

Targeted Postpartum Breastfeeding Consult to Increase Breastfeeding Duration and Increase Breastfeeding Self-Efficacy in Mother

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Introduction

- In the U.S., an estimated 74% of women decide to initiate breastfeeding; yet, only 13% of these women continued to exclusively breastfeed until six months of age
- The American Academy of Pediatrics and the World Health Organization both recommend six months of exclusive breastfeeding
- Infants who are fed human milk have fewer hospitalizations and fewer infections than formula-fed infants
- Breastmilk has been described as an infant's first immunization and provides protection from respiratory infections, diarrheal disease and has a protective effect against obesity and certain noncommunicable diseases later in life

Objective

To determine whether lactation consultant support in the pediatric primary care office improves maternal self-efficacy, rates and duration of exclusive breastfeeding in the first sixteen weeks of the infant's life

Aim 1: Breastfeeding mothers will have an increase in breastfeeding exclusivity of at least eight weeks

Aim 2: Breastfeeding mothers will have an increase in self-efficacy at four, eight and twelve weeks

Methods

Design: Pretest/Posttest design

Setting: Hospital affiliated suburban pediatric primary care office on east coast made up of 50% US Family Health Plan, 5.7% state insurance and remainder private insurance

Sampling:

Inclusion Criteria:

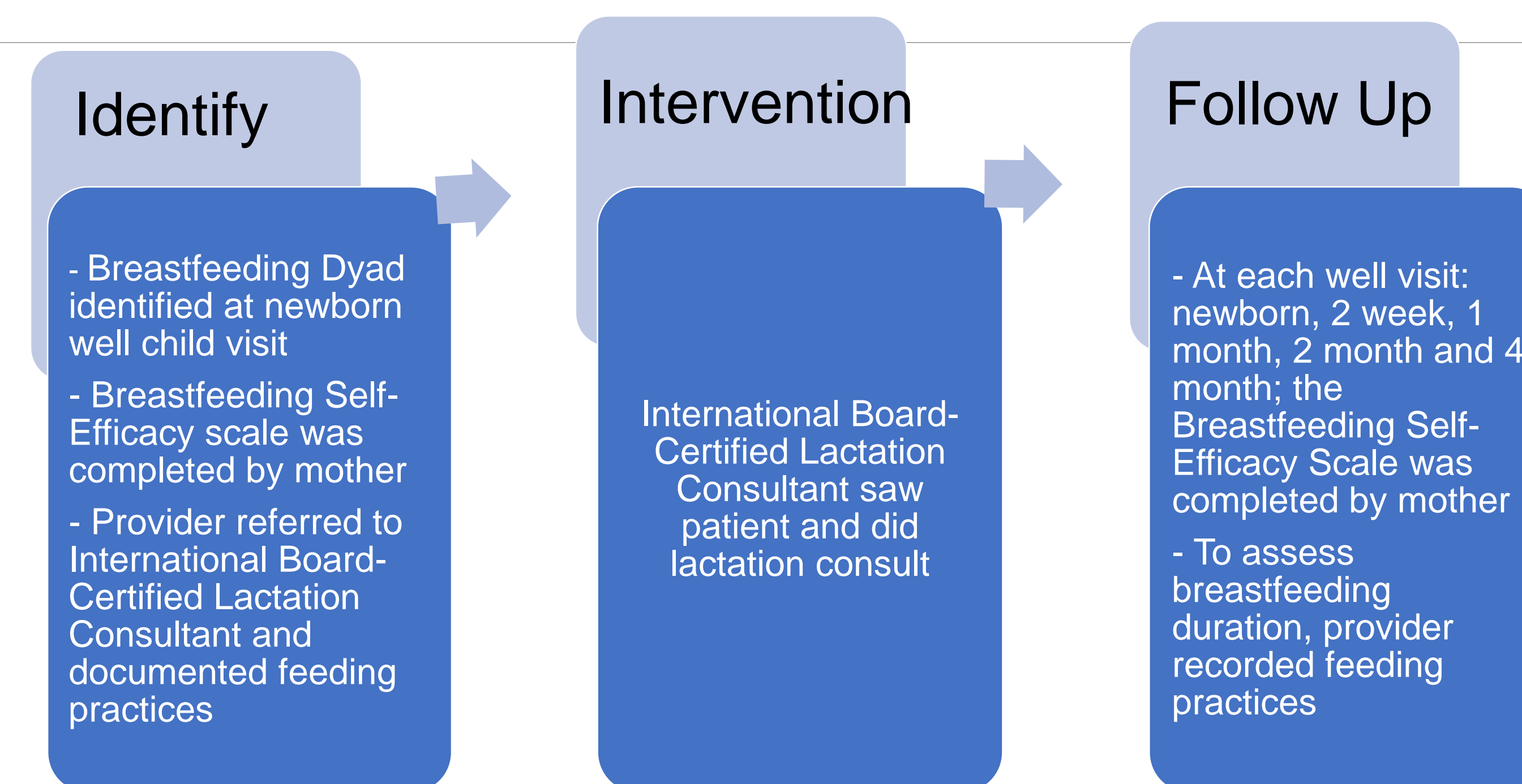
- All newborn breastfeeding mothers, delivering healthy and full-term infants with no contraindication for breastfeeding

Exclusion Criteria:

- Formula feeding mothers, premature infants, infants suffering from problems that resulted in an inability to breastfeed or any infants with a contraindication

Lactation Consult Group: n= 24

Non-Lactation Consult Group: n=61

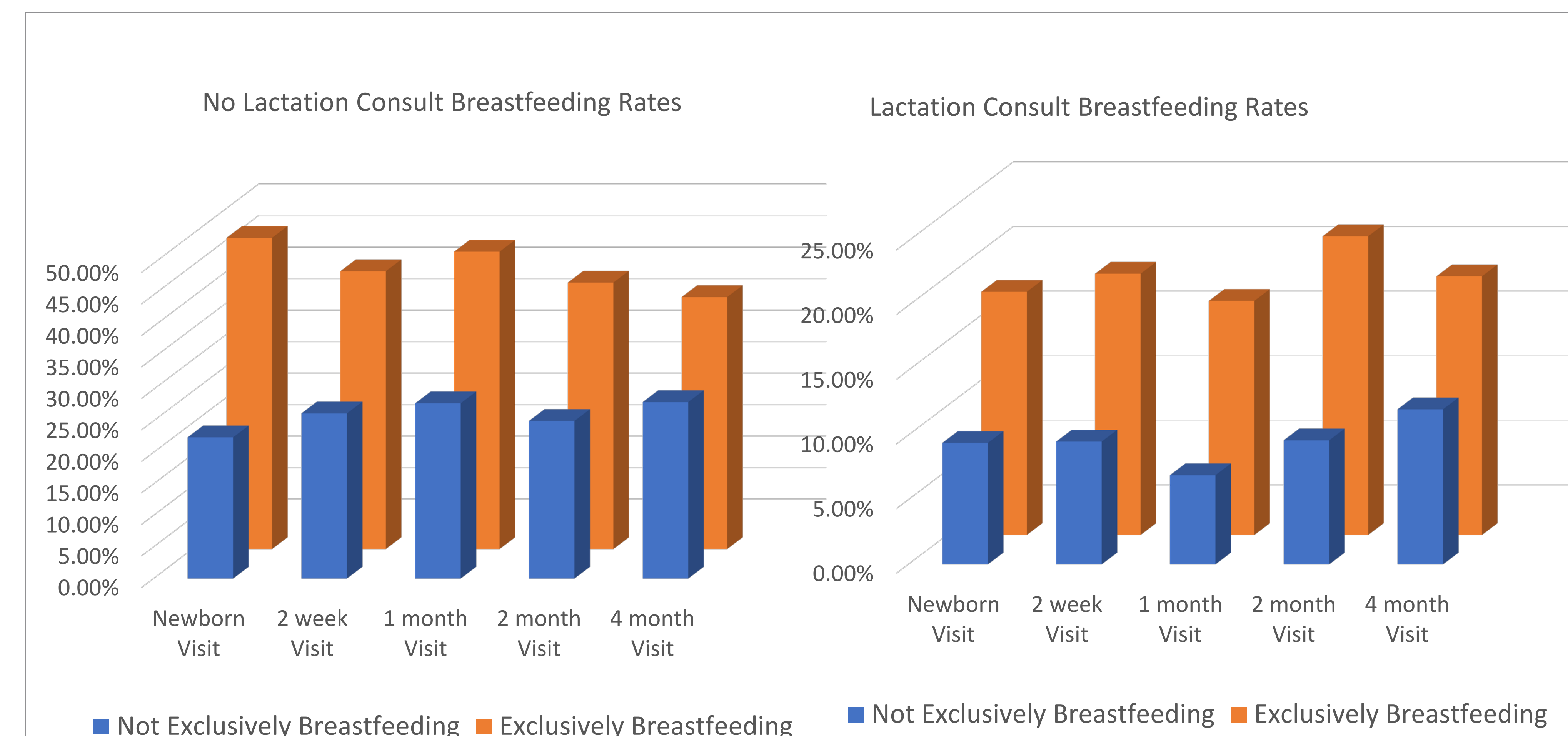


Results

Table 3: Breastfeeding Self-Efficacy Scores at each Visit Compared with Lactation Group

Visit	Saw Lactation Mean (SD)	Did not see Lactation Mean	P- value
BSFE Score Newborn N=82	54 (8.57)	61.5 (8.85)	0.001
BSFE score 2 week N=83	59.2 (6.74)	66.3 (4.24)	0.16
BSFE score 1 month N=70	62.8 (6.65)	65.3 (5.94)	0.09
BSFE score 2 month N=49	64.7 (6.44)	64.4 (10.76)	0.54
BSFE score 4 month	60.2 (9.62)	66.33 (5.03)	0.10

Results cont.



Discussion and Conclusions

- Targeted lactation consult in primary care office can improve breastfeeding exclusivity rates in women
- Breastfeeding dyads who saw lactation had more babies being exclusively breastfed than those not exclusively breastfeeding at all time points during the project, but these results were not found to be statistically significant
- No improvement in breastfeeding self-efficacy scores with lactation consult

Strengths:

- Address gap in literature; few studies look at relationship of IBCLC in primary care and breastfeeding self efficacy and exclusivity

Limitations:

- This project was conducted in a single pediatric practice with only one IBCLC
- Missing data, and/or incomplete BSES scales at well visits
- Response bias because breastfeeding status and self-efficacy was self-reported by participants and they may have tended to provide favorable responses so that they would be perceived as successful breastfeeding mothers

Conclusions:

- There are no specific guidelines for having an IBCLC in primary care and this project helps to lay the foundation for development of formal guidelines if sustainability and dissemination efforts are successful

