



Lactation Education Resources

NEWSLETTER

DECEMBER 2017

LactationTraining.com

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December 2017



Santa's Helper!

We have holiday gift suggestions for the lactation consultants and aspiring lactation consultants in your life.

Purchase courses, gift certificates and books just in time for Christmas!

[Click here for useful gifts!](#)



Are you re-upping?

Re-certifying as a IBCLC or CBS?

We have classes for you!
Individual classes, bundles of classes and ethics CERP's.

<https://www.lactationtraining.com/recertification>

Re-designation for Baby-Friendly Hospitals

Review the important points in this quick review of topics assessors are likely to question.

<http://www.firstlatch.net/our-courses/bfhi-add-in-courses>

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HAPPY HOLIDAYS!



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Featured Course : General Education Package

Lactation Education Resources offers the general education courses required by the IBLCE. Get all of your requirements covered in one place!

<http://www.lactationtraining.com/iblce-additional-general-education-package>

The First 1,000 Days:

Listening to America's Mothers

Read the summary from interviews with 60 mothers across the US about breastfeeding, nutrition, obesity and diet during their infants first 1,000 days.

Includes a Snapshot of the First 1,000 Days, 10 Wins for the Next 1,000 Days and Nourishing America's future.

<https://thousanddays.org/resource/listening-to-americas-mothers/>



Free Parent Handouts

A variety of handouts are available in English, Spanish, Chinese, Arabic and Vietnamese.

Several new handouts have been translated into Chinese. All free for you to use with your patients.

<https://www.lactationtraining.com/resources/educational-materials/handouts-parents>

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.



www.FirstLatch.net

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



Marijuana Use During Pregnancy and Lactation

An increasing number of pregnant and lactating mothers are using marijuana, and this raises many questions about its safety for the fetus and newborn. There is little actual research, and what was done years ago may be irrelevant because of the enhanced potency of marijuana being sold today.

The American College of Obstetricians and Gynecologists released a statement on marijuana use in 2017. View it by clicking [here](#).

- Before pregnancy and in early pregnancy, all women should be asked about their use of tobacco, alcohol, and other drugs, including marijuana and other medications used for nonmedical reasons.
- Women reporting marijuana use should be counseled about concerns regarding potential adverse health consequences of continued use during pregnancy.
- Women who are pregnant or contemplating pregnancy should be encouraged to discontinue marijuana use.
- Pregnant women or women contemplating pregnancy should be encouraged to discontinue use of marijuana for medicinal purposes in favor of an alternative therapy for which there are better pregnancy-specific safety data.
- There are insufficient data to evaluate the effects of marijuana use on infants during lactation and breastfeeding, and in the absence of such data, marijuana use is discouraged.

The Academy of Breastfeeding Medicine also has a section on marijuana in this Clinical Protocol from 2015. View it by clicking [here](#).

Key points:

- D9-Tetrahydrocannabinol (THC), the main compound in marijuana, is present in human milk up to eight times that of maternal plasma levels, and metabolites are found in infant feces, indicating that THC is absorbed and metabolized by the infant.
- THC has a long half-life of 25-27 hours and stays positive in urine for 2-3 weeks.
- Exposure to second hand marijuana smoke is associated with a 2-fold risk of SIDS
- Exposure to cannabinoids during periods of development of the central nervous system can result in subtle and long-lasting alterations in even low to moderate doses.
- There is the potential for legal risks in many jurisdictions

Recommendations:

Data are not convincing that marijuana use should be completely avoided during lactation, however, in light of the limited research on use during pregnancy and limited research on effects to newborns, mothers should be advised to avoid, or limit, marijuana use during lactation.

- Counsel mothers to avoid use of marijuana while lactating and avoid direct exposure to smoke
- Advise mothers with a positive urine screen to discontinue exposure while breastfeeding
- Consider the risk: benefit ratio when advising a breastfeeding mother using marijuana for medical purposes.
- Consider the risk: benefit ratio when advising mothers who regularly use marijuana to not breastfeed

Newly Revised and Updated Courses

Maternal Infections

by Susan Hatcher RN BSN IBCLC

Learn the latest about effects of disease and treatment on the breastfeeding infant. Included are influenza, hepatitis, cytomegalovirus, herpes, tuberculosis, hepatitis, STD's and HIV on the breastfeeding dyad.

[Click here](#) to learn more.

Legal and Ethical Concerns for the IBCLC

by Liz Brooks JD IBCLC FILCA

Liz will update you on the basic principles of law related to lactation consulting as well as how to practice ethically as a lactation consultant.

[Click here](#) to learn more.

LER Lessons are Mobile Friendly!

View your lessons on your desktop computer, lap top computer, tablet, smart phone. Anywhere, anytime!

Why Did You Become an LC?

Become a guest blogger and inspire the next generation of Lactation Consultants. Write a 100 word essay on what influenced you or what experiences you had that motivated you to become a lactation consultant. Tell us about your journey.

Submit your story here.

<https://www.lactationtraining.com/our-blog>

Information for breastfeeding families

Tongue Tie



Tongue tie, also called ankyloglossia, is when your infant's tongue is unable to move in normal patterns due to a small band of tissue (frenulum) tying it to the floor of his mouth. Tongue tie is a congenital condition of unknown cause. However, it does run in certain families. Although there is controversy about the significance of this condition, mothers who breastfeed may run into difficulties that can be so severe it limits the duration of breastfeeding. If you experience breastfeeding problems, first see a lactation consultant to determine if your issues can be remedied by advice on positioning and latch-on or other feeding techniques; then, see a provider who is experienced in diagnosing and treating infants with tongue tie (pediatric ENT, pediatric dentist, pediatrician, or oral surgeon).

Symptoms you may notice:

- ✓ Sore nipples that occur quickly
- ✓ Inability of the baby to latch-on to the breast or to stay attached to the breast
- ✓ Infant weight loss or inability to gain weight
- ✓ Reflux and/or colic
- ✓ Heart shaped tongue
- ✓ Blanching of the tongue when the frenulum is stretched
- ✓ Infant cannot stick tongue out over lower gums or move tongue side to side to follow your finger in their mouth
- ✓ Speech may be affected as child begins to speak
- ✓ Gap between lower or upper front teeth
- ✓ Dental carries may occur when child gets teeth because his tongue cannot clean the teeth normally
- ✓ Difficulty licking lips, licking a sucker or ice cream, kissing or playing a wind instrument.

Treatment options:

- **Frenotomy**
This is a simple snip of the frenulum that can be done while your baby is in the hospital or in your physician's office. There is usually minimal bleeding and the baby can breastfeed immediately after the procedure.
- **Frenuloplasty**
This is a more extensive procedure for a more severe tongue tie and may require anesthesia and stitches.
- **Tongue exercises**
If your infant has a "clipping," exercises are often recommended to keep the area from healing closed and to prevent scar tissue. With your clean finger, lift the tongue on both sides and gently massage the "white area" several times per day. Encourage your infant to stick his tongue out to mimic you.
- **Do nothing**
Some families may choose a "wait and see" approach to see if the tongue will grow and the frenulum will stretch over time. Get help from a lactation consultant for breastfeeding problems. It is possible that some of the conditions on the symptoms list will occur in the older child.

For additional information go to:
<https://breastfeedingusa.org/content/article/tell-me-about-tongue-ties>



Lactation Education Resources

Lactation Management Training: From Novice to Expert

Contact us!

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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>