

Clinical practices to preserve and promote breastfeeding in a COVID-19 era

Prof. Hans van Goudoever

Emma Children's Hospital, University of Amsterdam and the Free University, The Netherlands

The impact of COVID-19 on public health around the world has been profound. The public health measures in response to the pandemic have severely jeopardized hospital and community based breastfeeding promotion programs. Studies report a reduction in breastfeeding rates due to measures such as infant-parent separation, fear for transmission of SARS-CoV-2 through breastfeeding, rapid discharge from hospital and lack of in-person counselling in the postnatal period.

Several actions need to be taken to restore and improve breast feeding rates as the benefits for both mother and child are well established. These include specific antenatal care planning tailored to breastfeeding and meeting the individual needs. Not only the provision of information is important, also the way it is delivered can make a huge difference. One-to-one and face-to-face support is favored due to its ability to deliver both practical advice as well as emotional support. Alternatively, well designed internet-based information is easily accessible and may even provide a tool to reach out to populations that were not reached prior to the pandemic.

Delivery care providers should have a comprehensive breastfeeding plan implemented. Such a plan forms the intersection between maternal education/readiness and facility preparedness (i.e. the implementation of breastfeeding promoting protocols and processes), with respect to the early postpartum support of breastfeeding.

These factors, when managed with practices known to be positive for the initiation of lactation, i.e. informed decision making, initiation and maintenance of milk supply, skin-to-skin care, and direct breastfeeding, will allow for an increase in the rates of human milk usage at discharge. Perhaps now, more than previously, it is important for healthcare professionals to acknowledge the value of such antenatal planning as well as staff education related to breastfeeding and human milk policy and protocol development.