

Infant Feeding Newsletter

Winter 2009

Issue 7

November 2009

Special points of interest:

- NHS Tayside Improvement Plan
- CEL 36



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Next Edition:
CEL 36 Update

NHS Tayside H7 Improvement Plan

H7 Improvement Team

The NHS Tayside Improvement Plan has been developed, driver diagram approved and current breastfeeding trends have been scrutinised. Breastfeeding rates decline between 20-25% across Tayside from birth to 10 days. Phase I of the application of improvement methodology has therefore focused initially on maternity services.

We have established a system to **monitor exclusive breastfeeding** rates at intermediate geography level across all areas of Tayside.

Breastfeeding Champions have enabled a strong focus on breastfeeding practice to enhance support provided to new mothers in Ninewells Hospital.

A **high level process map** has identified barriers and new opportunities for providing breastfeeding information and support to new mothers.

Questionnaires have been administered to the multi-disciplinary staff to capture barriers and opportunities to improve breastfeeding services. This has identified the

need to create more time for midwives. Use of skill mix and delegating tasks to other members of the team are being explored.

UK UNICEF Baby Friendly Initiative

Hospital Baby Friendly Initiative

The three Community Midwifery Units in Tayside are preparing for an external assessment in February 2010.

November 2008 which was approved by UNICEF and continue to be Baby Friendly accredited facilities. Ninewells Hospital are progressing systematically towards achievement of Stage 2 of the UK UNICEF Baby Friendly Initiative standards by 2010.

Breastfeeding Trajectory

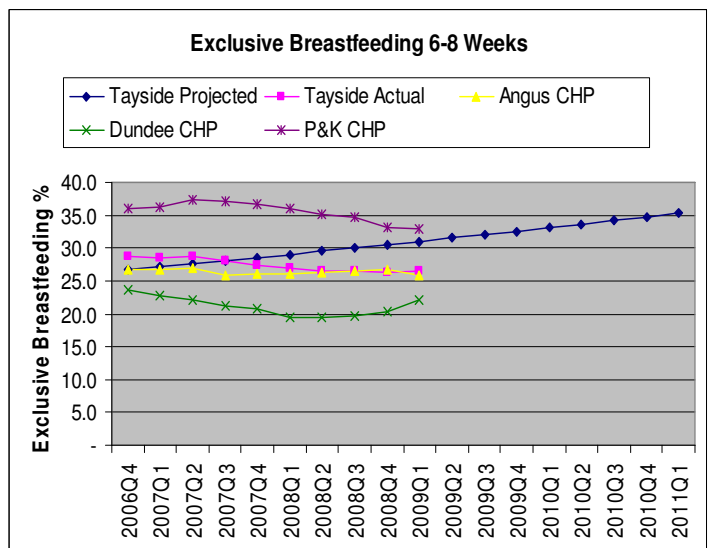
Exclusive breastfeeding rates at 6-8 weeks vary across Tayside.

Quarterly data at CHP level is now routinely provided by ISD from the Child Health Surveillance Programme-Pre School (CHSP-PS) detailed in Table 1.

Note that this data is collected from 6-12 weeks postnatal and in a variety of ways and therefore does not represent a true record of exclusive rates.

CEL 36

Congratulations to Carol Barnett who has been appointed as NHS Tayside CEL 36 Programme Manager. We all look forward to working closely with Carol during her 2 year appointment.



Breastfeeding Support Workers

Changes to Service

The following staff will continue to provide support during the postnatal period for the first six weeks after discharge and will operate on a **referral** basis only. Morgan Brady is currently on maternity leave and will return early 2010.

Heather Brown: 07768 917724

Katy McOuat: 07833237895

Christa Price: 07786 676353

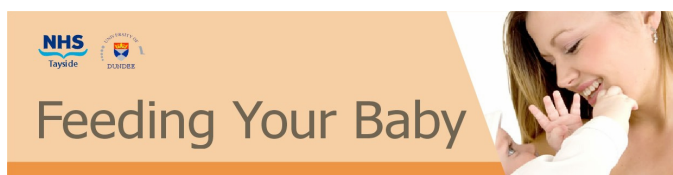
Breastfeeding and Breast Thrush

The diagnosis of Candida infections on the breast remain difficult and challenging as it often relies on subjective signs and symptoms. Without treatment this can lead to early cessation of breastfeeding. The following principles are advised and supported by the Breastfeeding Network, and the NES Medicines and Mothers online learning resource.:

- Simultaneous treatment of the mother and baby is required to achieve relief of symptoms.
- Deep breast pain will require oral treatment of the mother with Fluconazole.
- The BNF Appendix 5 advocates that fluconazole can be used in lactating mothers. A loading dose of 150-400mg plus 100-200mg twice daily for at least 10 days is recommended (NES Medicine and Mothers) This website can be accessed for further useful information.
<http://www.nes.scot.nhs.uk/pharmacy/breastfeeding/topic4/fluconazole.html>
- Fluconazole is less likely to be effective if used alone and topical treatment of the mother and baby are advised.
- Miconazole oral gel is the preferred treatment for the infant over 4 months of age. Nystatin oral suspension for infants less than 4 months.
- Miconazole 2% cream topically to the mother's nipple and areola after each feed. Miconazole oral gel is NOT suitable for topical treatment of the nipple and areola.
- For very red and inflamed nipples a mild steroid cream can be used.

A comprehensive guide for health care professionals can be found in leaflet form at:

http://www.breastfeedingnetwork.org.uk/pdfs/BfN_Thrush_leaflet_Feb_2009.pdf



Feeding Your Baby

Researchers from the University of Dundee are to embark on a project that will form the most complete ever picture of the feeding choices made by new mothers in the city.

'Feeding Your Baby' will see a team headed by Dr Heather Whitford of the School of Nursing & Midwifery find out more about women's decisions regarding their preferred method of infant feeding. They will explore whether or not these decisions change following delivery of the baby, and the factors that help or hinder their choice.

From mid-November onwards, community midwives will approach women in Dundee when they are over 30 weeks pregnant about taking part in the study. Participation will involve completion of an initial questionnaire then an exit questionnaire in the first 5 months after delivery. All women will be included in the study,

regardless of the method of feeding they intend to use.

Some of the participants will be asked to answer two weekly text message questions about their method of feeding. The text messaging and the timing of the final questionnaire will depend on their method of infant feeding. Some women will be invited to participate in a follow-up focus group.

"The £174,000 study has been funded by the Chief Scientists Office, and the findings will help inform future policy in terms of providing services to support infant feeding.

It is the first survey of its kind to use text messaging to allow women a convenient way of keeping in touch, letting the research team know how they are getting on and how their views might have changed on a week-by-week basis.

Important Information

Information for Health Professionals

Now available for health care professionals on the Directorate of Public health internet website, detailed Information about infant milks making links to the available evidence research.

<http://www.thpc.scot.nhs.uk>

We hope that this is useful for staff involved with pregnant women and new parents.

Changes to SMA Infant Formula Products

SMA have made some changes to their range of infant milks The new range was launched in August 2009.

On the basis of research into protein composition of infant milks looking at weight velocity in babies SMA have made the following changes:

- The quantity of protein is being reduced from 1.4 g per 100ml to 1.3 g per 100ml.
- SMA have altered the protein content by increasing the amount of alpha protein to 0.23 g per

100ml and decreasing the amount of beta protein.

SMA now have 3 different ranges: Core, Specialist and Pre-term

The Core Range comprises

- SMA First Infant Milk (formerly know as SMA Gold)
- SMA Follow -on milk (formerly known as SMA Progress)Suitable from 6 months and 6 months clearly stated on front of the product

SMA Toddler milk. Suitable for children over 1 year has been added to the product range

What has happened to SMA White?

SMA White (casein dominant infant milk) has become part of the 'Specialist Range'. It has been renamed 'SMA Extra Hungry'.

Further information available on the website @ www.smahcp.co.uk/professionalknowhow

Oseltamivir or zanamivir—Can mothers breastfeed after treatment



Q&A 179.2 Prepared by UK Medicines Information (UKMI) pharmacists for NHS healthcare professionals

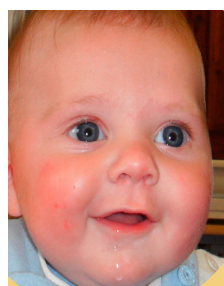
Expiry: 1 May 2011

Women who are ill with influenza should take steps to reduce the risk to their infants, such as frequent hand washing and possibly wearing a mask. The risk for H1N1 (swine influenza) transmission through breast milk is unknown. However, reports of viraemia with seasonal influenza infection are rare (11).

Summary

Oseltamivir and its active metabolite, oseltamivir carboxylate, are excreted into human breast milk in very small amounts. Limited data suggest that clinical sequelae from maternal treatment would not be expected in a breastfed infant.

There are no data on zanamivir use during lactation but based on limited



bioavailability the systemic exposure of a breast fed infant from maternal treatment is expected to be insignificant.

The overall consensus is that treatment with either drug is not a reason to discontinue, or put limitations on, breast feeding full-term or pre-term infants. Due to the very small amounts transferred into breast milk, and the limited oral bioavailability of either drug, the benefits of breast feeding are considered to outweigh any, albeit unidentified, risks.

The Department of Health have issued the following advice for breastfeeding mothers (11), which is supported by the evidence presented in this Medicines Q&A::

- *Women who are breastfeeding should continue while receiving antiviral treatment or prophylaxis as they are not contraindicated in breastfeeding.*
- *In particular mothers should feed on demand. Where possible additional formula should not be*

used so that the infant receives as much of the maternal antibodies as possible.

- *If a mother is ill, she should continue breastfeeding and increase feeding frequency. If she becomes too ill to feed then expressing milk may still be possible.*
- *If the baby becomes too ill to breastfeed then expressed milk should be used.*
- *The risk for swine influenza transmission through breast milk is unknown. However, reports of viraemia with seasonal influenza infection are rare.*

Available online at http://www.dh.gov.uk/en/Healthcare/Children/Maternity/Maternalandinfantnutrition/DH_099965 . 29 May 2009. Accessed on 3/6/2009



If you have any ideas, suggestions, stories or comments please feel free to contact one of the team:

Janet Dalzell, Breastfeeding Co-ordinator
 Heather McGregor, Public Health Practitioner, Dundee
 Carol Sutherland, Infant Feeding Advisor, Ninewells

OR alternatively write to:

Infant Feeding Newsletter
 Directorate of Public
 Health Kings Cross,
 DUNDEE
 Clepington Road
 DUNDEE

Phone: 01382 424036
 Email: janet.dalzell@nhs.net



National Supporter Networks

The Breastfeeding Network & Supporter line:
0300 100 0210

Lines open 9.30am – 9.30pm
www.breastfeedingnetwork.org.uk

NCT Breastfeeding Helpline:

0300 33 00 771

Lines open 8am – 10pm
www.nct.org.uk

La Leche League

0845 120 2918

www.laleche.org.uk

Association of Breastfeeding Mothers

0844 122 949

National Breastfeeding Helpline

0300 100 0212

Breastfeeding websites:

www.feedgoodfactor.org.uk

www.babyfriendly.org.uk

Training

The programme incorporates a one to one assessment which staff have found extremely useful.

Dates for your diary:

2 Day Programme: MW, HV, CN & SN

11th & 14th December 2009
 (Ashludie, Monifieth) - Limited

Kings Cross:

14th & 15th January 2010

26th Feb & 1st March 2010

29th & 30 April 2010

5th & 6th July 2010

21st & 22nd September 2010

22nd & 23rd November 2010

Please contact **Veronica**

Patullo: 01382 424091

3 Day Programme:

Health Care Assistants/Early Years Workers

Please contact Veronica

Patullo: 01382 424091

Breastfeeding Groups

Angus

Arbroath,
 Arbroath Infirmary,
 1st & 3rd Fridays of Month
 2.00-3.30 PM

Forfar, Whitehills Health and Community Care Centre
 Fridays 1.30-3.00 PM

Montrose, Maternity Unit
 Tuesdays 2.00-3.00 PM

Dundee

Wallacetown Health Centre,
 Tuesdays 10.30-11.30 AM
 Further information contact:
 07768917724

Broughty Ferry Health Centre,
 Wednesdays 10.30-11.30 AM
 Further information contact:
 07786676353

Blackness Library
 Fridays 2.00-3.00 PM
 Further information contact:
 07786676353

NCT, Bumps and Babies
 Dundee & St Andrews
 Tuesdays 2.00pm-4.00pm
 For further information t
 08704 208 860

Perth & Kinross

Letham Sports Centre, Perth
 Fridays, 10.00am

Breastfeeding Groups

Perth & Kinross

Kinross, Loch Leven Health Centre,
 Wednesday 2.00-3.00 PM

Coupar Angus, Health Education Room,
 Last Monday of the month, 2pm

Fife

Cupar

Cupar Old Parish Church Hall,
 Wednesdays, 10.30-12.00 noon

Glenrothes

Roths Hall,
 Wednesdays, 1.00-3.15pm

St Andrews

Meeting Room, St Andrews Health Centre
 Wednesdays, 2.00-3.30pm

East Neuk

Skeith Health Centre
 Thursdays, 10.00-12.00 noon

Leuchars

SSAFA, Meeting Room, Tutor Road
 Thursdays, 11.00-12.00 noon

Tayport

St Margarets Hall
 Wednesdays 10.00-11.00am