

Human Milk Insights

March 2019

The Human Milk Insights newsletter presents the latest breastfeeding topics and clinical practice solutions, addresses coding issues challenging the lactation community, features a lactation service, and announces upcoming webinars and conferences.

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FEATURED STORIES THIS MONTH

NEWS YOU CAN USE

- Human Milk and the Workplace
- Human Milk and Spanish Resources for Child Care Facilities
- Human Milk and Community Activities
- Human Milk and NICU

HUMAN MILK EDUCATION

- Human Milk Monthly Clinical Education Webinar Series
- Initiation of Lactation: At Risk Mothers and Proactive Interventions Course
- Neonatal Perspectives
- Resource for Moms

CLINICAL PEARLS IN LACTATION

- Discrimination of Breastfeeding Mothers

TOOLS YOU CAN USE

- Help for Perinatal Mood Disorders

SPOTLIGHT ON PRACTICE

- Lisa Lamadriz, MPH, RN, IBCLC



NEWS YOU CAN USE

HUMAN MILK AND THE WORKPLACE

Effectiveness of Workplace Lactation Interventions on Breastfeeding Outcomes in the United States: An Updated Systematic Review

Workplace lactation interventions increased breastfeeding initiation, duration, and exclusive breastfeeding, with greater changes observed with more available services.

<https://journals.sagepub.com/doi/abs/10.1177/0890334418765464>

Promoting Worker Well-Being through Maternal and Child Health: Breastfeeding Accommodations in the Workplace

CDC blog on the benefits to employers when providing breastfeeding accommodations and essential elements of an effective workplace program.

<https://blogs.cdc.gov/niosh-science-blog/2019/02/11/breastfeeding-work/?eType=EmailBlastContent&eld=b512d32d-0842-44f4-92af-d06e697de1cd>

HUMAN MILK AND SPANISH RESOURCES FOR CHILD CARE FACILITIES

USDA/FNS Breastfeeding Support Resources Available in Spanish

The U.S. Department of Agriculture, Food and Nutrition Service has published the Spanish version of their “Breastfeeding Babies Welcome Here” resource kit. Child and Adult Care Food Program operators can use the kit to inform families that breastfeeding is welcome at their child care site.

<https://www.fns.usda.gov/tn/breastfed-babies-welcome-here?eType=EmailBlastContent&eld=b512d32d-0842-44f4-92af-d06e697de1cd>

HUMAN MILK AND COMMUNITY ACTIVITIES

USBC’s Black History Month Tools & Resources

February was Black History Month and USBC compiled an extensive list of resources to help promote and support breastfeeding among African American women.

<http://www.usbreastfeeding.org/page/black-history-month?eType=EmailBlastContent&eld=6b8c6ff2-7db9-4a25-ae1c-555daa404252>

IBCLC Day – March 6, 2019

IBCLC Day was developed to recognize the important role of the International Board Certified Lactation Consultant and the impact each has to make a difference in the lives of families.

<https://www.ilca.org/why-ibclc/ibclc-day>

World Breastfeeding Week 2019 – “Empower Parents, Enhance Breastfeeding”

World Breastfeeding Week takes place from August 1st- August 7th, 2019 and the theme is “Empower Parents, Enhance Breastfeeding.”

<http://worldbreastfeedingweek.org/>

HUMAN MILK AND NICU

NICU Nursing Workload and Patient Outcomes

Sandy Sundquist Beauman, MSN, RNC-NIC

Sandy Beauman discusses NICU nursing workload and the subsequent patient outcomes.

<https://blog.neonatalperspectives.com/2019/02/12/nicu-nursing-workload-and-patient-outcomes/>

Preemie Breastfeeding: The Holy Grail of NICU

Jae Kim, MD, PhD

Dr. Jae Kim discusses the challenges with providing NICU infants with mother's milk and outlines several practice points to consider.

<https://blog.neonatalperspectives.com/2019/02/04/preemie-breastfeeding-the-holy-grail-of-nicu/>

HUMAN MILK EDUCATION

Human Milk Webinar

On Wednesday, March 20th, [Diane Spatz, PhD, RN-BC, FAAN](#) will be presenting [Understanding and Assessing Risk Factors Related to Establishment & Maintenance of Milk Supply](#). Complimentary registration is now open! For more information or to register, visit www.MedelaEducation.com.

Feel free to email education@medela.com for a copy of the 2019 webinar schedule.

Online Course

Learn how mothers' milk volumes are initiated, built and maintained throughout the breastfeeding journey. The normal progression of human lactation is described, along with normal infant sucking patterns. A review of lactation risk factors is presented by examining current research. Proactive interventions that can positively impact lactation success are included in the presentation. Click on the link below and use promo code **HMIWF3NJZ** to register for the [Initiation of Lactation: At Risk Mothers and Proactive Interventions](#) course.

Neonatal Perspectives

Neonatal perspectives is a blog for NICU professionals that features clinical information from neonatal consultants,

industry news and popular topics. Click [here](#) to read the latest blogs.

Education Tools

Medela offers a variety of tools that healthcare professionals can share to assist mothers with their breastfeeding journey while helping them meet their breastfeeding goals.

<http://www.medelabreastfeedingus.com/for-professionals/healthcare-professional-information>

CLINICAL PEARLS IN LACTATION

This column is for lactation practitioners to share clinical challenges and successes, observations and pearls with colleagues. To share a clinical pearl, [submit it here](#). If your submission is selected for publication in a future issue of Human Milk Insights, you will receive a \$25.00 VISA gift card.

Discrimination Against Breastfeeding Mothers

Last month in Human Milk Insights, we reported on women who worked in a prison and were forced to smuggle their breast pump parts through security screenings in order to pump breast milk for their babies. Being subjected to verbal and other forms of abuse and discrimination are not isolated incidents in the workforce. Unfortunately, many mothers are forced to choose between breastfeeding their babies and keeping their jobs.

The Center for Worklife Law at the University of California, Hastings College of the Law, released a report, “Exposed: Discrimination Against Breastfeeding Workers.” This report illuminates the fact that many breastfeeding women across the US are subjected to discrimination once they return to work and try to pump while at the workplace. Women are denied pumping breaks and privacy; some are even fired. The report indicates that 75% of the discrimination resulted in economic loss and 66% resulted in job loss.

Part I of this report documents patterns of discrimination against breastfeeding workers, including the serious health and economic threats they face. Breastfeeding workers are exposed to infections, illness, early weaning, sexual harassment, and job loss – all for trying to feed their babies and take care of their own health needs. We know that mothers must pump while at work or their milk supplies will suffer.

Lactation discrimination in the workplace takes many forms including:

- Denying pumping break requests from employees
- Firing them just for asking
- Refusing to provide a private place for women to pump, thereby subjecting them to unwanted exposure of their breasts.
- Instructing women to pump in the bathroom or in other unsanitary conditions.
- Not protecting women from rude comments from co-workers or managers

Part II of this report reviews current laws in place that are meant to protect breastfeeding workers. However, these laws are incomplete and unfortunately leave millions of breastfeeding employees exposed to discrimination.

Due to a technicality, over 25% of female workers are not covered by the federal Break Time for Nursing Mothers. Over 9 million women are excluded from coverage. These women range from registered nurses and kindergarten teachers to farm workers and police officers.

Even for employees who are covered by the federal labor law, technicalities make the Break Time for Nursing Mothers law practically unenforceable. Widespread noncompliance exists. Some states and other entities have stepped in to close some of the gaps, but there is still a lot of work to be done.

Part III of this report presents solutions. “If we are to move toward a society where employers do not prevent women from breastfeeding their babies, where job obligations do not negatively impact women’s health, and where women are on equal footing with men at work, we must update existing laws or enact new ones. This report concludes with a discussion of policy solutions that hold the promise of removing workplace barriers to breastfeeding. Enacting these policies would be a critical step toward achieving a reality where new parents have a meaningful choice to continue breastfeeding regardless of class, race, or geography.”

This report is very interesting and is available for download on the Pregnant at Work website: www.pregnantatwork.org. Pregnant at Work is an online resource center that “provides tools and educational materials for pregnant and breastfeeding women, the healthcare professionals who treat them, and the attorneys that represent them.” This website also has useful materials for companies and human resource professionals that can assist in navigating the many legal and practical considerations around accommodations needed for pregnant and breastfeeding workers. Definitely check it out.

A copy of this report and other helpful information can be downloaded from the Pregnant at Work website: www.pregnantatwork.org

TOOLS YOU CAN USE

Help for Perinatal Mood Disorders

In last month's Human Milk Insights newsletter and in the Medela Webinar, we addressed the importance of caring for mothers in the weeks and months after giving birth – sometimes referred to as the 4th trimester.

Did you know that 1 in 7 moms and 1 in 10 dads suffer from postpartum depression?

Depression and anxiety disorders are more common than most people think. Perinatal depression is the most common complication of childbirth. Many of the breastfeeding mothers we work with are suffering in silence. We can help mothers by preparing them while pregnant or at least before discharge from the hospital, and by giving them resources they can turn to for help.

Here's info for a handout to give mothers before they leave the hospital. Thanks to www.Terrasplaceaz.com for this list of:

Quick Tips for Emotional Wellness During Pregnancy and After Birth

Think **SNOWBALL!!!**

Sleep: Longer stretches of sleep regulate mood. Aim for a 4-6 hour stretch as soon as baby can go longer between feedings. And try to nap when the baby naps.

Nutrition: Avoid sweets, alcohol and processed, empty-calorie foods, while incorporating protein at each snack or meal. Ask a friend or your partner to prepare easy-grab healthy foods to snack on throughout the day.

Omega-3's: Proven to prevent and reduce anxiety and depletion in new moms, up to 3000 mg daily of combined EPA (eicosapentaenoic acid) and DHA (docosahexaenoic acid) are recommended.

Walk: Daily, gentle exercise – yoga, stretching and walking improve mood.

Breaks: Two hours, 3 times a week away from children for self-care is ideal, but at least try to get breaks whenever you can. You can't pour from an empty vessel.

Adult Time: Spend some time with safe people to share your feelings with on a regular basis. Coffee with other mothers may be a good start.

Liquids: Aim to drink 64 oz of water per day. Dehydration can trigger anxiety and brain fog.

Laughter: Watch a funny show, talk to a good friend, tickle children, make time for fun. If you have a hard time accessing joy and laughter, seek counseling. Suffering in silence is not good for anybody. You deserve to be well.

Another wonderful resource that can be used to find local assistance is Postpartum Support International (PSI). This is an organization whose purpose is to increase awareness among public and professional communities about the emotional changes that women experience during pregnancy and postpartum.

PSI disseminates information and resources through its volunteer coordinators, and annual conference. Its goal is to provide current information, resources, education and to advocate for further research and legislation to support perinatal mental health.

PSI Helpline: 1-800-944-4773 (4PPD) – Mothers and professionals can call to get basic information, support and resources.

The PSI website, www.postpartum.net, lists a number of resources that a mother or provider can use to find a local support coordinator who will help with locating resources in the area. The coordinator can assist with searching for a therapist who has experience and expertise in treating perinatal mood disorders, or locating a provider who is knowledgeable in prescribing medications during pregnancy and lactation, or looking for a local peer support group.

Fathers are often overlooked in the experience of having a new baby. They are expected to be strong and protectors of the family, yet they often suffer from exhaustion, lack of sleep, and the pressures of having to provide for the family. Fathers, and the whole family are affected by postpartum depression. These two websites are specifically dedicated to dads and families:

www.Postpartumdads.org.

www.Postpartummen.com

SPOTLIGHT ON PRACTICE

This column is for lactation practitioners and facilities who wish to acknowledge the work of others. We invite you to submit suggested practitioners or facilities you would like to spotlight. If you have a suggestion, email education@medela.com.

*This month we are spotlighting Lisa Lamadriz, MPH, RN, IBCLC
Lebanon, NH*

Nestled in the scenic mountains of New Hampshire is Dartmouth Hitchcock Medical Center, (DHMC) the workplace setting for Lisa Lamadriz since 2001. Currently a Clinical Nurse and Lactation Coordinator at the facility, Lisa has been instrumental in helping to insure evidence-based lactation practices are entrenched in the care of breastfeeding moms and infants.

Lisa grew up in Kentucky but found her way to New Hampshire after working as a traveling nurse both in Kentucky and Florida. She and her husband were searching for a quiet, rural life that spoke to their love of nature and the outdoors. Lisa began working as a perinatal nurse in a small New Hampshire facility but, after several years, found herself longing for the challenging environment of the NICU, a work setting she was first exposed to while working in Florida. In 2001, Lisa finally realized her dream of working as a NICU bedside clinician at DHMC even though it would take her 1 ½ hours to commute to work - one way!

Lisa recognized a need to augment her clinical lactation knowledge and skills and became certified as an IBCLC in 1999 while working as a labor and delivery nurse. When nursing leadership recognized the need for continuous lactation support for families within the Intensive Care Nursery, they sought Lisa's skill and expertise. Lisa pioneered the LC position in the Intensive Care Nursery while cementing DHMC's commitment to lactation support. Presently, in the role of Lactation Coordinator, Lisa shares lactation support with five other lactation consultants.

Lisa spearheaded the efforts that led to DHMC achieving their initial Baby Friendly designation in 2012 and re-designation in 2017. In addition to educating staff about best breastfeeding practices, Lisa and her lactation colleagues see all pregnant women delivering at the hospital at 32 weeks gestation to discuss breastfeeding. Small amounts of breastfeeding education are also provided by staff at each prenatal visit.

Lisa has served as the Vice-Chair to the New Hampshire Breastfeeding Task Force, founded and Chaired the New Hampshire-Vermont Lactation Consortium, has been an active participant in collaborating with multiple New Hampshire hospitals to achieve the Baby Friendly designation, presented at several education conferences in New Hampshire and Maine, and presented a poster on YIN Quality Improvement Initiative at a New Mexico nursing conference. In 2017, Lisa earned the degree of Master of Public Health from the Boston University School of Public Health.

Lisa and her husband of 28 years have been sweethearts since they met over 33 years ago in Florida. By locating to New Hampshire, they were able to secure employment opportunities and live a laid-back lifestyle while raising their family. They have two adult children; an opera singer daughter who lives in Manhattan and a son who is studying culinary arts and lives close by. Lisa shares her children's love of music and cooking, reads nursing research, enjoys hiking with

her husband and has a passion for gardening. Under Lisa's direction and commitment to maintain evidence-based lactation care at Dartmouth Hitchcock Medical Center, the facility has witnessed much growth. She acknowledges families' needs for expert lactation support in rural communities and is grateful for the Medical Center's commitment to quality lactation services. The community is grateful to Lisa and her team of lactation colleagues for their dedication to assist families in meeting their lactation goals.