

Impact of Interventions Structured as a Tertiary Care Hospital to Reinforce Initiation of Breastfeeding



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ABSTRACT : The early initiation of breastfeeding in neonates creates a holistic neonatal care and reduces neonatal mortality rates. The present study is aimed at analysing there rates in a tertiary care hospital and the impact structured programs can have on the (EIBF) Early Initiation of Breastfeeding rates.

KEYWORDS: breastfeeding, initiation of breastfeeding.

BACKGROUND

[1] UNICEF and WHO recommend exclusive breastfeeding for the first six months of life, starting within an hour of birth. [2]This “Golden Hour” includes elements like skin-to-skin contact for at least an hour, the early initiation of breastfeeding. [3] (EIBF) Early initiation of breastfeeding contributes directly to reduce neonatal morbidity and mortality.

[4] Colostrum is the first milk that is very important for new-borns in protecting infections. Since the first milk is rich in immunoglobulin G, colostrum has a significant role in disease resistance. Many articles reveal that bacterial, viral, fungal and protozoal infections of the new-born baby can be reduced by feeding colostrum. According to different studies, children who didn't feed colostrum more likely develop many infections, stunting, underweight and wasting.

[5] Production of prolactin and oxytocin during breastfeeding is associated with lower levels of maternal stress and enhanced bonding. Furthermore, early cessation of breastfeeding or not breastfeeding at all has been linked to an increased risk of maternal postpartum depression

[3] According to the 2015-2016 Indian National Family Health Survey, only 42.9 % of the total number of new-borns in Maharashtra had EIBF.

A study done at Super speciality hospital (now, Super Speciality Hospital) during world breastfeeding week in the same year, concluded that the rate of EIBF at the institute was 17%. Factors like lack of maternal awareness, less awareness & coordination amongst doctors & staff were the reasons for the staggering low values. Therefore, in the ambition to deliver paramount patient care the clinicians & administration of the institute undertook a breastfeeding program that included staff training, generation of breastfeeding policy and antenatal and post-delivery counselling of parents.

BREASTFEEDING PROGRAM

The program initiated in 2016, involved a collaboartive effort from the administration, the obstetric team and the breastfeeding consultant to set up a structure for the program. It included the following:

- Creating awareness through seminars, trainings and campaigns especially during world breastfeeding week.
- Recommendations by obstetricians for antenatal counselling sessions for expecting parents.
- Quarterly training sessions for nurses, residents and support staff in wards and labour room, augmented by practical skill demonstration sessions for analysis and improvisation.
- Breastfeeding policies were deployed in labour rooms and wards.
- Post-natal counselling by lactation consultant to explain benefits of early breastfeeding and assistance if required.
- Increasing availability of breastpumps and checking for their proper sterilization.
- Yearly audits to monitor progress.

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INTRODUCTION

A prospective study done at Super Speciality hospital, Mumbai, Maharashtra, India from August 2021- December 2021. The aim of the study was to analyse the EIBF rates in the hospital and evaluate the outcome of the breastfeeding program, 5 years from its initiation. A total of 72 births were tracked in five months.

MATERIALS AND METHOD

The following methods were applied: -

- The MIS (Management Information System) was used to record all the deliveries during the time period, including both normal and LSCS deliveries. The exclusion criteria were Covid-19 positive mothers as the neonate had to be separated from the mother to prevent transmission.
- Parameters were determined to assess the viability of the program.

Assessment parameters

- Breastfeeding initiation in first one hour after birth.
 - Support received by mothers for initiation
 - Post-delivery counselling
 - Reasons to offer formula feed during their hospital stay.
 - Skills of support staff.
 - Availability of breast pumps.
 - Sterilization
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- A daily report was obtained from each ward and labour room.
 - The nursing staff and residents were interviewed and findings were noted.
 - Practical skills of support staff were examined and short-comings documented.
 - A database was created with the above collected information and a prescriptive analysis was done.

RESULTS

As per the study, all 72 neonates (100%) [Fig.1] received breastfeeding within 1 hr of birth. However, the duration of baby's suckling time was different in each case. Amongst these, 51(70.83%) [Fig.2.a] new-borns had to be given top feed due to multiple factors like pain, fatigue and insufficient sleep of mother, family's request specially pertaining to traditions and culture, medically advised, retracted or inverted nipples, lack of motivation and improper guidance from the support staff. On regular postnatal counselling from dedicated staff, 94.12% [Fig.2.b] of these mothers returned to exclusive breastfeeding within a span of 2-3 days.

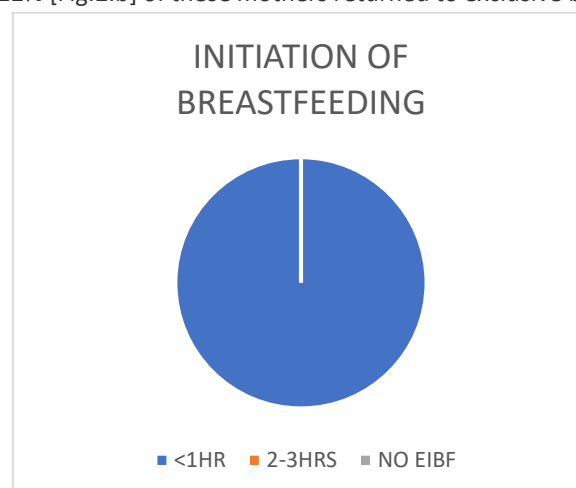


FIG. 1. TIME TAKEN TO INITIATE BREASTFEEDING IN NEONATES

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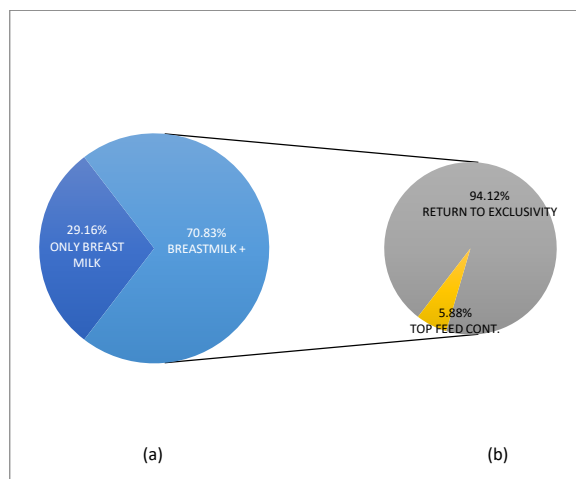


FIG. 2.a. TYPES OF FEED RECEIVED BY NEONATES, 2.b. TYPES OF FEED RECEIVED BY NEONATES RECEIVING BOTH BREASTMILK AND TOP FEED IN 2-3DAYS

Comparison with prior study

A similar study was conducted in 2019 by the same institute. According to the data, the EIBF in the year was 71% which has significantly increased in the recent year. Therefore, the effectivity of the breastfeeding program from its initiation to as of now December, 2021 is as follows (Fig.3):

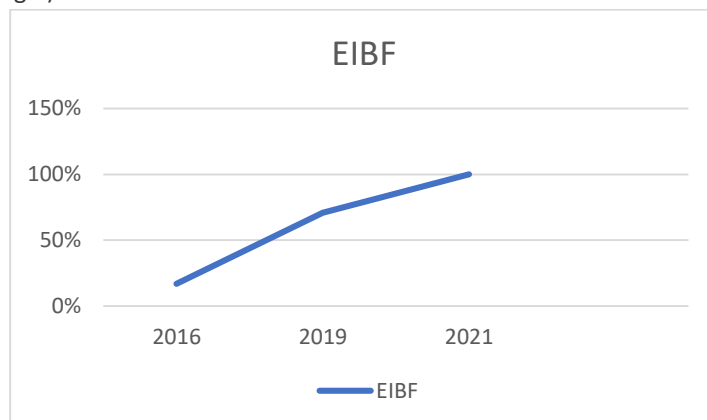


FIG. 3. RATES OF EIBF FROM THE INITIATION OF PROGRAM TO NOW.

CONCLUSION

The breastfeeding program started by the above mentioned hospital has seen a significant success. Impact on the EIBF rates have been exponential starting from 17% to 100% in a span of 5 years. Aspects contributing to the success of the breastfeeding program has to be the constant counselling and awareness created amongst parents in antenatal and postnatal periods. Along with that, the training sessions to equip the support staff, encouraged and assisted new mothers to be able to have an easy breastfeeding experience and in turn its maintenance. Even with the positive development seen with the implementation of the program, there is still scope for improvisation in the future.

RECOMMENDATIONS

[6] Breastfeeding is one of the most cost effective interventions which addresses both survive and thrive agenda of child health. Studies have highlighted how breastfeeding, if universalised, could prevent disease and deaths in Perinatal Period. To ensure that there is conducting environment for all mothers to practice breastfeeding at home outside home & workplace, Mother's Absolute Affection programme, an initiative of Govt of India provides opportunity to build capacity of doctors, paramedical staff and community health workers to aid breastfeeding.

- Regular soft skills training needed for nurses and support staff in each ward along with other skills training.
- All resident doctors posted in pediatric and obstetrics should be sensitised about breastfeeding policy. To have a written infant feeding policy that is routinely communicated to staff and parents.
- Do not provide breastfed newborns any food or fluids other than breast milk, unless medically indicated.

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- Establish digital ongoing data-management systems.
- Co-ordinate discharge of mother and infant to timely access to ongoing support and care.
- Availability of efficient breast-pumps in each ward and regular maintenance of the same.
- Regularly conduct antenatal breastfeeding counselling for expecting couples registered with the hospital as well as engagement with corporates to promote breastfeeding, especially during World Breastfeeding Week.

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