



The breastfeeding friendly practice

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Preliminary Note

The 2006 Austrian Breastfeeding Report emphasized the important role of pediatricians for maintaining breastfeeding in the first 6 months of life. Independent of this, the author has sought, since the beginning of his work as a private practice pediatrician in 1992, to support mothers in their role as breastfeeding women, on the basis of his own observations of the connections between the mother-child relationship and breastfeeding. Analogous to the “Baby Friendly Hospital” Initiative, the idea of developing a “breastfeeding friendly” practice came into being.

Starting point

Physician, assistants, patients and their parents are, in practice, surrounded by advertising (rulers, calendars, information boards with logos). In the waiting room reading matter, bottle feeding is presented as the standard way of infant feeding. During medical training; hardly any information on breastfeeding

Implementation

- ⇒ Reconfiguration of the office in accordance with the VSLÖ physician’s seminar (reading material: „Breastfeeding Handbook for Physicians“ of the AAP)
- ⇒ Elimination of advertising and physician samples
- ⇒ Propagation of breastfeeding-friendly attitudes by the office assistants
- ⇒ Start of documentation of infant feeding
- ⇒ Training as an IBCLC 2008; in 2009 both assistants became IBCLCs
- ⇒ Networking: interdisciplinary in the Breastfeeding Network of Lower Austria; at the physician level (involvement of pediatricians and gynecologists in the district)
- ⇒ 2010 therapeutic laser for nipple treatment purchased



Results

Documentation of breastfeeding (comparisons of the years 2001-2003 and 2007-2008)

Groups:

1. 6 months exclusive breastfeeding, (sub-groups earlier [5 months] and much earlier [4 months], the start of complementary foods, no infant formula)
2. Primarily breastfed (bottle feeding only in the first month of life)
3. Partially breastfed (within the first 6 months, changing relationship between mother's milk and infant formula)
4. Scarcely breastfed (MM only in the first month of life)
5. Not breastfed

Increase of exclusively breastfed babies from 29% to 35%. Primarily breastfed babies from 3% to 12% (see graphic)

Open Questions

Is there a bias as a result of the relevant reputation of the office? Attraction for breastfeeding mothers, deterrent for non-breastfeeding mothers?
Standardization of documentation, is this also implemented by colleagues?

Financing

Investment of time is not financed by the health insurance. Payment of office help from the income earned by treating ill children. The breaking point is often reached by all office staff

Outlook

Breastfeeding groups in the office, promotion of breastfeeding in public space, financing through special funding.

Literature

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Graphic

Breastfeeding frequency in the first 6 months before (A) and during (B) the implementation of the „breastfeeding friendly practice“ by comparison to the general Austrian situation at 3 (C) and 6 (D) months.

