

Issue 17
December 2003



THE NEWSLETTER OF THE BABY FRIENDLY INITIATIVE IN IRELAND

BFHI LINK



Highlights from the Baby Friendly Hospital Initiative Report to the Health Promoting Hospitals Forum

Participation: Twenty of the twenty-two maternity units nationally are participating in the BFHI and seven of these hold Certificates of Commitment. Three maternity units are in the process of having full BFHI assessment to the WHO/UNICEF Global Criteria. There are nine hospitals/units with Breastfeeding Supportive Paediatric Unit membership. The Breastfeeding Supportive Workplace project is now available to all HPH hospitals.

Networking: On-going contact continues with the BFHI co-ordinators in other countries. *BFHI Link* continues to be well received containing news items from participating hospitals as well as educational updates. The parent's handout page in each issue has proved particularly popular with many hospitals distributing these pages to all their clients. This year again, a workshop for hospital BFHI co-ordinators was held. BFHI had a display stand and plenary presentation on the BFHI at a number of events. The BFHI web site went live in March 2003, via the All Ireland HPH web site.

Other: Training of hospital assessors BFHI in Ireland continued. BFHI provided a work placement for two students on the Master's in Health Promotion, NUIG. Their focus was on the workplace pack and the BFHI web site. The BFHI Advisory Committee has representatives from each health board area and the breastfeeding organisations. They met regularly, plus email communication. The BFHI Co-ordinator has a seat on the National Breastfeeding Committee and has attended all plenary and sub-group meetings as well as participating in email discussions. Breastfeeding rates for 2002 returned to BFHI show an increase to 43% for any breastfeeding on discharge. Informal visits were made to six individual hospitals. The major barrier to further BFHI progress appears to be lack of dedicated staff time to the project in a number of hospitals.

Plans for 2004: To further develop the Paediatric projects so as to involve more units and to move some to the next level. The Workplace project will be available. The BFHI in maternity units will continue to be supported with another group of hospitals encouraged to move to the level of Certificate of Commitment as well as hopefully awarding Ireland's first full status Baby Friendly hospitals. Particular emphasis will be put on completing and evaluating structured action plans. Our success in linking the BFHI with HPH will be further shared with other countries.

Awards

Certificate of Membership

Mayo General Hospital, Castlebar, Co. Mayo

Certificate of Commitment

Rotunda Hospital, Dublin

Breastfeeding Supportive Workplace

Portiuncula Hospital, Ballinasloe - Bronze Award

Regional Hospital, Waterford - Bronze Award

Sligo General Hospital, Sligo - Bronze Award

National Maternity Hospital, Dublin - Bronze Award

Presented November 2003



Focus this issue:

Breastfeeding is Health Promoting -
Including special insert for Hospital Administrators

Healthy Hearts

Not breastfeeding or early introduction of artificial feeding is linked with high values of cholesterol, a greater prevalence of obesity (twice as likely in never breastfed children); and raised systolic blood pressure in childhood – all markers of adult coronary heart disease. Breastfeeding is also dose-dependent - the longer the duration of breastfeeding, the lower the systolic blood pressure and the less likelihood of being overweight in childhood.

Dietz WH. *JAMA*.;285:2506-2507, 2001
 Wilson AC, et al. *BMJ*, 316:21-5, 1998
 Singhal A, Cole T, *The Lancet*, 357:413-419, 2001
 von Kreis R, et al. *BMJ*,319:147-150, 1999
 Owen CG; et al. *Pediatrics* Sep; 110(3): 597-608, 2002
 Hediger ML, et al *JAMA*.;285:2453-2460,2001
 Gillman MW, et al. *JAMA*285:2461-2467,2001
 Armstrong J; Reilly JJ. *Lancet* 359(9322): 2003-4, 2002.
 Toschke AM, et al. *J Pediatr* 141;6: 764-9,2002

Women's Health

Lactation is associated with a temporary increase in bone turnover that is reversed after weaning. Overall, breastfeeding confers a positive effect on bone mineral density.

The relative risk of breast cancer decreased by 4.3% for every 12 months of (cumulative) breastfeeding in addition to a decrease of 7.0% for each birth.

Mothers who do not breastfeed are more likely to remain above their pre-pregnancy weight than mothers who breastfeed, thus contributing to long-term obesity.

Karlsson C; Obraet al *Osteoporos Int* 12(10): 828-34, 2001;
 Laskey, M.A. & Prentice A. *Obstet Gynecol*; 94(4):608-15, 1999
 Sowers, M.F. *JAMA*, 269(24):3130-35, 1993
 Collaborative Group on Hormonal Factors in Breast Cancer. *Lancet* 360(9328): 187-95, 2002
 Heinig MJ, Dewey KG. *Nutrition Research Reviews*, 10: 35-56,1997



Breastfeeding — at the heart of health promotion

Child Health

Compared to the baby who is fully breastfed for more than 13 weeks, the baby who does not receive breast milk is:

- ♥ 5 times more likely to be admitted to hospital with diarrhoea and more likely to be ill for longer,
- ♥ 2 times more likely to be admitted with respiratory disease and to have severe wheezy illness,
- ♥ 2 times more likely to suffer from otitis media,
- ♥ 2 times more likely to develop eczema or a wheeze if from a family with a history of atopic disease,
- ♥ 5 times more likely to develop a urinary tract infection.

In addition, babies who do not breastfeed may have:

- ♥ reduced ability to produce antibodies in response to immunisations,
- ♥ increased risk of developing diabetes mellitus,
- ♥ lower developmental performance and educational achievement, thus reducing earning potential.

Howie PW, et al *BMJ*: 300:11-16, 1990
 Baker D, et al *J Epidemiol Community Health*; 52: 451-8, 1998
 Wright AL, et al *BMJ*, 299, (6705), 946-949, 1989
 Duncan B, et al *Pediatrics*, 91,(5), 867-872, 1993
 Aniansson G, et al. *Pediatr Infect Dis J*, 13,(5), 183-188, 1994
 Lucas A, et al. *BMJ*, 300, (6728) 837-840, 1990
 Burr ML, et al. *J Epidemiol Community Health*, 43, (2)125-132, 1989
 Saarinen UM, et al. *Lancet*, 346, (8982), 1065-1069, 1995
 Pisacane A, et al. *J Pediatr*, 120,(1) 87-89, 1992
 Pabst et al. *Acta Paediatr* 86:1291-1297, 1997
 Young TK; et al. *Arch Pediatr Adolesc Med* Jul; 156(7): 651-5, 2002
 Heinig MJ, Dewey KG. *Nutrition Research Reviews* 9, 89-110,1996
 Horwood LJ, Fergusson DM. *Pediatrics*, 101(1); E9, 1998

Mental Health

Longer breastfeeding duration is significantly associated with increased breastfeeding self-confidence, lower levels of maternal anxiety and depression, increased self-esteem and coping capacity, and stronger social health.

High prolactin levels during breastfeeding is associated with less maternal depression.

Breastfeeding improves the mother-child relationship and the infant's stimulation.

Papinczak TA, Turner CT *Breastfeed Rev* 2000 Mar;8(1):25-33
 Abou-Saleh M, et al. *Psychoneuroendocrinology* 1998 23(5):465-75
 Temboury MC et al *J Pediatr Gastroenter Nutr* 18:32-36, 1994

Cognitive and Neurological Outcomes

Increasing duration of breastfeeding is associated with consistent and statistically significant increases in child cognitive ability and educational achievement.

Children who had been breastfed were found to perform better on neurological tests with children born with minor neurological abnormalities deriving the most benefit.

Children who had received own mother's milk when preterm infants, showed higher IQ at age 8 years .

Horwood JL & Fergusson DM. *Pediatrics* 101(1):01-07, 1998.
 Lanting CI et al. *Lancet*, 344:1319-22, 1994
 Lucas A et al. *Lancet* 339: 261-264, 1992

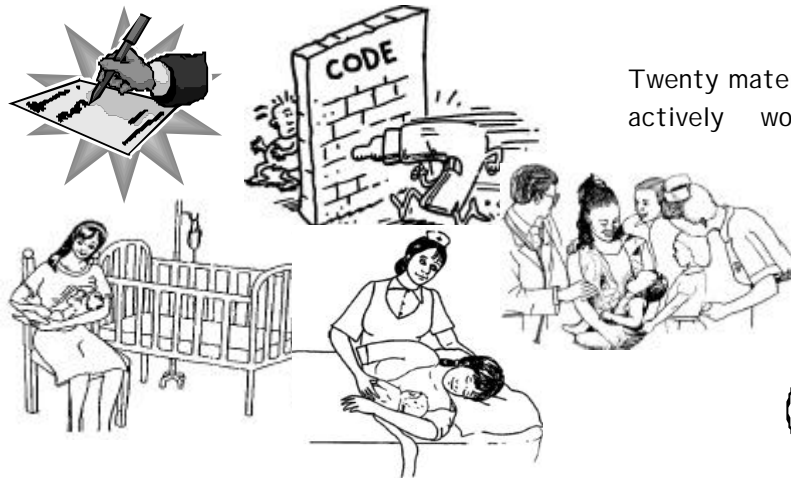
Combating Poverty

For an individual family, to formula feed one baby for 6 months, requires them to purchase 22 kg of formula powder, feeding bottles, teats, cleaning and sterilising equipment plus the cost of boiling the water to make up the feeds, the cost of heating water for washing the equipment and the time needed for preparation.

BFHI in Ireland is a project of the Irish Health Promoting Hospitals Network

The Irish Health Promoting Hospitals aims to provide a structure through which all hospitals - and those working in hospitals - are assisted to undertake an active role in the promotion of health. It seeks to establish supportive and communication mechanisms through which hospitals are assisted and encouraged to work together towards the acceptance of health promotion as an intrinsic part of the culture and services provided by all health services organisations.

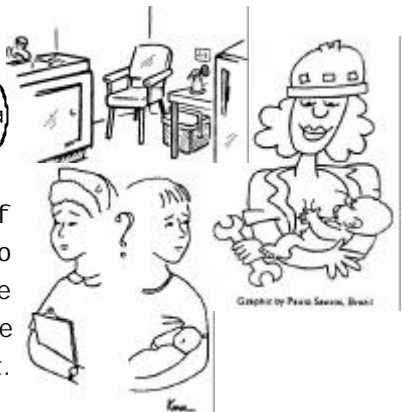
Baby Friendly Hospital Initiative projects involve



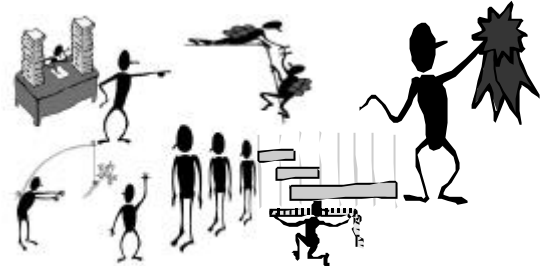
Twenty maternity units and nine paediatric units actively working to put supportive and sustainable policies and practices in place to enable mothers to make informed decisions and carry out those decisions.



Health promotion projects for staff with time, space and support to breastfeed at work through the Breastfeeding Supportive Workplace Project.



Inclusiveness with projects for maternity and paediatric services and staff in all hospitals. Networking between hospitals and BFHI around the world with *BFHI Link*, the web site, and individuals.



Planning, team work, evaluation and achievement with seven maternity units achieving a Certificate of Commitment.

Make a New Year's Resolution to participate fully in all the BFHI projects — the Global WHO/UNICEF Initiative for maternity units, the Breastfeeding Supportive Paediatric Unit and the Breastfeeding Supportive Workplace.



National Breastfeeding Week

Events included the launching of the Department of Health and Children's TV ad and media campaign promoting breastfeeding. See it on <http://www.healthpromotion.ie/breastfeeding/campaign/>. The breastfeeding calendar for 2004 is available and the new leaflet for pregnant parents, *Feeding Your Baby*, which originated in Northern Ireland, were also launched. Leaflets are available from Health Promotion Departments in each health board.



Quizzes for staff, parents and the general public were a feature of this year's Week in many hospitals. In **Tralee General Hospital**, 234 staff participated in their quiz with a prize of a €50 meal voucher. They also had breastfeeding displays at the hospital entrance, maternity areas, outpatients and the canteen. Displays were also organised in **Waterford Regional Hospital** and **St. Luke's Hospital, Kilkenny**. St Luke's display included breastfeeding promotion cartoons at the main entrance and on the maternity wards, and a quiz for the general public. In addition, every baby (breastfeeding or not) born during the Week received a small gift to mark the week with gifts donated by local businesses. This activity publicised breastfeeding to both the families and the local businesses. **Portiuncula Hospital, Ballinasloe** celebrated the Week by launching their new facility for staff returning to work while continuing to breastfeed. This consists of a room where staff mothers can breastfeed or express and store breastmilk in a comfortable, private environment during working hours. Staff have use of an electric breast pump and fridge and also baby changing facilities. To accommodate employees the hospital provides lactation breaks for breastfeeding mothers.



Research Update

Breastfeeding in Northern Ireland. A summary report on knowledge, attitudes and behaviour

was published by the Health Promotion Agency, Northern Ireland in March, 2003. This 16 page report presents the findings of quantitative and qualitative research into breastfeeding in Northern Ireland. It explores the level of knowledge existing in Northern Ireland about the health benefits of breastfeeding and how this and other factors influence mothers in deciding how to feed their baby. It also examines the attitudes of the general public towards breastfeeding. The report can be downloaded from www.healthpromotionagency.org.uk

Review finds absence of evidence for safe formula preparation

A systematic review of studies into the reconstitution of formula feeds and an examination of the formula on sale in the UK has concluded that there is an urgent need to minimise the risk of incorrect preparation. Only 5 studies since 1977 were identified for the review, but none was found to be of adequate quality. All found that feeds were inaccurately reconstituted. Thirty one different formulas were found on sale in one supermarket - scoop sizes varied and some preparations had never been tested. Renfrew MJ, Ansell P, Macleod KL (2003). Formula feed preparation: helping reduce the risks; a systematic review. *Arch Dis Child* 88:855-8 Abstract <http://adc.bmjournals.com/cgi/content/abstract/archdischild%3b88/10/855>

Baby Friendly hospitals ensure that all mothers are able to adequately feed their babies—do your mothers who do not breastfeed get adequate support and information in formula feeding?

A Baby Friendly Hospital in Boston, USA, has found that the significant increases in breastfeeding rates achieved as the hospital adopted the Baby Friendly standards have been maintained in the two years following accreditation. Philipp BL et al (2003). **Sustained Breastfeeding Rates at a US Baby-Friendly Hospital**. *Pediatrics* 112:e234-e236 Abstract <http://pediatrics.aapublications.org/cgi/content/abstract/112/3/e234?ct>

Research updates are available from the UNICEF UK Baby Friendly Initiative. To subscribe go to <http://www.babyfriendly.org.uk/mailling/>

Other news:

The **Children's Hospital at Tallaght**, won 1st prize for a poster submitted to the Meath Conference, "Caring - The Greatest Challenge". The poster described the process to obtain our certificate of membership and presented details of action plans and progress to date.

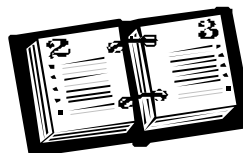
Antrim Hospital has become the third maternity service in Northern Ireland to achieve Baby Friendly accreditation. Breastfeeding rates at birth and discharge from the unit have increased by 10% since 1997 as the unit has implemented the Baby Friendly standards. Antrim follows the Ulster and Altnagelvin Hospitals in achieving the award in Northern Ireland, where 29% of all births now take place in Baby Friendly Hospitals.



**Please photocopy
BFHI LINK for
further distribution.**

We welcome your news items and suggestions.

Contact the BFHI Co-ordinator,
c/o Health Promoting Hospitals Network,
James Connolly Memorial
Hospital, Blanchardstown,
Dublin 15, email: bfhi@iol.ie



Diary Dates

Feb 20th-21st **Association of Lactation Consultants in Ireland, Annual Conference**, Maynooth. Contact: 01-8406489 or alci@iolfree.ie

Feb 27th-29th **La Leche League of Ireland Annual Conference**, Arklow. Contact: 0404-41773 or slobhanward@eircom.net

May 11th **Northern Ireland Regional Breastfeeding Conference**, Templepatrick, Co. Antrim. Contact: Health Promotion Agency 048-9031-1611 www.healthpromotionagency.org.uk

Breastfeeding is good for hospitals too

Some Questions and Answers for Hospital Administrators

Does breastfeeding really make a difference to health?

Yes. Compared to the baby who is fully breastfed for more than 13 weeks, the baby who does not receive breast milk is:

- 5 times more likely to be admitted to hospital with diarrhoea and more likely to be ill for longer,
- 2 times more likely to be admitted with respiratory disease and more likely to have severe wheezy illness,
- 2 times more likely to suffer from otitis media,
- 2 times more likely to develop eczema or a wheeze if from a family with a history of atopic disease,
- 5 times more likely to develop a urinary tract infection,
- premature infants of 30-36 weeks gestation fed formula are 10 times more likely to get necrotizing enterocolitis (NEC) than breastfed infants – a costly condition to treat and carries a 25% mortality rate.

What does that mean in money terms?

A lot of money. For example, a Scottish study looked at the economic consequences of this higher risk of gastrointestinal illness (GI). Applying these calculations to the Irish birth rate results in a cost of €6.1 million per year for hospitalisations due to GI illness for infants who are not breastfed. If the national breastfeeding rate at 13 weeks increased by 5%, there could be a saving of €300,000 per annum. If the breastfeeding rate at 13 weeks increased to 30% in line with the target of the 1994 Irish National Breastfeeding Policy, there could be a saving of €1.2 million per annum (at 1993 Scottish costs).

How much does it cost to provide infant formula for newborn infants during their hospital stay?

Try this exercise. Check the cost of bottles of ready-to-feed formula and teats to your hospital and the percentage of babies who are not breastfeeding.

1000 births with a breastfeeding rate of 40% (i.e. 60% formula feeding rate) = 600 formula fed infants x 6 feeds per day x 3 days stay = 10,800 feeds. One bottle of Ready to Feed plus teat plus vat on teat = 0.55 cent (approx price). So, 10,800 x 0.55 = €5940. In addition there is the waste management cost of disposing of over 10,800 glass bottles and a similar number of teats - and this is per 1000 births. All Irish hospitals have more births than this number and some have breastfeeding rates below 40%, so the costs can be even higher.

Why should a hospital assist staff mothers to breastfeed?

A baby who is not breastfed is 6 times more likely to experience illness resulting in three times as many maternal absences from work. In addition, compared to women who breastfeed, not breastfeeding may increase the risk of breast cancer, hip fractures in older age and retention of fat deposited during pregnancy which may result in later obesity. A healthy staff is an investment. The BFHI/HPH Breastfeeding Supportive Workplace Project helps employers to support breastfeeding among their staff, which can reduce staff turnover, create a positive corporate image and assist in recruiting staff. Ask for more details.

Does participating in the Baby Friendly Hospital Initiative (BFHI) incur costs?

The main costs involved are for policy development and initial updating of staff. A well-trained staff practising evidence based policies shows service users that the hospital cares about providing the best care. Much of the BFHI can be incorporated into quality improvement and accreditation programmes. Some of the Ten Steps of the BFHI, such as rooming-in and supplementation only for clinical need, can directly decrease costs. Lower rates of illness in breastfed babies can result in lower costs in paediatric and pharmacy services. BFHI awards can give a competitive advantage for attracting new patients.

For references for the health importance of breastfeeding, see the Interim Report of the National Committee for Breastfeeding at www.healthpromotion.ie/breastfeeding or contact BFHI in Ireland at bfhi@iol.ie

