BREASTFEEDING SICK BABIES

The conference on
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KM SHARING AND KNOWLEDGE BUILDING

Coordinator:
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Diane L. Spatz
Step 2: Initiation and Maintenance of Milk Supply

- Understanding Physiology of Lactogenesis and breast milk ejection by early pumping as well as feedback inhibitor of lactation.
- The success of adequate breast milk supply included:
  - First time of breast milk expression
  - Hospital grade electronic breast pump vs. manual expression within 5 days of opportunity
  - Breast milk supply > 500 ml per day
How to get adequate breast milk

- Administration of Galactogogues; Domperidone is recommended when low milk supply (< 500 ml after 2 weeks)
- Breast milk expression 8 times per day
- Effective Hospital Policy
- Record and reassessment daily output
- Establishment of lactation team in NICUs
- Acceptable prolonged Kangaroo Mother Care, nonnutritive sucking and effectiveness of transition to breast.
- Healthy mothers and adequate micronutrient supply.
Step 5: Skin to skin contact

- The early skin to skin contact is least likely for preterm babies.
- The proper Kangaroo Mother Care is needed as early as possible, even in intubated neonates.
- At least 1 hour per day by intermittent application.
- The KMC is highly beneficial to the vulnerable babies in NICUs i.e protection from infection, thermoregulation and neurodevelopment.
Step 6: Non-Nutritive Sucking

- It should be started at the same time with KMC while the breast is empty or poor coordination of sucking and swallowing.
- It is very helpful for GI enzyme secretion, heart rate regulation, neurological organization, decreased duration of oral tube feeding, increment of breast milk supply and exclusive breast milk feeding on discharge from hospital.
- It is possible as early as 28 weeks or more of gestation.
- Effective counseling and assessment are needed during the procedure, especially oxygen saturation and early signs of respiratory distress.
Step 9: Preparation for discharge

- Mothers should be classified into groups for special preparation before discharge, for example, Teen aged mothers and working mothers.
- Assessment of baby readiness; normal body temperature in room temp, weight gain 20-30 gm/day, feeding well at breast etc.
- Mother can recognize hunger cue, problem solving during transition from hospital to home care.
Step 9: Preparation for discharge

- Discharge planning with mothers and family can result in smooth transition and follow up evaluation for special health care, especially hearing test, developmental assessment and growth status.
- Mothers need more familiar with proper neonatal cares and breastfeeding technic as well as evaluation of adequate breast milk transfer.
- The facility should provide maternal beds closed to the babies for rooming in before discharge.
Step 10: Appropriate Follow up

- Baby assessment;
- Nutritional assessment with proper goal and early detection of suboptimal growth
- Exclusive breastfeeding and adequate breast milk supply
- Appropriate assessment of neurodevelopmental outcome and early stimulation if needed
- Evaluation of enriched formula and special nutrient supplementation, especially iron and vitamin D. Always ask mothers to consult any problems by telephone contact in the NICUs
POSTER ROUND: HOSPITAL IMPLEMENTATION AND EXPERIENCE

The Spatz 10 steps system has been successfully implemented in 13 hospitals.
Nationwide Implementation and training of KMC practices

- The implementation of breastfeeding has been integrated through various national projects.
- The provision of Kangaroo Mother Care training is well accepted in many regional hospitals.
- The KMC can create the Family Centered Care successfully both in normal situation and during the disaster.
- High yield of Human milk Banking is very important to support children during the serious disasters in Philippines.
SUPPORTING THE BREASTFEEDING MOTHER: THE SKILL AND GUIDELINE WE BRING TO THE CONSULTATION

Karolyn Vaughan (Australia)
The Success of Breastfeeding

- Parental education and support is the one of key success.
- Knowledge management needs the intensive training through clinical practices.
- Qualities professional need further training, especially in counseling approach and problem solving for the mothers and their families.
- Listening and responsive behavior were emphasized intensively in this presentation.
TEAM BUILDING: SUCCESSFUL STRATEGY

Diane L Spatz
Team Building is one of the critical success in breastfeeding

• Impact of shared vision
• Encouragement the heart of your team
• Always cerebration of team success
• Challenge the details of the working process
• Search for the team opportunities
• Create values of the practices
• Thank you for all as frequent as possible
Essentials for the Job

- Clear Standards
- Expectation for the best
- Pay attention to all
- Create environment for work
- Tell the story
- Cerebrate together
- Set the samples and
- Open the thank card