Issue 23 **June 2005** Baby Friendly Hospital Initiative in Ireland 0

BFHI in Ireland launches a leaflet

BFHI in Ireland launched their first leaflet at the BFHI workshop in March. BFI UK generously shared their leaflet *Breastfeeding Your Baby* to be adapted for Ireland. The cover picture and some of the inside pictures are Irish, as well as the contact addresses. The printing of the leaflet was funded by the Health Promotion Unit of the Department of Health and Children, with particular thanks to Maureen Fallon, National Breastfeeding Co-ordinator

The leaflet is best used with mothers in the early days after birth to assist in discussing the key points of positioning, attachment, patterns of breastfeeding, and expressing milk.



The range of antenatal leaflets is still available, such as *Feeding Your Baby* and *Breast is Best,* as well as *Out and About* and *Combining Breastfeeding and Working.* All the leaflets are available from your local HSE Health Promotion Department.

Leaflets alone may be ineffective or harmful for enhancing breastfeeding initiation and duration. (see reports below) They are better used to reinforce and remind of the key points discussed with a skilled support person.

What is the evidence?

In this era of evidence based health practice, combined with high work loads, systematic reviews are useful in bringing the evidence together in an accessible format. Reviews of the effectiveness of interventions to promote the initiation and duration of breastfeeding are available on the website of the UK National Institute for Health and Clinical Excellence www.publichealth.nice.org.uk/ Enter 'breastfeeding' in the search line for a list of the summaries, briefing documents and full reports. They can be downloaded or printed out – the full reports are quite long, so check before printing.



The effectiveness of public health interventions to promote the <u>duration</u> of breastfeeding. (2005) Systematic reviews of studies of interventions relevant to the <u>continuation</u> of breastfeeding, together with recommendations for practice and policy.

Effectiveness of public health interventions to promote the <u>initiation</u> of breastfeeding (2003) Presenting the evidence from selected good quality systematic reviews and meta-analyses since 1996.



Focus in this issue: Sustained breastfeedingnursing beyond one year

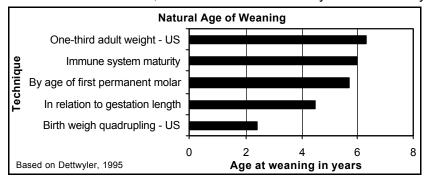


Breastfeeding the Older Baby

What is a natural age for stopping breastfeeding?

It depends how you calculate it.

However, no matter which biological based technique you use, a natural age for stopping breastfeeding comes out at years rather than months. This biological model often differs from the cultural belief in a society, which is based on the value of children and their mothers, and views on individuality and conformity.



A natural age for stopping breastfeeding is years rather than months.

There are many thousands of children who are breastfeeding at 12 months or older. In the UK alone, there are about 5000 children breastfeeding as they approach a year old. In Latin America, Asia and parts of Africa, over 50% of children are nursing at 2 years of age. An Irish study on dental health in 1992, included 121 children who breastfed for at least two years.

A US study (Hammer et al) found that more than 42% of the cohort of 191 children of middle class, educated parents was still receiving bottles at 24 months of age, 16% at 36 months, and 8% at 48 months, with an average of 23 bottles per day. This raises the question if it is culturally more acceptable to meet the child's needs with a plastic object than a person.

Modern child-rearing guidelines often emphasis flexibility and a needs-oriented approach, for example in toilet training or readiness for school. Similarly, the age for ceasing to breastfeed needs flexibility and recognition of the needs of those involved.

After the first six months, other foods are more nutritious than breast milk. Untrue.

In the second year, breastmilk can contribute over one-third of the nutritional needs for energy and protein, and nearly all the need for vitamin C. Breast milk is the most reliable source of long-chain fatty acids vital to the developing nervous system of the child.

There are no benefits to breastfeeding after a year. Untrue.

Full immune competence is not reached until a child is about 6 years of age. *Antibodies are still produced* by the mother in response to infections in the child. The concentration of some immunological components rise in the second year, which may be a natural protective mechanism for the toddler who is now in contact with more infectious agents.

There is a dose dependent relationship between *higher IQ scores* and duration of breastfeeding. (Horwood et al, 2001)

The child will eat more if breastfeeding is stopped. Untrue.

Breastfeeding provides a nutrition 'cushion' for the poor eater. Taking this cushion away does not quarantee the intake of other foods will increase.

Sustained breastfeeding is no benefit to mother. Untrue.

The emotional benefits tend to be the most important reason mothers give for continued breastfeeding. (Kendall-Tackett&Sugarman, 1995)

A large and comprehensive examination of the impact of breastfeeding duration on the risk of breast cancer (pre or post menopausal) including 30 countries and 50,302 breast cancer cases and 96,973 controls found the relative *risk of breast cancer decreased* by 4.3% for every 12 months of (cumulative) breastfeeding. (*Lancet* 2002)

Breastfeeding beyond 8 months was associated with greater bone mineral density in later life, reducing the risk of osteoporosis (Melton et al, 1993)

Continued breastfeeding *promotes maternal* weight loss. (Dewey et al, 1993)

Truth: Nursing helps a busy toddler (and mother) to stop and relax.

We encourage children and mothers to be separate from each other in the name of growth and independence, then wonder as adults why it is hard to get close to other people and to trust.

Time and care invested in a baby reaps rewards when an adult.

Breastfeeding during pregnancy and tandem nursing

"Breastfeeding during a subsequent pregnancy is not unusual. If the pregnancy is normal and the mother is healthy, breastfeeding during pregnancy is the woman's personal decision.

If the child is younger than two years of age, the child is at increased risk of illness if weaned.

Breastfeeding the nursing child after delivery of the next child (tandem nursing) may help to provide a smooth transition psychologically for the older child."

American Academy of Family Physicians 2004

How you can support sustained breastfeeding

- Assist the family to view breastfeeding within the context of the child's development.
- Help mothers to deal with the judgemental remarks of other people.
- Assist mother to look at her own feelings and understand her child's feelings too.
- Encourage contact with other mothers nursing past a year.

Further Reading on Sustained Breastfeeding

American Academy of Family Physicians Breastfeeding Position Paper 2004 www.aafp.org/x6633.xml Bruce E (2000), Not just for babies: 10 good reasons to breastfeed your toddler. *Mothering* Nov-Dec: 61-64.

Bumgarner NJ, (2000), Mothering your nursing toddler. La Leche League International

Collaborative Group on Hormonal Factors in Breast Cancer. (2002) Lancet, 360(9328):187-95,

Dettwyler KA. (1995) A time to wean: the hominid blueprint for the natural age of weaning in modern human population, in *Breastfeeding: bio cultural Perspectives*, ed Stuart-Macadam P and Dettwyler KA New York, Aldine de Gruyter, 39-73

Dewey KG, Heinig MJ, Nommsen LA (1993), Maternal weight-loss patterns during prolonged lactation. Am *J Clin Nutr* 58(2): 162-166.

Goldman A, Goldblum R, Garza C (1983), Immunologic components in human milk during the second year of lactation. *Acta Paediatr Scand* 72: 461-462.

Hammer LD, Bryson S, Agras WS. (1999) Development of feeding practices during the first 5 years of life. *Arch Pediatr Adolesc Med* 153(2):189-94

Hills-Bonczyk SG, Tromiczak KR, Avery MD, Potter S, Savik K, Duckett LJ (1994), Women's experiences with breastfeeding longer than 12 months. *Birth* 21(4): 206-212.

Horwood LJ, Darlow BA, Mogridge N. (2001). Breast milk feeding and cognitive ability at 7-8 years. *Arch Dis Fetal Neonatal* 84:F23-27

Kendall-Tackett KA, Sugarman M (1995), The social consequences of long-term breastfeeding. *J Hum Lact* 11 (3): 179-183.

Melton LJ, Bryant SC et al. (1993) Influence of breastfeeding and other reproductive factors on bone mass in later life. *Osteoporosis Int* 3(2):76-83,

Moscone SR, Moore MJ. (1993) Breastfeeding during pregnancy. J Hum Lact 9:83-88

Prentice A (1991), Breast feeding and the older infant. Acta Paediatr Scand Suppl 374: 78-88.

Rogan WJ, Gladen BC (1993), Breast-feeding and cognitive development. Early Hum Dev 31(3): 181-193.

Sugarman M, Kendall-Tackett KA (1995), Weaning ages in a sample of American women who practice extended breastfeeding. *Clin Pediatr* 34(6): 642-647.

NEWS UPDATE

The majority of Scotland's births are Baby Friendly: In April, Forth Park Hospital in Fife, Scotland was accredited as Baby Friendly. This brings the proportion of Scottish babies born in Baby Friendly Hospitals to 54%. The proportion of mothers starting to breastfeed in this unit has risen from 54% two years ago to 61% today.



Perinatal Statistics for 2001 are published. They show that for both singletons and multiple births, there was 41.45% 'any' breastfeeding on discharge, nearly 24,000 babies. Exclusive breastfeeding on discharge was 39%. The full report is available from the ESRI at www.esri.ie

Skin-to-Skin contact – Another Opportunity: St Munchin's Maternity Hospital, Limerick shared their activities at the All-Ireland Breastfeeding Conference in Belfast and at the International Health Promoting Hospital Conference in Dublin, both in the same week in May. Margaret O'Leary and Margaret Hynes, CMS Lactation, IBCLC each presented at an event. They said: "As a Baby



Friendly Hospital all mothers are given the opportunity of skin-to-skin contact with their babies following delivery. We offer mothers further opportunities in the Post Natal ward and following bathing. Babies are usually bathed the day after birth and all our baby bathing is done beside the mother's bedside. We have noted that mothers appreciate this practice – probably because some mothers have been drowsy in early postnatal period. It is also a convenient opportunity for staff and mothers to put the well-dried baby to skin-to-skin contact, which calms and keeps baby warm following the baby bath. Mother, again, experiences that unique wonderful

feeling of closeness to her baby. The idea was initiated by Dympna O'Sullivan a member of the Parentcraft/Breastfeeding support team in the hospital." The topic of skin-to-skin fitted well with the presentation in Belfast by Dr Nils Bergman of his research and practice with Kangaroo Mother Care.

The American Dietetic Association endorses the recommendation for exclusive breastfeeding for six months and continued thereafter with appropriate complementary foods. They say "Breastfeeding is also a public health strategy for improving infant and child health survival, improving maternal morbidity, controlling health care costs, and conserving natural resources." Their Position Paper is published in the Journal of the American Dietetic Association, Volume 105, Issue 5, May 2005, which is currently available at www.adajournal.org

Weaning made easy is a new publication from the Health Promotion Agency Northern Ireland. Their quarterly newsletter *Keeping Abreast* is also available. Both publications can be viewed and downloaded from their web site. www.healthpromotionagency.org.uk



BFHI Link is written by Genevieve Becker, National Co-ordinator of BFHI, and reviewed by members of the National BFHI Advisory Committee.

We welcome your news and suggestions.

Contact the BFHI Co-ordinator, c/o Health Promoting Hospitals Network, James Connolly Memorial Hospital, Blanchardstown, Dublin 15, email: bfhi@iol.ie Web site: www.hphallireland.org then go to Links



Please photocopy BFHI LINK for further distribution.

Articles may be re-printed - please credit BFHI.



Diary Dates

August World Breastfeeding Week 1-7 Breastfeeding and Family Foods: Loving

and Healthy www.waba.org.my

Sept 30- Association of Lactation Consultants in Oct 1 Ireland, Annual Conference and

Workshop. Breastfeeding and Politics. Guest Speaker: Gay Palmer. Maynooth.

Contact: alci@iol.ie

Oct 1-7 National Breastfeeding Week

Nov 15- **BFI UK Conference**, Bournemouth.

16 Contact: 00-44-207312 7652 or www. babyfriendly.org.uk

The Baby Friendly Initiative in Ireland is a project of the Health Promoting Hospital Network This newsletter is funded by the Health Promotion Unit, Department of Health and Children, Dublin



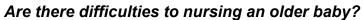
Breastfeeding an Older Baby

Breastfeeding is not just for newborn babies. Many babies and mothers continue to breastfeed happily for months and even years. The word nursing is often used to show it is more than providing just food at the breast.

Are their benefits to nursing an older baby?

Yes, there are benefits.

- The baby continues to get good nutrition. For example, breast milk can provide half of the baby's needs for energy and protein at 12 months old.
- The protection from illness continues for as long as breastfeeding continues.
- A mother and her baby can enjoy a time of peace and togetherness while nursing. This can be a special time if mother and baby are separated during the day.
- A wakeful baby at night can easily be soothed by nursing rather than walking and rocking.
- The baby's close bond with the mother helps the baby to develop trust and to relate to other people.
- The mother benefits too by using up weight gained during pregnancy as well as reducing her risk of some illnesses.



Yes, there can be difficulties. If other people think breastfeeding is unusual, they may make comments. What can you say if people make comments?

If someone says: "Are you still feeding that baby?", you could reply "Yes, doesn't the baby look well?"

Or if they say: "When are you going to stop doing *that*?", you could reply, "We should be finished in a few minutes, was there something you wanted us to do?"

If the other person is a close family member or friend, you might explain how good breastfeeding is for you and the baby. If the person is not close to you, why is it any of their business?

What can help?

Look for people who think breastfeeding is a good idea. Go to a mother support group and meet other mothers nursing older babies. Breastfeeding counsellors will talk to you on the phone and by email also.

If you know someone will make difficult comments, go somewhere private to 'tend to the baby' without saying that you are nursing.

Remember that your baby knows that you are doing your best.

If breastfeeding a child that is one year or two years old seems unusual, think about how often we see a two-year old or even a three-year old with a bottle or a soother.

Do we think that is unusual?

