



Academy of Breastfeeding Medicine Newsletter

February 2024

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

Welcome to Inside ABM! Come on in!

We are happy to present the **10th issue** of *Inside ABM*!

Inside ABM is our way of communicating with ABM members, future ABM members, supporters, and friends about exciting things happening in our organization and in the field of Breastfeeding Medicine.

In this issue you will find ABM's response to an article in the news on microplastics in breast milk and an interview with Anne Eglash, MD IBCLC FABM, who discussed this in her iABLE forum. Also, don't miss reading this month's *Have You Seen This?* Column, entitled: "What Else is in Breast Milk? Antibodies! Hooray!" by Inside ABM newsletter editor, Paula K. Schreck, MD IBCLC FABM.

And don't forget to check out the ABM Updates section where you'll find information on the Call for Abstracts for the 29th Annual International Meeting, our new webinar series ABM Grand Rounds, fellowship applications, volunteering on the protocol committee, and more!

If you have ideas for items to include in future issues 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!



Recent Article on Microplastics and Breast Milk in the News

We navigated tongue tie narratives in the literature last month. Round 2: Just this month, ANOTHER article in the press raised an alarm in the breastfeeding community. Did you happen to see this article from the Washington Post?

Jillian Pretzil. [Microplastics have been found in breast milk. Will that hurt my baby?](#) The Washington Post. February 5, 2024.

The article in the Washington Post reviewed several small studies and statements from the last 5 years that describe findings of microplastics and other chemicals associated with plastic manufacturing in breast milk. The article seems to question the present and future safety of breastfeeding despite powerful quotes from international breastfeeding experts — including Larry Grummer-Straun, PhD — that emphasize that benefits outweigh risks. Many ABM leaders responded using their forums including Anne Eglash, MD IBCLC FABM. We reached out to Dr. Eglash for more insight. Dr. Eglash is the President of iABLE, the Institute for the Advancement of Breastfeeding and Lactation Education and a founding member of ABM! Dr. Eglash answered the following questions to help us navigate this latest perspective on breastfeeding:

In the author's own words...

Dr. Eglash, why did you decide to feature it on your iABLE Forum?

I thought it was important for the iABLE members to know that this is what families are reading. The use of human milk as a biomarker of environmental substance burden makes sense, but the information can be used to raise skepticism regarding the safety of human milk.

What shortfalls or misses did you find in this journalist's offering? I felt that the journalist needed to stress the importance of human milk despite the presence of toxins. Despite living in polluted societies, breastfed children have better health outcomes, including a lower risk of leukemia. In fact, a recent study in China found that breastfeeding protects children from chronic lung disease due to air pollution.

What about any valuable points in the piece?

I appreciate that they raise awareness regarding how polluted our society is. I hope the article encourages people to advocate for safer consumer products — if not for themselves, for their children.

The plastic bottle vs. the formula: What do you think carries the greatest risk for the infant? I would recommend glass bottles. In fact, that is what I used with my children in the 1990s, and they are still around.

What would you say to a mother who has concerns about the safety of her milk and is considering formula feeding? We have consistently proven that formula-fed infants have a higher risk of morbidity and mortality. Despite knowing that environmental toxins are in breast milk, the anti-inflammatory and other bioactive factors appear to protect infants and children from the negative impact of these exposures. I would also encourage lactating parents to consider consuming an organic diet as much as possible.

Getting to Know the Author

Which would you prefer? Ticket to the Superbowl or Tickets to a Taylor Swift Concert? Ha Ha, Taylor Swift!

What is your favorite time of day? Daybreak, watching the sun come up

Additional Resources

For more background content on exposure to microplastics and plastic toxins check out this free review article:

Citation: Sripada K, Wierzbicka A, Abass K, Grimalt JO, Erbe A, Röllin HB, Weihe P, Díaz GJ, Singh RR, Visnes T, Rautio A, Odland JØ, Wagner M. A Children's Health Perspective on Nano- and Microplastics. Environ Health Perspect. 2022 Jan;130(1):15001. doi: 10.1289/EHP9086. Epub 2022 Jan 26. PMID: 35080434; PMCID: PMC8791070.

LINK: https://ehp.niehs.nih.gov/doi/10.1289/EHP9086?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20%20pubmed

To review a study on the infant exposure to plastics through formula and bottle use check out this article:

Citation: Kadac-Czapska K, Jutrzenka Trzebiatowska P, Mazurkiewicz M, Kowalczyk P, Knez E, Behrendt M, Mahlik S, Zaleska-Medynska A, Grembecka M. Isolation and identification of microplastics in infant formulas - A potential health risk for children. Food Chem. 2024 May 15;440:138246. doi: 10.1016/j.foodchem.2023.138246. Epub 2023 Dec 22. PMID: 38154286.

LINK: <https://www.sciencedirect.com/science/article/pii/S0308814623028649?via%3Dihub>



President's Column: Breastfeeding Is Not Only About an Individual Choice...

Elien Rouw, MD, FABM 16 February 2024

On December 18, 2023, the NY Times published two articles about tongue tie release and the potential problems with the increase in this surgical procedure in the last years. I won't go into the details and the scientific discussion on the diagnosis, differential diagnosis, and possible therapy on sucking disorders in general and on tongue tie release, the controversy on after care regimens, and of consequences from possible other oral restrictions, like lip ties and buccal ties, which recently have also seen a higher incidence of diagnosis. Other publications, like the statement of the Academy of Breastfeeding Medicine on this topic have addressed these issues. [Read more.](#)

ABM Updates & Membership News



Call for Abstracts Still Open! Share your research and expertise at the 29th Annual International Meeting

The Call for Abstracts and Workshops for the [29th Annual International Meeting](#) is open! This meeting will take place in Schaumburg, Illinois, USA, on November 14-17, 2024. To provide a broad array of learning opportunities, ABM is planning to hold a hybrid meeting with both live and virtual components.

Visit the [ABM website](#) to learn more about these opportunities to share your research and clinical skills with the breastfeeding community. All completed abstract and workshop proposals must be submitted by **Tuesday, March 5, 2024**. Want to learn more about the process of submitting a poster abstract at our conference? [Watch this webinar](#) the Leadership Academy hosted on February 8.



ABM Grand Rounds: Next Webinar Wednesday, March 27, at 11am CDT

Yesterday ABM launched Grand Rounds, a live webinar program offered each month, that addresses current clinical practice guidelines in the care of breastfeeding parents and infants. The inaugural session reviewed updated, evidence-based recommendations regarding counseling and management of breastfeeding among people with substance use and substance use disorder in pregnancy and during lactation. On-demand access to the recording will be available in the next few business days. To purchase, [visit our website](#).

[Learn More!](#)

Next month, ABM's Grand Rounds webinar will be a case study discussion on substance use and substance use disorder related to breastfeeding and pregnancy, hosted by Dr. Miriam Harris. Stay tuned for registration info! 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.



Call for Protocol Committee Volunteers

ABM's Protocols aim to promote best practices in breastfeeding medicine, and there are many opportunities to participate in the development of a protocol. ABM is seeking passionate volunteers of various different backgrounds, skills and disciplines to get involved as authors, reviewers, translators, and Protocol Committee members. [Fill out this form](#) to tell us what you are interested in, and what knowledge and skills you bring in order to help us identify the best ways for you to get involved with ABM Protocols.

[Learn More!](#)

Interest in any of these protocols can be indicated on the protocol volunteer form linked above. If you have any questions, please reach out to abm@bfmed.org.



Learn More!

Fellowship Preparedness

Have you been an ABM member for 5 consecutive years?
Attended 3 or more ABM Annual or Regional Conferences?
Conducted 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 do not open until this spring, but make time today to gather your materials for an easy submission process. New applicants can find the most up-to-date information regarding fellowship requirements and submission instructions.

Have You Seen This?

What Else is in Breast milk? Antibodies! Hooray!

Well, let's shift to some good news about what's in breast milk...ANTIBODIES. You may be thinking, "I knew this already." Indeed we have known about the immunologic value of breast milk for generations, but a recent article out of Chulalongkorn University in Bangkok, Thailand provides more evidence of breast milk's role in passive infant immunity in the context of COVID-19.

Citation with Link to Abstract: Suteerotrakool, O., Mekangkul, E., Ananta, P., Maitreechit, D., Khabuan, S., Sodsai, P., Hirankarn, N., Thumbovorn, R., & Chomtho, S. (2023). The Persistence of Specific Immunoglobulin A Against SARS-CoV-2 in Human Milk After Maternal COVID-19 Vaccination. *Breastfeeding Medicine*, 18(12), 943–950. <https://doi.org/10.1089/bfm.2023.0210>

This longitudinal cohort study was done in the context of the COVID-19 experience in Thailand. Over 5 million people were infected during the first waves of the pandemic and vaccines were in short supply. The Thai population had varying experiences with the access to the vaccine and often received different types of vaccine as part of their series (a combination of killed vaccine vs. vector vaccine vs. mRNA vaccine.) Further, many Thai people had "hybrid immunity" from COVID infection AND a combination of one or more vaccines.

It is well established that breast milk conveys sIgA specific to SARS-CoV-2 after lactating person infection and after lactating person vaccination. This study sought a better understanding of immunity conveyed in breast milk after combinations of different types of vaccine AND infection.

The study was part of a larger national infant feeding study. Eighty-eight lactating persons with health term singletons were enrolled between March and December of 2022. All participants received 2-3 of any form of COVID vaccination and/or had a positive COVID test within 6 months before enrollment. Breast milk samples were collected and analyzed at 1, 3, and 6 months post vaccination or infection. 50% of enrollees had received 2 vaccines AND had been infected whereas only about 40% had just received vaccinations. A small number of participants received more than 2 vaccines.

Some main results were as follows:

1. sIGA antibodies specific to SARS-CoV-2 were detected 6 months after infection and/or vaccination.

2. sIgA levels at 1, 3, and 6 months was higher in lactating women who received immunization and experienced infection (hybrid immunity) compared to those who experienced vaccination alone (COVID-naive)
3. More vaccine was necessarily not better when it comes to breast milk sIgA with no statistical difference found in antibody levels when more than 2 doses of vaccine were received, irrespective of COVID infection. (Note: the authors did cite other studies that demonstrate benefit to booster vaccines).
4. There was no difference in sIgA levels based on the type of vaccine. There was also no difference noted when the lactating person reported asymptomatic vs. symptomatic COVID infection.

Despite the limited sample size and the singular type of immunity measured, this study contributes to the body of literature on immunologic benefits of breast milk which must be balanced against risks of plastics/toxins and more. Protection against infectious disease seems to win on the risk benefit teeter-totter as a real, present, and larger benefit. The authors should be commended for studying this common real-life compound scenario of infection AND vaccination.

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



Question of the Month

Which of the following is a way to decrease the breastfeeding infant's exposure to microplastics and other toxic chemicals in our environment?

- a. Focus on direct breastfeeding whenever possible to avoid the use of plastic pump parts and storage
- b. Use glass storage and bottles
- c. Lactating parents should avoid their own use of plastic water bottles
- d. All of the above

Answer at bottom of newsletter

CHAMPS National enrolling 100 hospitals nationally to improve maternity care practices and breastfeeding rates!

CHAMPS National, a CDC-funded program out of the Center for Health Equity, Education, and Research (CHEER), is actively seeking hospitals to sign up for a national initiative to improve exclusive breastfeeding rates and decrease racial disparities.

Hospitals are being enrolled on a rolling basis and will receive free training and support from a diverse team of experts to safely implement the World Health Organization/UNICEF's Ten Steps to Successful Breastfeeding. Medical doctors are key stakeholders in breastfeeding promotion, protection and support. Involvement in CHAMPS National will translate to increased preparedness by US doctors as a component of Step 2. Experts from the CHAMPS National team will also provide assistance to update hospital policies that support exclusive breastfeeding. Many of our ABM protocols, such as hypoglycemia and hyperbilirubinemia, will be used as the evidence-based "gold standard" for making recommended updates. Four physicians are consulting with CHAMPS National to provide physician expertise and training: Dr. Lori Feldman-Winter, MD MPH FAAP FABM, Dr. Lorimar Ortiz Ortiz, MD IBCLC, Dr. Michelle Owens, MD, and Dr. Meg Parker, MD MPH.

CHAMPS National has enrolled [57 hospitals](#) to date and is particularly interested in signing up sites in areas of high need serving racially diverse populations. The program is also seeking hospitals that want to work on increasing exclusive breastfeeding rates.

To sign up, please complete and email an [Expression of Interest form](#) to champs.breastfeed@gmail.com. You can find more information on CHEER's website: cheerequity.org/champsnational.

Not an ABM Member? If you are passionate about breastfeeding, then ABM is for YOU!

Be part of a global, multidisciplinary community and enjoy these [member benefits](#). Join and take advantage of member registration rates for the Annual International Meeting.

[Join Today!](#)

Question of the Month Answer:

ANSWER: d.

All of the above. Direct breastfeeding, use of glass for storage and feeding and parental avoidance of use of plastic all have been associated with decreased microplastic contamination of breast milk.



ABM Insider

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