

BACKGROUND

Exclusive Breastfeeding provides optimal nutrition and health protection for the first 6 months of life. This protection is unmatched by any formula or commercially-produced product. Exclusive breastfeeding for the first 6 months of life and breastfeeding with complementary foods from 6 months until at least 12 months is the ideal feeding for infants. Breastfeeding has health benefits for the mother, and provides a unique bond between mother and baby.

Establishing exclusive breastfeeding can come with some challenges for both new and experienced mothers. These may include breastfeeding misconceptions and clinical indications for the newborn babies. The use of human donor breast milk to facilitate a smoother transition in the first 24 – 48 hours was introduced in addition to staff education to help these mothers eventually exclusively breastfeed at home.

PURPOSE

To improve breastfeeding exclusivity in the perinatal unit at University Medical Center, Las Vegas Nevada adhering to the American Academy of Pediatrics (AAP), World Health Organization (WHO), Baby Friendly Hospital Initiative (BFHI), and American College of Obstetricians and Gynecologists (ACOG) recommendations and Healthy People 2030 breastfeeding targets. The introduction of human donor breastmilk in the unit was initiated to support attainment of exclusive breastfeeding for the first six months of life.

METHODS

- Performed journal review and research articles regarding the most current breastfeeding recommendations.
- Created and enforced breastfeeding and human donor breast milk supplementation policy that align with our objectives
- Additional lactation nurse was on boarded to help augment breastfeeding support in the peri-natal unit
- Provided education and training to medical providers and nursing staff to enhance their ability to assist breastfeeding mothers

BENEFITS OF BREASTFEEDING

BABY

- Promote bonding between the mom and the baby.
- Decrease the risk of Sudden Infant Death Syndrome
- Lower the risk of respiratory problem like asthma and lower respiratory tract infection
- Help reduce infection like otitis media, urinary tract infection, and sepsis
- Reduce the risk of Type 1 diabetes, childhood leukemia and gastrointestinal problems such as diarrhea, gastroenteritis, Crohn's Disease, and Ulcerative Colitis
- Prevent childhood obesity and eczema.

MOTHER

- Lower the risk of Type 2 diabetes, osteoporosis, and hypertension
- Decrease the risk of breast, ovarian, uterine and endometrial cancer
- Decrease insulin use for mom with diabetes
- Help to prevent postpartum bleeding



HUMAN DONOR BREASTMILK INDICATIONS:

Hyperbilirubinemia | Excessive weight loss > 10th percentile
 Delayed lactogenesis | Hypoglycemia | LBW/SGA/FGR requiring caloric supplementation

Day 1
On the first day of life, your baby's stomach is only the size of a cherry. If you were to fill the inside of the cherry, you could only fit 5-7 ml or 1/2 tsp. of liquid. In most cases this means that the small amount of breastmilk you are making is enough to feed your baby.

Day 3
On day three, your baby's stomach has grown a little bigger and is now the size of a walnut. If you were to fill the inside of the walnut, you could only fit 22-27 ml or 0.75-1 oz. of liquid inside. Your milk has also started to change from colostrum to transitional milk. Continue to breastfeed every two hours or sooner if the baby appears hungry. This will help you increase milk supply. You are doing great!

Day 5
On day five, your baby's stomach is now the size of an apricot. If you were to fill the inside of the apricot, you could only fit 45-60 ml or 1.5-2 oz. of liquid inside. You are still producing transitional milk, which will change to mature milk at 10 to 14 days after birth. Continue to breastfeed every two hours or sooner if the baby appears hungry. This will help you continue to produce milk.

Baby's Third Day
It's day three, and you are doing a great job breastfeeding. You may notice that your baby has a few wet and dirty diapers now.
 DAY 3: At least 3 wet diapers and at least 3 brown, green or yellow stools.
 DAY 4: At least 4 wet diapers and at least 3 brown, green or yellow stools.

Baby's 5th Day
It's day five, and you are doing a great job breastfeeding. Your baby has reached the age where they should have at least 6 heavy wet diapers with pale yellow or clear urine. They should also have at least 3 large, soft and seedy yellow stools. This is the average over 24 hours.

Day 7 to 3 Weeks
On day seven, your baby's stomach is now the size of an egg. If you were to fill the inside of the egg, you could only fit 85-150 ml or 2.5-5 oz. of liquid inside. Your milk will change to mature milk during this time frame. Continue to breastfeed every 2 hours or sooner if the baby appears hungry. This will help you continue to produce milk.

Call 702-383-SELF (7353) for complimentary private phone and in-office lactation consultations.

BREASTFEEDING CONTRAINDICATIONS

(CDC, 2024)

ABSOLUTE CONTRAINDICATIONS:

- Infant conditions: Classic galactosemia, a rare genetic metabolic disorder
- Maternal conditions: untreated HIV infection, or if sustained viral suppression was not achieved during pregnancy or delivery
- Human T-cell lymphotropic viral infection/Suspected or confirmed Ebola virus disease
- Maternal use of illicit drugs such as opioids, (PCP) phencyclidine, and cocaine
(use of marijuana is discouraged due to potential effect on the infant's long term neurobehavioral development)

TEMPORARY CONTRAINDICATIONS:

- Chemotherapy or recent or current use of radioactive agents
- Untreated or sputum-positive tuberculosis
- Varicella-zoster infection (chickenpox) /mpox virus infection
- Active herpetic lesions on the breasts
- Mom taking certain medications (LactMed– reference for drugs compatible with breastfeeding)

CONCLUSIONS

Exclusive breastfeeding ensures optimal growth, development, and health of newborns. Exclusive breastfeeding during the initial six months of life is best supported by establishing breastfeeding in the first 24 - 48 hours postpartum. Initiating breastfeeding education/support by our well trained staff even prior to delivery can help reduce common breastfeeding challenges and ensure a smoother transition with the support of lactation care and access to human donor breast milk if needed through their hospital stay.

Centers for Disease Control and Prevention. (2024). *Contraindications to Breastfeeding*. Retrieved from <https://www.cdc.gov/breastfeeding-special-circumstances/hcp/contraindications/index.html>

Joan Younger Meek, Lawrence Noble, Section on Breastfeeding; Policy Statement: Breastfeeding and the Use of Human Milk. *Pediatrics* July 2022; 150 (1): e2022057988. 10.1542/peds.2022-057988

