



Academy of Breastfeeding Medicine Newsletter

April 2024

A newsletter offering for Academy of Breastfeeding Medicine members and colleagues from across the world.

Welcome to Inside ABM! Come on in!



INSIDE ABM IS 1!

We are 1! One year ago, *Inside ABM*'s first issue launched and has been going strong ever since with over **40,000 clicks** registered. Let's celebrate with a commitment to another year of great content that is worth the click.

If you have ideas for items to include in the second year of *Inside ABM* and/or are interested in being a part of the newsletter team, please contact abm@bfmed.org. We would love to get your ideas out into the ABM Universe!



Access the Handout

Hypoglycemia: Low Blood Sugar in Newborns



We are proud to expand our popular parent handouts with the newest addition, "Hypoglycemia: Low Blood Sugar in Newborns," derived from our [Clinical Protocol #1](#): "Guidelines for Glucose Monitoring and Treatment of Hypoglycemia in Term and Late Preterm Neonates, (Revised 2021)". Keep an eye out for its availability in more languages.



ABM Position Statement on Paid Maternity Leave

If you could make the rules for the entire world on paid maternity leave, what would they be? This position statement provides a very compelling model for a fair, safe, equitable, and beneficial parental leave policy. In this spotlight segment, we shine a light on some interesting points that bubbled to the top for newsletter contributors while reviewing the piece. We also included some thought-provoking questions for you, *Reader*.

- **Table 1** in the position statement compares terms and wages for maternity and paternity leave from select countries worldwide. As expected, the length of maternity leave varies from 12 to 68 weeks (Norway!) with some countries paying 100% of maternal wages through 28 weeks (India!). **ABM recommends a global standard of a 26-week leave with 100% pay.**
 - *Reader, what would be your recommendation if you could set the standard for YOUR country for the length of maternity leave, balancing the geopolitical and economic forces at play?*
- **"Mothers should not be forced to stop breastfeeding because they return to work."** This is a powerful excerpt from the statement, yet many factors are at play, including work culture, the ability to be in proximity to the infant at work, pump breaks, and more. Unfortunately, this choice is a reality for many patients across the globe. This is a tricky risk-benefit equation to work within because, on a global scale, both maternal employment and breastfeeding increase infant survival. Check out our position statement entitled "[Breastfeeding Support for Mothers in Workplace Employment or Educational Settings: Summary Statement](#)" for more recommendations for optimizing work policy and culture:
 - *Reader, what would your recommendation be to a mother in your country who feels they must choose between returning to work or breastfeeding?*
- One thing that struck us when reviewing this statement is the vast number of challenges our families face when navigating the workplace and breastfeeding scene. These issues are front-of-mind for many workers long before the infant is born. Talking through challenges and ideas sooner rather than later can help address families' concerns and address myths and misinformation.
 - ***Our last question for you, Reader, is this: What are two things YOU can start doing or saying today to help new mothers navigate our currently flawed systems?***

Citations:

Bettinelli, M. E., Smith, J. P., Haider, R., Sulaiman, Z., Stehel, E., Young, M., & Bartick, M. (2024). ABM Position Statement: Paid Maternity Leave—Importance to Society, Breastfeeding, and Sustainable Development. *Breastfeeding Medicine*, 19(3), 141–151. <https://doi.org/10.1089/bfm.2024.29266.meb>

Marinelli, K. A., Moren, K., & Taylor, and The Academy of Breastfeeding Medicine, J. S. (2013). Breastfeeding Support for Mothers in Workplace Employment or Educational Settings: Summary Statement. *Breastfeeding Medicine*, 8(1), 137–142. <https://doi.org/10.1089/bfm.2013.9999>



Question of the Month

Adequate maternity leave has which of the following effects on breastfeeding and the breastfeeding dyad across most studies?

- a. Prolonged breastfeeding continuation
- b. Improved infant weight gain
- c. Improved infant iron stores
- d. Decreased frequency of feeds per day

Answer at the bottom of the newsletter

ABM Updates & News

Hear from Nan Dahlquist, MD FABM IBCLC, on the benefits of an FABM credential:



[Learn More!](#)

Apply for the Fellowship in Breastfeeding Medicine (FABM) Today!

Have you been an ABM member for 5 consecutive years? Attended 3 or more ABM Annual or Regional Conferences? Exhibited breastfeeding medicine expertise in the past 10 years? You may qualify to join ABM's prestigious group of Fellows, leaders who elevate the importance of breastfeeding medicine among their peers across disciplines!

Applications close June 1! Apply today.

A graphic for the "GRAND ROUNDS WEBINAR SERIES". It features the ABM logo and the text "ACADEMY OF Breastfeeding Medicine". The main title is "CASE STUDIES: SUPPORTING BREASTFEEDING FROM THE NICU TO TRANSITIONING HOME". The date and time are "12PM CDT" and "MONDAY, MAY 20". The speakers are "DR. EYLA BOIES, DR. SHRUTI GUPTA, DANA CZUCZKA". It also mentions "UP TO 1 AMA PRA CATEGORY 1 CREDITS".

[Set a reminder with a calendar link!](#)

Save the Date! "Case Studies: Supporting Breastfeeding from the NICU to Transitioning Home"

In ABM's next Grand Round, Shruti Gupta, MD MBBS, Eyla Boies, MD, and Dana Czuczka, MPH IBCLC, will discuss case studies on how to support a family's breastfeeding journey from the time the baby is born to when the infant is ready for discharge, and then how to transition the infant to direct breastfeeding after discharge. This session will help medical and nursing providers understand the unique requirements of a preterm mother-baby dyad in the NICU and after discharge.

Can't make it live? Plan to register and get access to the on-demand recording! For more information and to register, [visit our website](#).

Missed our February, March, or April Grand Rounds? Access the on-demand recordings [here!](#) (And don't forget to fill out your evaluations to get credit!)

The University of Virginia School of Medicine and School of Nursing designates these live activities for a maximum of **1 AMA PRA Category 1 Credits** per webinar to a participant who successfully completes this educational activity.

[ABM Grand Rounds](#) is a monthly live webinar program addressing current clinical practice guidelines in the care of breastfeeding parents and infants. Webinars will be recorded and offered as on-demand content afterward in the [ABM Education Center](#).



[More Information](#)

Have you booked your trip to Schaumburg, IL, USA yet?

Don't wait to book your flights and hotel rooms! The 29th Annual International Meeting will be held in Schaumburg, IL, USA, from November 14-17, 2024. If you are not planning on attending preconference sessions, aim to arrive in the evening on Thursday, November 14.

Check out our [website](#) for hotel and travel information. Conference registration will open in early June. [Mark your calendar](#) so you don't miss it!

See you in November!



[Sign the Letter](#)

Take Action with the US Breastfeeding Committee!

Help expand breastfeeding support and protections! Join the USBC and call on policymakers to pass this organizational sign-on letter to increase federal investments for breastfeeding.

Have You Seen This?

Much-Needed Research on Existing Tongue-Tie Research

Those of us who practice clinical breastfeeding medicine manage breastfeeding in the face of ankyloglossia quite frequently. It is, indeed, a common physical finding affecting 4% to 11% of infants, but we are plagued with a lack of scientific consensus on approach and management due to multiple factors, including:

- The wide variety of clinical entities from IBCLCs to dentists who identify and treat the condition
- Multiple tools and scales are available to diagnose and classify ankyloglossia
- Social media influencers sharing misinformation
- Lack of consensus and treatment in the body of research

I was happy to see a recent systematic review released in January 2024 on this topic, which included the analysis of 21 studies and over 1,900 dyads with over 1,700 infants' s/p frenotomy.

The review focused on the following breastfeeding and pediatric metrics:

- breastfeeding self-efficacy
- maternal nipple pain
- infant gastroesophageal reflux
- overall breastfeeding quality measured by latch score

The meta-analysis in the review included 14 studies. The authors were careful to disclose the quality of the research to give the reader the opportunity to assess the data, as studies on ankyloglossia vary greatly and lack standard treatment models. The compelling forest plots illustrate the proposed conclusion that "... in symptomatic mother-infant dyads with breastfeeding difficulties, surgical frenotomy significantly improves maternal pain, breastfeeding self-efficacy and infant latch and possibly gastroesophageal reflux."

Interesting points to consider are that the systematic review was international, although treatment in Western countries was much more frequent. The review only analyzed surgical interventions, as opposed to laser ablation. Further, both anterior and posterior tongue ties were included without differentiation, which could be problematic in data interpretation.

This "research on research" adds to the solid body of evidence that surgical treatment for ankyloglossia is justified in symptomatic dyads.

Citation: Cordray H, Raol N, Mahendran GN, Tey CS, Nemeth J, Sutcliffe A, Ingram J, Sharp WG Quantitative impact of frenotomy on breastfeeding: a systematic review and meta-analysis. *Pediatr Res.* 2024 Jan; 95(1):34-42. <https://doi.org/10.1038/s41390-023-02784-y>. Epub 2023 Aug 22. PMID: 37608056.

(Written by **Paula Schreck, MD IBCLC FABM**)

Question of the Month Answer:

ANSWER: a. Prolonged breastfeeding continuation.

Improvement in breastfeeding continuation and other breastfeeding outcomes such as exclusivity are the most studied benefits of breastfeeding. However, other support must also be provided. Some countries, such as the UK and Canada, have long maternity leaves but poor outcomes.



Inside ABM

Newsletter Chair: Paula K. Schreck, MD IBCLC FABM

Questions: Email ABM Staff at abm@bfmed.org

Academy of Breastfeeding Medicine
8735 W. Higgins Road, Suite 300
Chicago, IL 60631
(800) 990.4ABM (USA toll free)
(847) 375.4726 (phone)
(847) 375.4713 Attn: ABM (fax)
abm@bfmed.org | www.bfmed.org

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