Importance of Breastfeeding Services for Mother and Baby

Christina Shenko, MD

Family Medicine Residency Program

Middlesex Hospital

Health Care Recommendations For Breastfeeding (American Academy Of Pediatrics)

- Breastfeeding and human milk are the normative standards for infant feeding and nutrition.
- Given the documented short- and long-term medical and neurodevelopmental advantages of breastfeeding, infant nutrition should be considered a public health issue and not only a lifestyle choice.
- The American Academy of Pediatrics reaffirms its recommendation of exclusive breastfeeding for about 6 months, followed by continued breastfeeding as complementary foods are introduced
- With continuation of breastfeeding for 1 year or longer as mutually desired by mother and infant.

Health Care Recommendations For Breastfeeding (American Academy Family Physicians)

- Breastfeeding is the physiological norm for both mothers and their children.
- Breastmilk offers medical and psychological benefits not available from human milk substitutes.
- The AAFP recommends that all babies, with rare exceptions, be breastfed and/or receive expressed human milk exclusively for the first six months of life.
- Breastfeeding should continue with the addition of complementary foods throughout the second half of the first year.
- Breastfeeding beyond the first year offers considerable benefits to both mother and child, and should continue as long as mutually desired.
- Family physicians should have the knowledge to promote, protect, and support breastfeeding. (1989) (2017 COD)

Human Milk Is Important For Mothers (Including a Decrease in Maternal Mortality)



Human Milk Is Important For Babies (Including A Decrease In Infant Mortality)



My Story



Breastfeeding Saves Our Health Care System Money (and Lives) https://www.ncbi.nlm.nih.gov/pubmed/22007819

If 90% of mothers could comply with current medical recommendations around breastfeeding...

- Our economy could save \$3.7 billion in direct and indirect pediatric health costs
- With \$10.1 billion in premature death from pediatric disease.
- We would spend \$3.9 billion less per year on infant formula.
- Additional food for nursing mothers would cost up to \$1.6-2.1 billion, and more Baby-Friendly[®] (World Health Organization, Geneva, Switzerland/UNICEF, New York, NY) births would cost \$0.145 billion.
- Paid leave would cost \$6.2 billion for 12 weeks at 55% pay.
- Note that current formula company rebates of \$2 billion to Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) are equal to 32% of net WIC expenditures.

Breastfeeding Saves Our Healthcare System Money (and Lives) https://www.ncbi.nlm.nih.gov/pubmed/23743465

- Suboptimal breastfeeding incurs a total of \$17.4 billion in cost to society resulting from premature death (95% confidence interval [CI] \$4.38-24.68 billion),
- \$733.7 million in direct costs (95% CI \$612.9-859.7 million)
- \$126.1 million indirect morbidity costs (95% CI \$99.00-153.22 million).
- Suboptimal breastfeeding may increase U.S. maternal morbidity and health care costs

Breastfeeding Saves our Healthcare System Money (and Lives) https://www.ncbi.nlm.nih.gov/pubmed/27647492

- Annual excess deaths attributable to suboptimal breastfeeding total 3,340 (95% confidence interval [1,886 to 4,785])
- 78% of which are maternal due to myocardial infarction (n = 986), breast cancer (n = 838), and diabetes (n = 473).
- Excess pediatric deaths total 721, mostly due to Sudden Infant Death Syndrome (n = 492) and necrotizing enterocolitis (n = 190).
- Medical costs total \$3.0 billion, 79% of which are maternal. Costs of premature death total \$14.2 billion.
- The number of women needed to breastfeed as medically recommended to prevent an infant gastrointestinal infection is 0.8; acute otitis media, 3; hospitalization for lower respiratory tract infection, 95; maternal hypertension, 55; diabetes, 162; and myocardial infarction, 235.
- For every 597 women who optimally breastfeed, one maternal or child death is prevented.
- Policies to increase optimal breastfeeding could result in substantial public health gains. Breastfeeding has a larger impact on women's health than previously appreciated.

Breastfeeding Saves The Health Care System Money (and lives)

- Study by Bartick et al., 2017 analyzed the burden of suboptimal breastfeeding in the US
- Found that suboptimal breastfeeding (not exclusively breastfeeding for the recommended first 6 months) was associated with:
- More than 3,340 premature deaths in the U.S. each year, costing the nation an estimated \$14.2 billion (\$3 billion in medical costs)
- The majority of the excess death and medical costs -- nearly 80 percent -were maternal
- Conclusion: Current US breastfeeding rates are suboptimal and result in significant excess costs and preventable infant deaths. Investment in strategies to promote longer breastfeeding duration and exclusivity may be cost-effective.

Health Disparity

According to the CDC Disparities exist among:

- Race
- Income
- Age
- Payer Types (Medicaid lowest)

Reasons Why Women Stop Breastfeeding (CDC)

- Problems with breastfeeding management
- Lack of Support
- Non supportive work place policies
- Non supportive hospital policies
- Concerns about medications while breastfeeding

What Does the Surgeon General Say

- Ensure access to services provided by International Board Certified Lactation Consultants – Action Step 11 Health Care
- Include support for lactation as an essential medical service for pregnant women, breastfeeding mothers and children:
- "Third party payers typically define a standard package of health benefits for women and children. Including standard coverage for IBCLCs as "covered providers" when they perform services within their scope of their certification would ensure that mothers and children have access to these services through insurance maternity benefits. Federally funded health benefit programs, such as Medicaid, the Children's Health Insurance Programs, Tricare and the Federal Health Benefit Program, could serve as models for such a standard benefit package."

What Is An International Board Certified Lactation Consultant (IBCLC)

- International Board Certified Lactation Consultant
 - Board Certified by the International Board of Lactation Consultant Examiners National Commission for Certifying Agencies (NCCA) of the Institute of Credentialing Excellence (ICE)
 - Nationally registered allied health professionals
- All candidates for the IBLCE[®] certification examination must meet minimum requirements in the following areas of study and experience.
 - Education in specified health science subjects
 - Education in human lactation and breastfeeding
 - Clinical supervised practice hours in providing care to breastfeeding families

Contact Information

Christina Shenko, MD Christina.Shenko@midhosp.org