



Lactation Education Resources

NEWSLETTER JANUARY 2020

Spanish Handouts

LER thanks Andrea Inchaurredo, midwife and IBCLC, for translating ten of our handouts into Spanish, including this month's featured handout, which we are providing for the first time in Spanish in our newsletter.

Andrea will be translating more handouts for us in the future, so keep an eye on our Spanish handouts for new ones to become available.

CME Credits Are Here!

Are you a provider who has been looking to become a lactation consultant but wished you could obtain CME credits at the same time?

The CME credit versions of our courses are ready. Click [here](#) to see our courses granting CME credits.

Contents

Spanish Handouts	1
CME's	1
New Year's Resolutions	1
Featured Course	2
<i>Obesity and Lactation</i>	
Training for BFHI	2
Baby Friendly USA Update	3
BFHI and SUID	3
Changes at LER	3
Free Handout	4
<i>Colostrum First--In Spanish</i>	
Where to Find LER Next	5
Where to Start	5
Contact Us	5



Is This the Year You Become an IBCLC?

Have you wanted to become a board certified lactation consultant but haven't taken the plunge?

Make IBCLC certification your New Year's resolution this year, and LER will help you reach your goals!

Click [here](#) for our lactation training-courses.

Lactation Education Resources
Specialists in online lactation support training

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FEATURED COURSE

Obesity and Lactation

Marion "Lou" Lamb RN MS IBCLC begins this updated lesson by tracing obesity trends over the last few decades. She then discusses how maternal obesity and prenatal weight gain can affect lactation. She also outlines weight reduction surgery's effects on pregnancy and lactation. Lou gives practical tips to the clinician on assisting these parents through their lactation difficulties, including alternate ideas on positioning and latch.

Lou wraps up the course by examining the effects of breastfeeding vs. bottle feeding on rates of childhood obesity and how they relate to other risk factors for childhood obesity.

Click [here](#) for 1.5 CERPs, Nursing Contact Hours, and CME credits; Physicians click [here](#) for 1.5 CME credits.

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 Discounted 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**





BFHI and Sudden Unexpected Infant Death

A new study in the Journal of Pediatric surveys data to determine a correlation between the Baby-Friendly Hospital Initiative (BFHI) and deaths from sudden unexpected infant death (SUID) and asphyxia among infants <7 days in the U.S. and Massachusetts.

The authors conclude that breastfeeding initiatives and skin-to-skin care are temporally associated with decreasing SUID prevalence in the first six days after birth in the United States and Massachusetts.

They further state that early initiation of breastfeeding within one hour of birth is associated with improved neonatal mortality rates.

The data also suggest that breastfeeding interventions and skin-to-skin care do not contribute to perinatal deaths on a population level.

Click [here](#) for the full article.

Baby-Friendly USA Updates

Baby-Friendly USA has released Interim Guidelines and Evaluation Criteria (click [here](#)) for Baby-Friendly Hospital Initiative assessments taking place between February 1, 2020 and December 31, 2022.

The changes in the interim GEC are intended to add greater clarity, give mothers and families more choices, and encourage more collaborative conversations between parents and providers.

Baby-Friendly USA has also published a chart (click [here](#)) summarizing these changes and additions to the 2016 version of the U.S. Baby-Friendly GEC.

LER is monitoring these updates to ensure our Baby-Friendly content is up-to-date.



A Word From Our Founder

Lactation Education Resources Founder Vergie Hughes outlines the changes occurring at LER in her latest [blog post](#).

Información para familias lactantes

El calostro, lo primero



El calostro es la **“primera leche”** que produce la madre en las semanas previas al parto y en los primeros días tras el mismo. Está preparado para cuando nazca el bebé. Es una leche especial: baja en grasas y con grandes cantidades de carbohidratos, proteínas y anticuerpos. Además, es muy fácil de digerir. A pesar de que el volumen de calostro es pequeño, tiene unas concentraciones elevadas de nutrientes. ¡Es el perfecto primer alimento para un recién nacido!

No te preocupes si no tienes mucha leche los primeros días, recuerda que un poco de calostro es suficiente. Pon a tu bebé a menudo al pecho para que tome el calostro. Esto ayudará, además, a que aparezca antes tu “segunda leche”: la leche madura.

Para asegurarte de que tu bebé aprovecha todos los beneficios del calostro, asegúrate de que lo recibe durante las primeras tomas. El calostro es lo que necesita, nada más. Si es necesario suplementar por motivos médicos, prueba a sacarte un poco de calostro. Puedes hacerlo de forma manual o con un sacaleches, para dárselo después a tu bebé con una cuchara o jeringa. Pide ayuda a tu consultora de lactancia. Procura que el intestino de tu bebé reciba la protección que le ofrece el calostro, antes de recibir cualquier otro líquido.

- El calostro tiene un efecto laxante, ayuda a eliminar el meconio en los primeros movimientos intestinales y previene la ictericia.
- A veces nos referimos al calostro como la “sangre blanca”, porque proporciona una cantidad muy importante de células vivas (linfocitos y macrófagos, similares a los de la sangre) que protegen a tu bebé contra infecciones y enfermedades.
- Tiene un rol importante en proteger el tracto gastrointestinal del bebé. El intestino de un recién nacido es muy permeable. El calostro sella los agujeros microscópicos “pintando” el tracto gastrointestinal con una barrera que impide que la mayoría de proteínas extrañas (de la comida que consume la madre o de la leche de fórmula) penetren en el intestino y de lugar a una posible alergia.
- El calostro es considerado la primera inmunización ya que contiene altas cantidades de un anticuerpo llamado inmunoglobulina secretora A (SIgA).
- A medida que la leche materna cambia de calostro a leche madura, la concentración de factores inmunológicos decrece pero el volumen de leche aumenta considerablemente.
- Por lo tanto, la cantidad de defensas contra infecciones que recibe tu bebé se mantiene prácticamente constante durante todo el periodo de lactancia.

Tienes permiso para duplicar “Lactation Education Resources 2019”.

Por favor ten en cuenta, que la información proporcionada está destinada únicamente a fines educativos e informativos generales. No pretende ni implica ser un sustituto del consejo profesional.

Siempre busque y siga el consejo del médico para cualquier pregunta que pueda tener sobre su condición médica o la de su bebé. Nunca ignore el consejo médico profesional ni tarde en buscarlo debido a algo que haya recibido en esta información.



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Specialists in online lactation training

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Want to Be a LC But Not Sure Where to Start?

Click [here](#) to Choose Your Own Adventure with our IBCLC Pathways Chart



Contact Us!

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Where to Find LER Next

Virginia Hospital Center

Inpatient Breastfeeding Specialist
Arlington VA April 28, 2020

The Bloom Collective

CBS Hybrid
Baltimore MD April 2020

Inova Alexandria Hospital

Inpatient Breastfeeding Specialist
Alexandria VA Spring 2020

Connecticut WIC

Towards Exclusive Breastfeeding
Spring 2020