



Share with other maternal and child health nurses and nutritionists in your agency.

❖ WIC-Specific Item

❖ WIC BREAST PUMPS

- A reminder that the Medela Lactina™ and the Hollister Elite™ electric breast pumps are considered sensitive assets and must be added to the WIC inventory and have a WIC ID sticker before loaning to participants.

The following information is needed to add the breast pump(s) to the WIC inventory:

- clinic # where the breast pump will be stored
- make (Medela or Hollister)
- type (Breast Pump)
- model (Lactina™ or Elite™)
- serial number
- location

This information should be sent to Arlene Low via email, <mailto:lowaa@dhfs.state.wi.us> or by fax, 608/266-3125. When the information is received, the breast pump(s) will be added to the project's inventory and the necessary sticker(s) will be sent.

- The next breast pump order is due to the State WIC Office by the end of the day on Friday, December 5th for pumps that will be delivered in January.
- We are in the process of finalizing the breast pump bid for purchases starting with the December order and as a result of this bid we will need to revise the breast pump order form. This form will be sent to the WIC Breastfeeding Coordinators via email and posted on the website when the revisions are completed.

BREASTFEEDING RESOURCES FROM THE OFFICE OF WOMEN'S HEALTH

- **Breastfeeding Helpline** ! The National Women's Health Information Center (NWHIC) breastfeeding helpline can answer basic breastfeeding concerns. They have trained information specialists to answer breastfeeding questions in English and Spanish, order free breastfeeding publications and direct callers to organizations that can provide additional assistance. Call 1-800-994-9662 or TDD 1-888-220-5446.

- **Free Breastfeeding Information Packets Now Available in English, Spanish and Chinese!**
These information sheets are available through the toll-free call center 1-800-994-9662, and online. They may also be reproduced as needed.
Spanish: <http://www.4woman.gov/Breastfeeding/Spanish/sp-breastfeeding.pdf>
Chinese: <http://www.4woman.gov/Breastfeeding/bf-chinese.pdf>
English: <http://www.4woman.gov/Breastfeeding/Breastfeeding.pdf>

- **New "An Easy Guide to Breastfeeding for American Indian and Alaska Native Families".**
This publication provides information and encouragement to American Indian and Alaska Native women to breastfeed. It explains the benefits for baby, mom and society, and also provides frequently asked questions and answers about breastfeeding. It also stresses the importance of breastfeeding in the American Indian and Alaska Native community, provides information on how this issue is being addressed, and how to talk to healthcare providers about breastfeeding.

- **For Health Professionals: Breastfeeding Support and Promotion Information Free from NWHIC.** The U.S. Department of Health and Human Services' Office on Women's Health recognizes the critical role of knowledgeable health care professionals in promoting and supporting breastfeeding. The Office on Women's Health supported The American Academy of Pediatrics in the development of the AAP Speaker's Kit on Breastfeeding Promotion and Management that will enable health care professionals to educate themselves and their colleagues while spreading the message about breastfeeding in the community.

The CD-ROM, "Breastfeeding Support and Promotion," provides a comprehensive discussion of the key topic areas, including management strategies for common breastfeeding challenges. Speaker's notes are available with each slide on the CD-ROM.

Health professionals may request a free copy of the kit by calling NWHIC at 1-800-994-9662.

For information go to <http://www.4woman.gov> .

ENVIRONMENTAL CONTAMINANTS, BIOMONITORING AND BREASTMILK

The issue of environmental contaminants and breastmilk has been in the news the past few weeks after a study was released by the Environmental Working Group on flame-retardants. From this study the key message is that further research should be conducted on the extent of environmental contamination in the United States. Ways to decrease exposure to these contaminants should also be investigated and/or considered, including banning certain chemicals and certain uses. Breastmilk remains the best choice for infant feeding. The link to the full article is <http://www.ewg.org/reports/mothersmilk/part5.php> .

The use of biomonitoring is becoming more popular as technology has allowed the levels of contaminants in body fluids to be identified at lower and lower levels. Biomonitoring involves looking for "pollution in people" by testing bodily substances, usually blood and urine, for the presence of harmful substances, such as dioxins, polychlorinated biphenyls, or PCBs, and DDT. Traditionally, estimates of human exposure to toxic substances have been based on measurements of chemicals found in food, soil, air and water. Because many chemicals accumulate in the fat cells of the breasts, the milk of new

mothers, particularly during the first few weeks of nursing, contains a high concentration of chemicals. Testing the milk could offer insight into any possible connection between pollution and disease, but it doesn't mean that breastfeeding should be abandoned. In many cases infant formula contains levels of contaminants higher than that of breastmilk. It is likely that biomonitoring is the "wave" of future research.

For more information:

La Leche League's statement on environmental contamination,

<http://www.lalecheleague.org/Release/contaminants.html>

ILCA Position Paper: Breastfeeding, Breast Milk, and Environmental Contaminants

<http://www.ilca.org/pubs/pospapers/EnvironContPP.pdf>

LOVING SUPPORT POSTER SETS

I have additional Loving Support logo posters as well as additional sets (3 posters) of the Loving Support posters in English, Spanish and Native American. Please contact Mary Pesik if you would like to receive these posters.

COALITION ACTIVITIES

The Milwaukee County Breastfeeding Coalition, the Brown County Breastfeeding Coalition, the Chippewa Valley Breastfeeding Taskforce and the Wisconsin Breastfeeding Coalition meeting minutes are attached.

IN THE NEWS

- Jonathan A. Finkelstein, Susan S. Huang, James Daniel, Sheryl L. Rifas-Shiman, Ken Kleinman, Donald Goldmann, Stephen I. Pelton, Alfred DeMaria, and Richard Platt.
Antibiotic-Resistant *Streptococcus pneumoniae* in the Heptavalent Pneumococcal Conjugate Vaccine Era: Predictors of Carriage in a Multicommunity Sample.
Pediatrics, Oct 2003; 112: 862 - 869.
- Sheila Gahagan and Janet Silverstein. **Prevention and Treatment of Type 2 Diabetes Mellitus in Children, With Special Emphasis on American Indian and Alaska Native Children.**
Pediatrics, Oct 2003; 112: e328. Full access is available for this report (20 pages) is available at <http://www.aap.org>. It does report that the evidence suggests that modifiable risks for type 2 diabetes mellitus include obesity and lack of breastfeeding and that prevention efforts can focus on the prevention of obesity in children and the promotion of breastfeeding.
- **Impact of postnatal depression on breastfeeding duration.** Henderson JJ, Evans SF, Straton JA, Priest SR, Hagan R. Women and Infants Research Foundation, King Edward Memorial Hospital, Perth, Western Australia, Australia. Birth. 2003 Sep;30(3):175-80.
Postnatal depression can cause adverse effects on both mother and infant, but its impact on breastfeeding duration is poorly understood. The aim of this study was to investigate the relationship between maternal postnatal depression and breastfeeding duration. A cohort of 1745 women was recruited on the postnatal wards of two large Australian obstetric hospitals. Self-report

questionnaires were completed at recruitment, and at 2, 6, and 12 months postpartum. Breastfeeding status was determined at each follow-up, and the Edinburgh Postnatal Depression Scale was used to screen for symptoms of depression. Diagnostic psychological interviews were conducted on a subsample of women at each interval. Breastfeeding was initiated by 96 percent of the participants; at 2 months 79 percent were still breastfeeding, 57 percent at 6 months, and 22 percent at 12 months. Of the 18 percent of participants diagnosed with postnatal depression, the onset occurred before 2 months in 63 percent of cases. Median duration of breastfeeding was 26 weeks for women with early-onset depression, 28 weeks for women with late-onset depression, and 39 weeks for women without depression. After adjustment for confounding factors, early cessation of breastfeeding was found to be significantly associated with postnatal depression. Onset of postnatal depression occurred before cessation of breastfeeding in most cases. Postnatal depression has a significant negative impact on breastfeeding duration. Assistance with breastfeeding issues should be included in the management of postnatal depression.

- **Breast-feeding linked to additional healthy maternal behaviors**

Source: Family Practice 2003; 20: 528-30

Assessing whether the intention to breast-feed is associated with other positive health-related behaviors and beliefs during pregnancy. Women who breast-feed are less likely to smoke and more likely to be taking recommended nutritional supplements than those with alternative feeding plans, UK researchers reveal. To evaluate whether women who breast-feed adopt other healthy behaviors during their pregnancy, Cheryl Haslam (University of Nottingham) and co-authors performed a cross-sectional survey of 789 women attending antenatal clinics. The questionnaire explored feeding intentions, use of folic acid, vitamin and iron supplementation, smoking status, the intention to stop smoking, and perceptions regarding control of the health of the unborn baby. In comparison with women who were planning alternative feeding methods, women who were preparing to breast-feed (either exclusively or in combination with bottle-feeding) were more likely to have increased their intake of folic acid, taken vitamin and iron supplements, and to believe that they have control over the health of their unborn baby. Moreover, women intending to breast-feed were less likely to smoke, or more likely to be preparing to quit smoking during their pregnancy, than those women with different feeding ideas. "In addition to educating pregnant smokers about the risks of maternal smoking, primary health care practitioners could also usefully address their knowledge, health beliefs, and feeding intentions during antenatal care," the researchers propose.

- **Breastfeeding lowers fracture risk**

Source: Osteoporosis International 2003; 14: 694-700

Breast-feeding appears to benefit bone health independently of parity, according to new findings. Extended breast-feeding may explain why, in contrast to Western countries, hip fractures in China are more common in men than in women, researchers have proposed. To test whether reproductive factors might be implicated in this phenomenon, Dezheng Huo (University of Chicago, Illinois, USA) and colleagues performed a case-control study in the Beijing metropolitan area. They enrolled 121 women aged 50 years and over who had sustained a hip fracture; each woman was matched with two neighbors of similar age. All participants were interviewed about their reproductive history and risk factors for hip fracture. In a univariate model, Huo et al found that later age at menopause, parity, and breast-feeding were protective of hip fracture. In multivariate

regression analysis, however, only breast-feeding remained significantly associated with the risk of hip fracture. Taking women who breast-fed for less than 6 months per child as reference, Huo et al calculated that the odds ratios associated with breastfeeding for 7-12 months, 13-23 months, and more than 24 months were 1.14, 0.28, and 0.34, respectively. Among parous women, the risk of hip fracture was reduced by 13 percent for every additional 6 months breast-feeding per child. "The implication of these findings is that breast-feeding is potentially beneficial for bone health even in a population with low calcium consumption," the authors conclude.

EDUCATIONAL AND TRAINING OPPORTUNITIES

November 14, 2003	La Leche League of Minnesota / Dakotas Professional Education Breastfeeding: Beyond the Basics A Visual Study of Breastfeeding Management Speaker: Barbara Wilson - Clay For more information contact Pam Galle at mailto: gallefrom@yahoo.com or Linda Klatt at mailto: LWKlatt@aol.com or 952-933-8534.	St. Paul, Minnesota
February 2-6, 2004	Certified Lactation Counselor (CLC) Course Center for Breastfeeding For more information: 508-888-8044 or http://www.healthychildren.cc	Duluth, MN
March 4-5, 2004	Wisconsin Association of Lactation Consultants (WALC) conference "WALC Conference 2004 ~ It's All About The Latch" Radisson Paper Valley Hotel	Appleton, WI
April 29 - May 1, 2004	La Leche League 2004 Spring Conference Continuing Education Day is April 29, 2004 La Leche League Leader Enrichment Day is April 30, 2004 WI Area Parenting and Family Conference: Friday Evening April 30, 2004 through Saturday afternoon May 1, 2004 For information: Wendy Copeland, 262-896-7797 or mailto: WendyCopeland@juno.com	Wisconsin Dells, WI
July 15-18, 2004	ILCA 2004 Conference and Annual Meeting Best Practices: Supporting Breastfeeding Worldwide For information: http://www.ilca.org/conference/index.php	Scottsdale, Arizona

Ongoing Educational Opportunities

- The Center for Breastfeeding offers the Lactation Counselor Certificate Training Program (CLC) several times a year at different sites around the country. For course information, locations and dates go to <http://www.healthychildren.cc>
- The Certified Breastfeeding Educator (CBE) program presented by Debi Bocar is available at different locations and dates each year. For course information, locations and dates go to <http://www.lactation-consultant-services.com/>
- Lactation Education Resources offers online continuing education modules and self-learning programs. For information go to <http://www.LERon-line.com>
- BreastEd Online Lactation Series is a series of 10 individual courses. For information go to <http://www.health-e-learning.com>
- Wichita State University has a distance course on human lactation. For information go to <http://getonline.wichita.edu>
- The University of Medicine and Dentistry of New Jersey has a web and CD interactive, comprehensive educational program for Breastfeeding Management. For information go to <http://www.umdnj.edu/lactation>
- Case Western Reserve University: Web based "Breastfeeding Basics" course at <http://www.cwru.edu/med/breastfeeding>, directed at health professionals.

If you have any questions or comments regarding this update please contact:

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