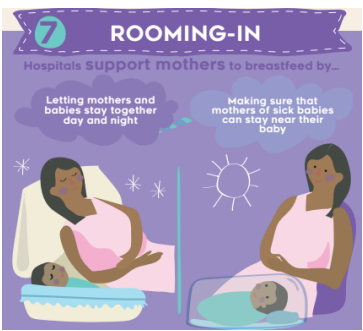


Upto 24 hours

Freezer



Upto 3- 6 months



7. Rooming-In

Rooming IN & Bedding IN

Baby

- ❖ Decreases Stress
- ❖ Allows to breast feed when hungry
- ❖ Safer



Mother

- ❖ Learn feeding cues
- ❖ Better quality sleep
- ❖ Good milk supply



8. Responsive Feeding

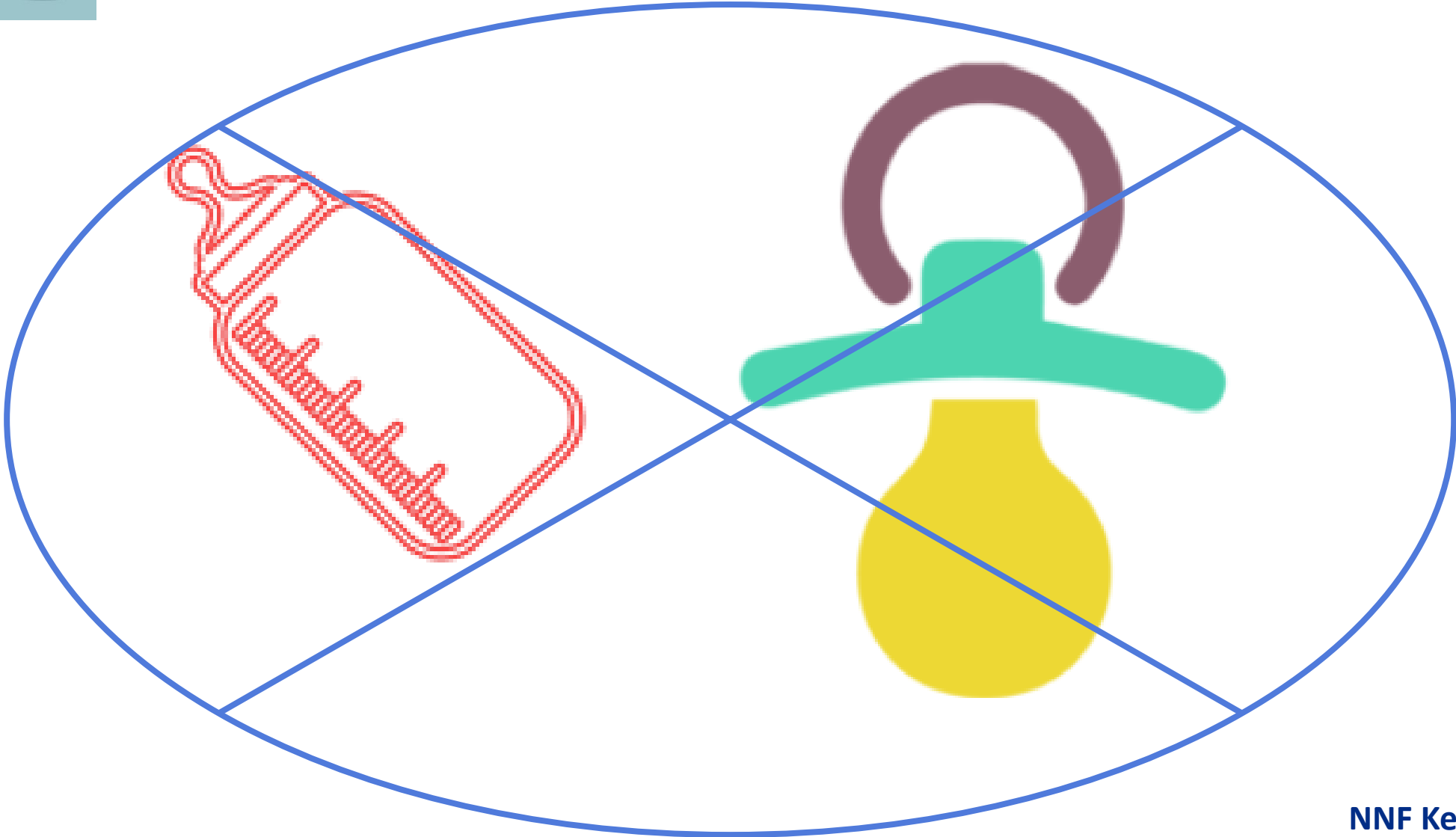
- ❖ Helping mothers know when their baby is hungry
- ❖ Not limiting breastfeeding times

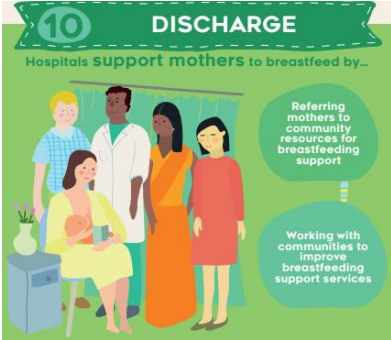
| | | |
|---|--|--|
|  <p>EARLY CUES: These mean 'I'm hungry'</p> <p>STIRRING</p> |  <p>MOUTH OPENING</p> |  <p>TURNING HEAD</p> |
|  <p>MID CUES: These mean 'I'm really hungry'</p> <p>STRETCHING</p> |  <p>PHYSICAL MOVEMENT</p> |  <p>HAND TO MOUTH</p> |
|  <p>FEED ME: These mean 'I'm really upset!'</p> <p>CRYING</p> |  <p>AGITATED</p> |  <p>TURNING RED</p> |





9. Bottles, Teats & Pacifiers





10. Discharge



- ❖ Referring mothers to community resources for breastfeeding support
- ❖ Working with communities to improve breastfeeding support services

Support breast feeding in working woman



Let's make it work!

Let's make it work!





Feeding Areas in public places



To conclude.....



Breast feeding
Foundation of Life



Thank you

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