

Guidelines support breastfeeding during parent-newborn separation

August 26 2021



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Data show the importance of human milk and breastfeeding for the optimal health of infants, children, and lactating parents. But when parents and newborns are separated due to a hospitalization, current



research shows that most sick babies are discharged home on infant formula. While many professional organizations have position statements about breastfeeding, few outline the specific lactation needs during parent-newborn separation.

Now, a team of scientists led by a researcher from the University of Pennsylvania School of Nursing (Penn Nursing), has established a new clinical practice guideline using an evidence-based approach to support <u>lactation</u> in those circumstances. The guideline, "The Use of Human Milk During Parent–Newborn Separation," has been published by the Association of Women's Health, Obstetric and Neonatal Nurses.

"Human milk should be recognized as a necessary intervention for all vulnerable newborns who may be separated from their parent(s) after birth," says Diane Spatz, Ph.D., RN-BC, FAAN, Professor of Perinatal Nursing and Helen M. Shearer Term Professor of Nutrition at Penn Nursing and Nurse Scientist in the Center for Nursing Research and Evidence Practice at Children's Hospital of Philadelphia. Spatz led the evidence-based clinical practice guideline science team.

The goals of the proposed recommendations are to (1) ensure all parents have the ability to make informed feeding decisions, (2) enable parents to effectively initiate and sustain milk supply for their newborn through discharge, and (3) help parents reach their personal breastfeeding goals beyond the immediate hospitalization period. The guideline includes implementation of Spatz's 10-step system as the national model for providing human <u>milk</u> to vulnerable newborns. The guidelines are available online in the Journal of Obstetric, Gynecologic & Neonatal Nursing.

More information: The Use of Human Milk During Parent–Newborn Separation, *Nursing for Women's Health* (2021). DOI: 10.1016/j.nwh.2021.06.001



Provided by University of Pennsylvania

Citation: Guidelines support breastfeeding during parent-newborn separation (2021, August 26) retrieved 26 June 2024 from <u>https://medicalxpress.com/news/2021-08-guidelines-breastfeeding-parent-newborn.html</u>

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