

A call to action: Ensuring coming to volume for all lactating parents

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Many families around the world are not able to meet their personal breastfeeding goals. Only 41% of infants worldwide receive exclusive human milk for the first six months (UNICEF & WHO, 2018). These reports reinforce that there is much work to be done to improve exclusivity and duration of breastfeeding in order to reduce mortality and morbidity of infants worldwide (UNICEF & WHO, 2018; UNICEF, 2018). Currently, only 42% of infants are breastfed within one hour of birth (UNICEF & WHO, 2018).

Both the lactating parent and their infant could bring risk factors that may significantly impact the ability to effectively come to volume. This presentation will focus on antenatal assessment of risk and development of pro-active management strategies. Maternal age, obesity and delivery by cesarean birth have all been implicated to influence milk supply. Current research at CHOP dispels these presumed risk factors. After analysis of all demographic variables, the 3 groups showed no statistically significant differences except maternal weight gain during pregnancy. Statistically significant differences are seen when considering the timing of initiation of lactation and subsequently, the number of feeds/pumps and maternal milk volume. This research identifies a critical window of opportunity for lactation initiation: the time between the infant's birth and the feed/milk expression, as well as the patterns of feeding/milk expression during the postpartum hospital stay, are key drivers for maternal milk supply.

Health care providers should provide anticipatory guidance to educate and emphasize the importance of early and frequent feedings/milk expression so that all women can reach their personal breastfeeding goals.

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