THE FOCUS AFTER DELIVERY

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OVERVIEW

• Impact of the Birthing Process
• The Golden Hour
• Skin to Skin
• 9 Stages of Adaptation
• Hand Expression

IMPACT OF THE BIRTHING PROCESS

Risk factors for delayed or impaired breastfeeding initiation:
• Medications
• Induction
• Prolonged labor
• Operative vaginal delivery
• C-section
• Infant oral suctioning

MATERNAL MEDICATIONS

• Transfer from epidural space to the placenta and breastmilk
• Diminish and/or impair early sucking
• Increase supplementation, bottle feeding, and breastfeeding cessation rates
• Increase risk of excessive newborn weight loss

Fentanyl Effect

LABOR INDUCTION

The probability of babies sucking in the first hour of life related to maternal epidural:

MATERNAL MEDICATIONS
LABOR INDUCTION

Two types of oxytocin:
- Endogenous
- Exogenous

LABOR INDUCTION

Maternal effects of Pitocin administration during labor:
- Increased cortisol levels
- Increased edema in breast and nipple tissues, delaying lactogenesis II
- Decreased endogenous oxytocin levels measured during breastfeeding at 2 days postpartum

LABOR INDUCTION

Neonatal effects of Pitocin administration during labor:
- Increased lactate levels in amniotic fluid during labor
- Delayed onset and reduced duration of breastfeeding
- Low levels of infant pre-feeding cues and organization
- Less optimal infant sucking
- Increased odds of breastfeeding cessation at 3 months postpartum

LABOR INDUCTION

The probability of babies sucking in the first hour of life related to maternal administration of Pitocin:

IMPACT OF LABOR AND DELIVERY

Prolonged labor:
- Disrupts bony configuration and alignment
- Compresses brain and CNS structures
- Both necessary for effective breastfeeding

Operative vaginal delivery:
- Disrupted bones & compressed nerves
- Injury
- Bruising

C-SECTION

- Decreased milk transfer
- Decreases maternal self-efficacy
- Require significantly more lactation support and monitoring
INFANT ORAL SUCTIONING

Causes:
• Physical injury to oropharynx
• Nasal edema & nasal stuffiness
• Negative physiologic changes

Results in:
• Disrupted pre-feeding behavior and cues
• Decreased desire to latch on for several days
• Oral defensiveness and aversion

THE GOLDEN HOUR

• Begins immediately after delivery
• Infant is placed prone on the mother’s chest
• Delay routine medical and nursing procedures until after the first feeding is completed
• NICU: facilitated during mother’s first visit whenever possible

THE GOLDEN HOUR

Honoring this sacred hour provides a great opportunity for educating parents on:
• Benefits of skin to skin
• Feeding cues
• Breastfeeding recommendations and expectations

BENEFITS OF GOLDEN HOUR

• “Touch is healing” (skin to skin)
• Provides comfort and familiarity to infant
• Mother’s normal bodily bacteria colonizes her infant
• Facilitates recognition of the mother’s scent, both axilla and milk

BENEFITS OF GOLDEN HOUR

• Both mother and baby are at a heightened state of readiness
• Facilitates first breastfeeding experience
• Maternal-newborn bonding is the strongest in the first 1-2 hours after birth
• Sets the stages for a positive parent-child relationship in the future
• NICU: if skin to skin is not possible, the mother may provide hand containment

9 STAGES OF NEWBORN ADAPTATION

1. Birth Cry
2. Relaxation
3. Awakening
4. Activity
5. Resting
6. Crawling
7. Familiarization
8. Suckling
9. Sleep
9 STAGES OF NEWBORN ADAPTATION

- Occurs during the golden hour for a healthy infant born to an unmedicated mother
- If there are no interruptions this process occurs within approximately 60 minutes
- If the mother receives medication during labor, achievement of the stages may be delayed

BARRIERS TO SKIN TO SKIN

- Maternal medications during labor
- Maternal illness
- 5-minute Apgar score < 6
- Infant separation
- NICU admission
- Visitors
- Knowledge gap of parents and/or staff

BENEFITS OF CONTINUED SKIN TO SKIN

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<tr>
<th>Maternal</th>
<th>Maternal-Infant</th>
<th>Infant</th>
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| • Enhanced milk volume  
• Decreased engorgement  
• Increased maternal levels of oxytocin & prolactin  
• Boosts maternal confidence | • Increases exclusive breastfeeding rates and duration  
• Enhanced maternal-infant bonding  
• Emotional support (calms & relaxes) for both mother and infant | • Stability of blood glucose  
• Improved thermoregulation  
• Increased weight gain  
• Decreased weight loss in hospital  
• Decreased crying  
• Cardiorespiratory stability  
• Analgesia for painful procedures |

SKIN TO SKIN WITH PRETERM INFANTS

• Increases success of breastfeeding
• Familiarizes the infant with scent, sight, and sensations associated with breastfeeding
• Gradually develops into rooting, licking, and tasting
• Facilitates latch and eventually suckling

SUPPORT PERSONS CAN PERFORM SKIN TO SKIN TOO!

ROOMING IN

24 hour rooming in:
• Facilitates optimal breastfeeding initiation
• Results in longer breastfeeding duration
• Enhances parental infant bonding
• Provides a realistic perspective of newborn behaviors and feeding schedules
• Babies like it!
**ROOMING IN**

“Whenever possible, mothers and infants are to remain together during the hospital stay.”

**AAP, 2012**

**DELAYED BATHING**

- Promotes physiologic stability of the newborn
- Vernix:
  - Maternal scent
  - Natural physiologic bonding

**HAND EXPRESSION**

- Perform in the first hours after delivery
- Continue to perform for 3-5 minutes several times a day
- Teach in the antenatal period
- Helpful when latch difficulties present and/or infant at risk of hypoglycemia and supplementation
- Collect in institution approved vessel for future use
- Can replace electric pumping if desired

**HAND EXPRESSION**

Studies demonstrated:
- Milk production in pump-dependent mothers of preterm babies depended on the frequency they used hand expression in the first 3 days after delivery
- Mothers who used hand expression more than 5 times a day in the first 3 days, yet pumped with the same frequency as other study mothers, expressed an average of 955 mls, about a quart a day by 8 weeks. This is more than a term 4 month old would need!
- At 2 months, mothers assigned to hand expression were more likely to be breastfeeding (96.1%) than mothers assigned to breast pumping (72.7%)

**HAND EXPRESSION - TIPS**

- There is no right way
- Find the sweet spot
- Should not be painful
- 50/50 massage and compression
- Alternate breasts
- Adding “2 more fingers” from a 2nd hand can increase milk flow significantly
- Practice, practice, practice!

**EARLY HAND EXPRESSION INCREASES LATER MILK PRODUCTION**
THE BASICS OF BREAST MASSAGE AND HAND EXPRESSION

REFERENCES


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