NB BABY-FRIENDLY NEWS

New Brunswick Baby-Friendly Initiative Advisory Committee

Skin-to-skin contact is having an impact at the Moncton Hospital

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Skin to skin contact or as it is more commonly known, Kangaroo Mother and Baby Care, is designated to enhance the interaction between mother and baby in the first minutes, hours and days of life. As a neonatologist, I have witnessed the medicalization of child birth and child care over the past twenty years. The initiation of skin to skin contact in our hospital is designated to demedicalize a physiologic process, i.e. child birth, and enhance the interaction of baby and mother in the immediate period after birth. Skin to skin contact can be initiated immediately in well babies and can be initiated very shortly after birth in low birth weight babies.

We were privileged in 2007 to have Dr. Nils Bergman present a day long conference on Kangaroo Mother Care at our hospital. His presentation and his work in this area stimulated the initiation of skin to skin in our Labour and Delivery suite and in our Neonatal Intensive Care Unit.

Skin to skin contact can be initiated immediately after birth with the placement of the baby on the mother's upper abdomen and chest or on father's or other support person if mom is unable to do this. This early contact has resulted in fewer babies admitted to the Neonatal Intensive Care Unit because of hypothermia, and has also helped in the initiation and maintenance of breastfeeding right across the birth weight spectrum.

Within the Neonatal Intensive Care Unit, skin to skin contact is encouraged as early as possible even for low birth weight babies except for those who are on mechanical ventilation. Our experience to date would suggest that babies exposed to skin to skin contact with mother (and indeed with father), have lower and more stable heart rates during the period of time that they are in contact with their parents or support person. We have also seen prolongation of breastfeeding in the population of low birth weight babies within NICU.

Skin to skin care for mother and baby is an easy to use non clinical, non medical intervention for babies and mothers. It requires more commitment on the part of the medical and nursing staff, who have a greater need for reassurance that babies are stable outside the environment of an incubator.

Bergman's longer term follow up of babies exposed to early skin to skin contact shows enhanced neurodevelopmental outcomes and enhanced school performance. In our unit we are still only in the early days of implementation, but the decrease in hypothermia and the improvement in heart rate stability, and improved breastfeeding outcomes suggest that not only is this a worthwhile approach to baby care, but should be our standard approach to newborn baby care.

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Visit the New Brunswick website on Baby-Friendly Initiative

The New Brunswick Baby-Friendly Initiative (BFI) website was officially Iaunched by Dr. Wayne MacDonald, Chief Medical Officer of Health on March 14th, 2008 during the Third Roundtable on Baby-Friendly New Brunswick.

The site can be accessed directly from the NB Health Government's Home page at:

http://www.gnb.ca/0051/index-e.asp.

The website is intended mainly for health professionals. It will keep expanding as the NB BFI Advisory Committee publishes future newsletters, reports, educational material and programs.

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The Third Roundtable on Baby-Friendly New Brunswick Another successful event!

The Third Roundtable on Baby-Friendly New Brunswick was recently held in Fredericton. One hundred and twenty five participants members of BFI committees and/or RHA managers attended the event. Key note speakers were: *Marianne Brophy co-chair of the Breastfeeding Committee for Canada and Frances Jones chair of the Human Milk Bank Association for North America* addressed the challenges of working toward baby-friendly in time of staff and budget constraint. They also spoke on the ethics of infant feeding and the influence of personal and professional values on BFI.

Two NB researchers: *Gail Storr* (UNB) and *Patricia Kelly Spurles* (Mount Allison) shared the results of their respective research on breastfeeding.





Bisphenol A

Bisphenol A (BPA) is an industrial chemical used to make a hard, clear plastic known as polycarbonate. It is used in many consumer products, including reusable water bottles and **baby bottles** and is also found in epoxy resins, which act as a protective lining on the inside of metal-based food and beverage cans.

Studies have shown the main source of exposure for newborns and infants is from bisphenol A migrating from the lining of cans into liquid infant formula and migrating from the polycarbonate baby bottles into the liquid inside following the addition of boiling water.

For more information, consult:

http://www.chemicalsubstanceschimiques.gc.ca /challenge-defi/bisphenol-a_fs-fr_e.html

Did you know that:

The Canadian Adverse Reaction Newsletter (vol. 17, issue 3, July 2007) reported that the use of Norethindrome (Micronor), a progestin-only oral contraceptive is suspected of being associated with a decreased breastmilk production.

For more information, visit: http://www.hc-sc.gc.ca/dhpmps/medeff/bulletin/carnbcei_v17n3_e.html

Breastfeeding recommended as a cancer « preventive » measure

The World Cancer Research Fund (WCRF) published in November 2007, what is considered to be "the most comprehensive report on cancer prevention ever produced". Nine independent universities and twenty-one world-renowned experts took part in the process. An initial screen of 500, 000 cancer prevention research studies was carried out and of these 7000 met the rigorous standards set to be included in the report. Based on the conclusions of the expert the WCRF UK has developed group, 10 recommendations one of which is a special recommendation regarding breastfeeding.

Recommendation #9 states:

"It's best for mothers to breastfeed exclusively for up to 6 months and then add other liquids and foods". It goes on to say "Strong evidence shows that breastfeeding protects mothers against breast cancer and babies from excess weight gain".

For more information, visit: <u>http://www.wcrf-</u> uk.org/research_science/recommendations.lasso

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Human Milk Bank - Providing an alternative for babies

According to a joint statement by the World Health Organization (WHO) and United Nations Children's Fund (UNICEF): "The best food for a baby who cannot be breastfed is milk expressed from the mother's breast or from another healthy mother. The best food for any baby whose own mother's milk is not available is the breastmilk of another healthy mother". "Where it is not possible for the biological mother to breastfeed, the first alternative, if available, should be the use of human milk from other sources. Human milk banks should be made available in appropriate situations" (Wight, 2001).

As of yet, women in New Brunswick do not have access to a milk bank. However as stated by Frances Jones, chair of the Human Milk Bank Association for North America (HMBANA) at the last NB BFI roundtable, setting up a milk bank is not impossible. According to HMBANA, "A donor milk bank is a service established for the purpose of recruiting and collecting from donors, and processing, screening, storing and distributing donated human milk to meet the specific needs of individuals for whom human milk is prescribed by a doctor/midwife".

To learn more on milk banking, visit:

http://www.hmbana.org/

http://milkshare.birthingforlife.com/

Milk banks are available in:					
 Brazil Britain France United Canace 	n e S d States G	68 + 17 3 9 1 (British Columbia)			

Publications on milk banking:

- > "2007 Guidelines for the Establishment and Operation of a Donor Human Milk Bank" at \$45.00/copy.
- "2006 Best Practice for Expressing, Storing and Handling of Mother's Own Milk in Hospital and at Home" HMBANA 2006 at \$55.00/copy.
- ➤ "2006 Starting a Donor Human Milk Bank: A Practical Guide" © HMBANA 2006 at \$30.00/copy.

To order, contact Emily Bartlett at ebartlett@firstpointresources.com

New Brunswick Breastfeeding Initiation Rate

The number of New Brunswick women choosing to breastfeed continues to increase incrementally each year. While the provincial average is reported at 73%, one area of the province reached 77.7% this past year, and percentages increased in all but one region. While we are not soaring to the finish line, slow and steady will get us there!

	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08
Total	69%	69%	70%	71%	71%	73%	73%



Taken from the Public Health Priority Assessment * Data to February 29, 2008

Resources

- DVD: From Bottles to Breast to Baby-Friendly: The Challenge of Change available at: <u>http://www.injoyvideos.com/breastfeed</u> ing
 - Better Breastfeeding Your guide to a Healthy Start available at: <u>http://www.injoyvideos.com/breastfeed</u> ing

CD-ROM:

 Birth to Breast: Feeding Care Maps for NICU - Interactive Learning module CD-ROM available at: <u>http://birthtobreastfeedingcaremaps.res</u> <u>pironics.com/</u>

Document/Article:

 Position paper on Breastfeeding and Work by the International Lactation Consultant Association available at: <u>http://www.ilca.org/BreasfeedingandWo</u> <u>rkPP.pdf</u>

Products:

- Breastfeeding dolls available at: <u>http://www.global-</u> <u>breastfeeding.org/breastfeeding_dolls/</u>
- Promotional items available at: www.bargainsgroup.com

Posters:

- Posters on promoting breastfeeding and the environment, available at: <u>http://www.mumsmilk.org/posters.htm</u>
- Posters of breastfeeding teens available at: <u>http://www.beastar.org.uk/the-be-astar-girls</u>

Vitamin D supplement for breastfed babies

Baby Ddrops is a new Canadian product that complies with the WHO Code.

More information available at:

http://www.ddrops.ca/



People in the News

We congratulate **Jo-Anne Elder-Gomes** on her appointment as the new Communications Administrator for La Leche League Canada.

Jo-Anne is fluently bilingual and she brings tremendous knowledge and skills to this volunteer position. She is a lactation consultant and has been a LLL leader since 1999. Jo-Anne is also a member of the NB BFI Advisory Committee and of the NB BFI Training team.

Kim Scott (Public Health nurse) is the new secretary on the Board of Directors of the Canadian Lactation Consultants Association replacing Donna Brown also from NB (DECHR).

Kim is a member of the NB BFI Training Team.

Gail Storr (the chair of the NB BFI Advisory Committee) will speak on "Experiencing Breastfeeding through the stories of Fathers" and will also have a poster presentation on "Making New Brunswick Baby-Friendly" at the upcoming ILCA conference in Vienna (October 2008).

Nancy Smith (Public Health nurse) presented on the Baby-Friendly Initiative and breastfeeding at the Public Hearing on Wellness in Miramichi in January 2008.

As part of their course "Advanced Community Development Course", nurse practitioner students from UNB will be working with some of the regional BFI committees in May and June 2008.

A "Breastfeeding teaching kit"

The BFI committee in the Restigouche region has prepared a "breastfeeding teaching kit" for the Public Health nurses and nutritionists. The kit contains tools such as DVD, client information fact sheets, a breast model, doll, book and other items to facilitate breastfeeding teaching to prenatal and postnatal families.



For more information, Contact Renelle at : Renelle.savoie@gnb.ca

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