



Lactation Education Resources

NEWSLETTER

OCTOBER 2018

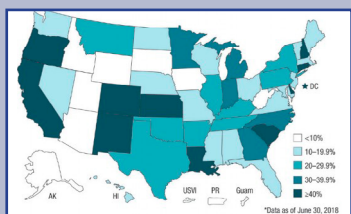
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October 2018

CDC Releases 2018 Breastfeeding Report Card

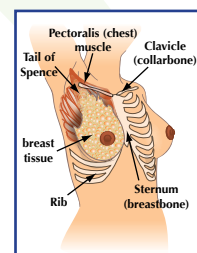
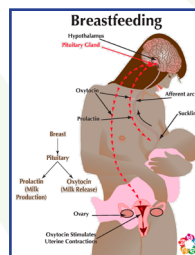
Check out the latest breastfeeding report card published by the CDC. While the breastfeeding initiation rates continue to rise, 60% of mothers do not meet their breastfeeding goals, suggesting that mothers are not receiving the support they need.



[Click here to read the report.](#)

Original Educational Artwork for Sale

Lactation Education Resources proudly announces an update for our collection of illustrated renderings of breast anatomy, physiology of lactation, latch and more. Selection includes a variety of skin and hair types for wide use in education and professional settings.



[Click here to view the images.](#)

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Featured Course : Breastfeeding as a non-Birthing Parent

Instructor: Alyssa Schnell (MS IBCLC)

This conference includes 3 lessons, Breastfeeding Without Birthing, Proficient Pumper and Tool for Supplementation. These cutting-edge lessons are geared toward the non-birthing parent whether by adoption, surrogacy or fostering. This conference will enlighten both the new or budding IBCLC as well as a more tenured IBCLC.

Cost \$45.00. 4 L-CERPs, 4 Nursing Contact Hours and 4 CPE's Learn more by [clicking here.](#)

Training for the Baby Friendly Hospital Initiative

*Lactation Education Resources
offers online training for
hospitals seeking BFHI designation.*

EASY TO USE Each lesson is recorded in webcast format so the learner sees the power point slides and hears the speaker's voice. Studies on comprehension and retention of new information show that both audio and visual components are most effective. Our lessons contain both and are rich with photos, graphics and links to web resources.

FLEXIBLE The webinar format allows access to the training program 24/7/365. Each lesson is 20-45 minutes in length so students can access the materials when they have a short window of time, or can do several lessons when they have a longer period of time to devote to it.

AFFORDABLE Unlimited usage contracts are available for large hospitals or hospital systems.



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Visit our website and sign up for a [FREE TRIAL PREVIEW](#)
or download a [FULL PROPOSAL](#)

Free Course Available on WHO Code for Breastmilk Substitutes

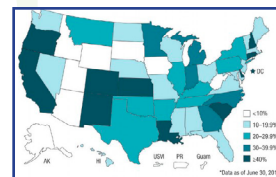
The International Code of the Marketing of Breastmilk Substitutes from the World Health Organization (WHO code) outlines critical protections against predatory marketing of breast-milk substitutes. There is a free, comprehensive introductory course on the International Code available from UNICEF.

Use this link for more info:

<https://agora.unicef.org/course/info.php?id=12360>

Baby Friendly Hospital Numbers Continue to Grow!

Earlier this summer, Baby-Friendly USA announced that more than 1 million babies are now born each year in Baby-Friendly designated facilities in the US. That is more than 1 out of every 4 babies born in this country each year, and more than the total number of babies born each year in many other major countries.



To read the full story, [click here.](#)

Human Milk Initiative Educational Videos and Handouts

The Neonatal Quality Improvement Collaborative of Massachusetts has created family education materials focused on breastfeeding support for preterm infants in the NICU. These were created with input from families, IBCLCs, nurses, and physicians. The materials have been incredibly well-received by families and providers. The materials are free for use!

Human Milk Videos: 5 videos in English and 5 videos in Spanish, that are 1-3 minutes long, and address key breastfeeding support topics. The videos portray the perspectives of NICU families and are both educational and motivational. The videos are designed to be easily seen on a phone or tablet directly at the bedside.

Human Milk Written Materials: 4 educational hand-outs on key breastfeeding support topics. To ensure that the materials are useful for as many families as possible, they have been translated into 9 languages and they are written at a 6th grade reading level. The materials were translated and back translated to ensure accuracy of all messages.

These are available at www.neoqicma.org

Resources for Local Breastfeeding Support Programs

The National Association for County and City Health Officials (NACCHO) has launched a webpage for their Breastfeeding Project. The page includes news about the breastfeeding project, upcoming and past webinars, and capacity briefs on supporting breastfeeding in communities.

[Click here](#) for more information.



Nursing Pillows - the Pros and Cons

Nursing pillows assist in the position, comfort and latch of babies and most pillows fall into three basic categories. No research really exists to promote a specific type, so it really is a personal decision which type to use.

The most common is the classic 'medium-sized' nursing pillow: round and shaped as a semi-circle (Boppy, for example). Advantages: supports the parent and baby in all common breastfeeding positions and can allow relief of pressure from the parent's hand, arms, back and neck. Disadvantages: tend to be round and soft, which could lead to a baby sliding between a crevice. Alternatives: regular bed pillow.

There are also larger nursing pillows that strap around the parent's body (like the My Breast Friend). These are normally flat in the place where the baby would lay, which is a huge advantage because it decreases the chance of the baby slipping in between any crevices. However, these straps do not fit all body types and the pillow straps can become useless. Alternative: couch cushion.

Lastly are travel-sized pillows (think of the newer littlebeam nursing pillow, created by an IBCLC). These pillows are great for smaller living spaces, and as firm as the larger, flat-sided pillows. These pillows are also perfect for traveling due to its small shape. A disadvantage of these types of pillows is that they may be too small and curved for parent's looking for something the baby can fully lay onto. Alternative: smaller couch pillows (just be sure that the couch pillows do not have embellishments that could pose a choking hazard.)

Information for breastfeeding families

Breastfeeding After a Cesarean Delivery



Almost 1/3 of babies are born by cesarean in the U.S. Whether your cesarean was planned or an urgent situation, it can make initiating breastfeeding a bit more difficult. It is major surgery, so your body will need time to recover. Please do not feel that you have “failed” or did anything to contribute to the surgery. The important thing is that your baby is healthy! Be flexible to meet your baby’s needs. There is no reason that your surgery will prevent you from breastfeeding successfully and for as long as you would like.

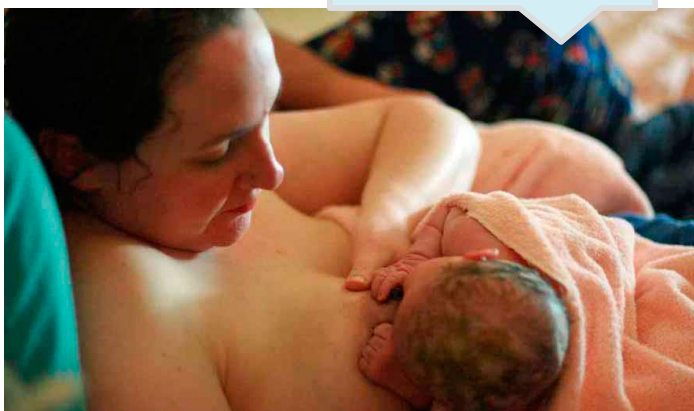
Breastfeed right after delivery

You can breastfeed in the recovery area. Your husband/partner can hold your baby skin to skin until your surgery is completed. Studies show that babies feed better if they have been held skin to skin uninterrupted until the first feeding.

In some hospitals your baby can enjoy skin to skin while you are still in the operating room and your surgery is ending. Then your baby can begin breastfeeding when he is ready. Ask, as soon as you know about your surgery, when breastfeeding can begin.

Discuss the options of general versus regional anesthesia before surgery. Often in elective cesareans, regional anesthesia is an option and mothers are able to breastfeed sooner. Even if general anesthesia is used and putting the baby to the breast is delayed, you can make up for lost time once you are together.

Baby “on top,” across moms body, feet positioned away from your incision



Recovery

The hospital stay will be longer after a cesarean than after a vaginal delivery. Since you will be recovering from surgery as well as learning how to care for your new baby, it makes sense to take it easy, limit visitors, get as much rest as possible and take advantage of family members and friends who want to help. Take the pain medication that is offered to you in the hospital and at home. These medications do pass through breastmilk, but in very small quantities. Keep yourself comfortable. Your recovery will be faster.

Your milk may be a bit slower to “come in” due to the surgery. Feed frequently (at least 8-12 times each day) and assure that your baby is feeding effectively.

Positioning

Find a position that is comfortable for you to nurse. It may be a football hold, or a “baby on top” position with his legs off to the side so they are not resting on your incision. Tuck pillows or blankets in wherever you need a little support. See the handouts on positioning your baby.

Football hold with blanket for wrist support





Lactation Education Resources

*Lactation Management Training:
From Novice to Expert*

Contact us!

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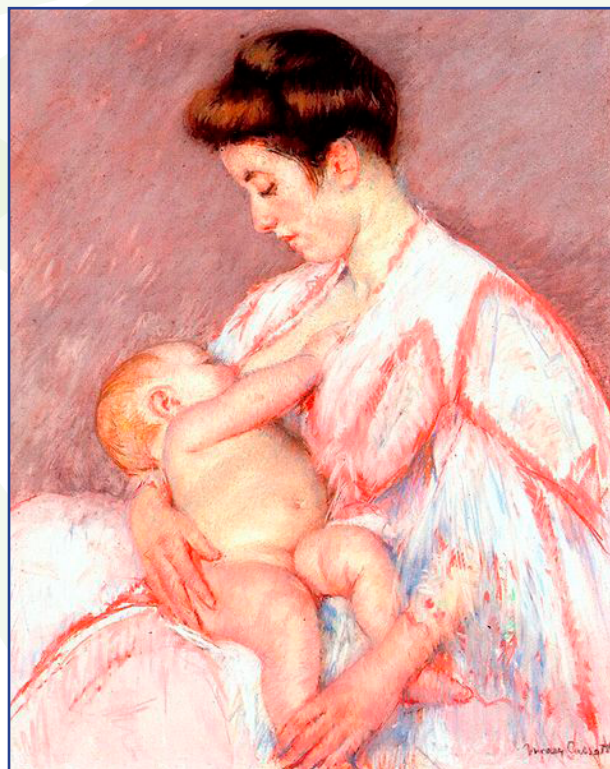
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**Want to be a LC but not sure where to start?
These YouTube videos will help!**

IBLCE Overview

https://youtu.be/90nhHBTb_ME

Pathway 1

<https://youtu.be/oUV1dtpa97Y>

Pathway 3

<https://youtu.be/eOT1AEcj8x4>

Internships

<https://youtu.be/N3hWU4QUrDQ>