



Original Article

Activities of Lactation Management Centre of Rajshahi

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Abstract

A total of 500 patients were attended at LMC of RMCH from July 2004 to June, 2005. Most of the mothers were not aware of breast feeding regarding attachment and position. About 95% of the mothers were trained about correct technique of breast feeding. 55% of mothers were in the age group. 15-20 Yrs. Oketani breast massage was given on an average of about 33% of mothers. Only 12% of attending mothers were suffered from different types of breast problems like-engorged breast, sore nipple, flat nipple, crack nipple and breast abscess.

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Introduction

Children are the blessings of the Almighty Allah to human beings. Breast feeding has been identified as a major component of child survival¹. It provides the perfect nutrition for infants and lays the foundation for their healthy psychosocial development. Exclusive breast feeding satisfies the energy and nutrient needs of the child upto 6 months of age and continued breast feeding until 2 years is beneficial for the child.² In the 80s, there had been sheer decline of breast feeding practices with giving 100% prelacteal feed and only 7% exclusive breast feeding³. To half the alarming situation in breast feeding practices, an initiative was undertaken by a group of concerned professionals, govt. organizations. UN agencies and non govt organisations. The campaign for the protection and promotion of Breast feeding, CPPBF (now Bangladesh Breast feeding Foundation, BBF) was launched in 1989⁴. In concordance to innocent declaration, Baby

Friendly Hospital initiative (BFHI) programme was undertaken through an International Assessment tool⁵. So far 461 hospitals have been made Baby friendly in our country. In order to support the BFHI programme, the nursing mother need help to establish breast feeding and support to continue breast feeding. This breast feeding support activities can best be achieved through establishing a lactation management centre (LMC) in the out patient department of the health care facility⁶. LMC was established in the year Jan 2004 at RMCH. It is possible to help majority of the mothers with lactation difficulties at the out patient when the baby is less than 6 weeks of age. Helping mothers with proper Positions and attachment at the breast appears to be crucial for successful lactation⁷.

Lactation management centre is important not only to help and support mothers but also to train staff, the art of motivating and helping mothers to breast feed⁸. Support of lactation in mothers of preterm

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babies mandates protection of the mother and child bonding process and early skin to skin contact (kangaroo care)⁹. The activation of the LMC of RMCH since its inception till the year 2004 has been reviewed in this paper.

Materials & Methods

It was a retrospective study, it included all the women who attended LMC of RMCH from July 2004 to June 2005. Most of the mothers were referred from outpatient/inpatient department of paediatrics and gynaecology and obstetrics of RMCH. A small number of mothers attended the centre from other sources. Data were collected from registrar book of LMC regarding feeding problem, age, (both of mother and baby), sex, date of birth and place of delivery. During assessment breast feeding was observed for identification of problems. Breast feeding observation form was used as a guide for assessment. Mothers were categorized for the requirement of services according to their need like counseling, correction of position and attachment, oketani breast massage technique and having breast problems. After observation of breast feeding all the mothers were counselled every day by trained nurse. After demonstration with the help of models about proper position and attachment mothers were asked to breast feed the babies applying proper technique. Nurses midwives helped the mothers if any of them was unable to adopt the proper technique. The oketani technique was applied to the mothers attending the LMC of Rajshahi Medical College Hospital when only counseling and correctioning the position and attachment did not work well. Oketani breast massage is a special technique practised by Japanese midwives for increasing milk secretion and for better quality of milk. the principle of oketani is to separate the breast tissue proper from its baement with the help of fingurs resulting in softening of breasts. Members of Baby friendly Hospital Initiative (BFHI) subcommittee of the hospital include an obstetrics & gynaecology consultant and a paediatrics consaltant used to supervise the activities of nurses, midwife regularly. The mothers advised to come for follow up visits.

Data were complied and analyzed using SPSS soft wire.

There had been increasing tendency on the part of mothers to take the services from LMC as reflected by persistent increase of attendance of the lactating mothers throughout the study period.

Mothers who attended the LMC were mostly (55%) in the young age group 15-20 yrs. This group of mothers is vulnerable to discontinue breast feeding and start mixed feeding as observed in other studies^{10,11}. There is no alternative to training, to make people acquire a skill. It was found useful when a participatory technique is applied to a small group of people by highly committed and motivated trainers to impart training on the management of breast feeding¹². All mothers were counselled on the benefit of breast feeding at LMC. through applying the counseling skills like listening and learning, building confidence and giving support the mothers were allowed to take decision on their own about continuation of breast feeding.

In breast feeding management positioning and attachment of baby to breast are considered most crucial for effective breast feeding and that's why even after good motivation and counseling breast feeding may not be successful. Most of the mothers (95%) were practically helped by showing correct positioning and attachment of the baby to the breast, at first through the use of models and finally with their babies.

After applying counseling, proper positioning and attachment, still some mother need some help for improving lactation, they are given oketani breast massage. On an average 33% of mothers required this procedure for improving lactation.

12% mothers had different types of breast problems which was 16.3% in previous study¹³. Most important problem were breast engorgement among 28 mothers. Next was sore nipples 17 mothers, 8 mothers had flat nipple and 8 mothers had cracked nipple and only 2 mothers had breast abscess.

Results

Total number of mothers attended the LMC during the period of July 2004 to June 2005 were 500. Most of the mothers (91%) who attended the LMC were referred either from the department of paediatrics (50%) or obstetrics and Gynaecology (41%) and only 8% from outside of RMCH. The number of mothers attending of LMC increases gradually throughout the study period. Fig.1.

Most of the mothers were in the age group 15-20 (55%) 20-25 yrs age group were 38% and 25-30 yrs age group were 7%. Fig. 2 95% mothers had to be shown the correct technique of breast feeding by nurses. All the mothers were counselled about the benefits of breast feeding.

Oketani breast massage was given on an average 33% mothers required to be managed with this special technique for augmenting breast milk supply. Fig.3.

60 mothers (12%) had different types of breast problem. The problems were engorged breast 28, sore nipple 14, flat nipple 8, cracked nipple 8 and breast abscess 2- Fig.4.

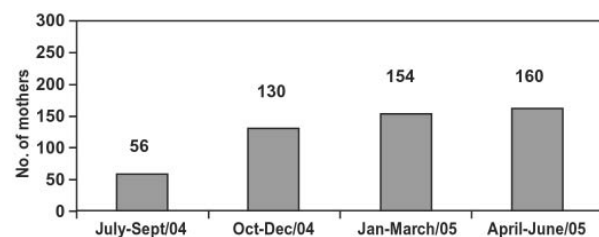


Fig.1. Months wise distribution of Mothers attending of LMC during July 2004-June 2005 (n=500)

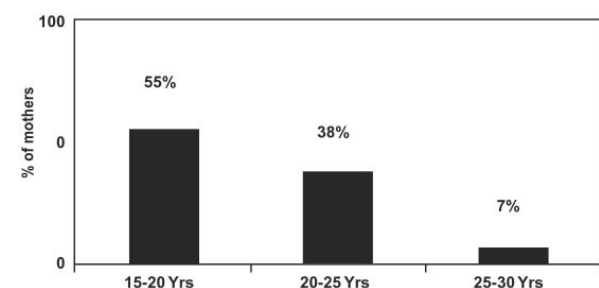


Fig.2. Age distribution of mothers (n=500)

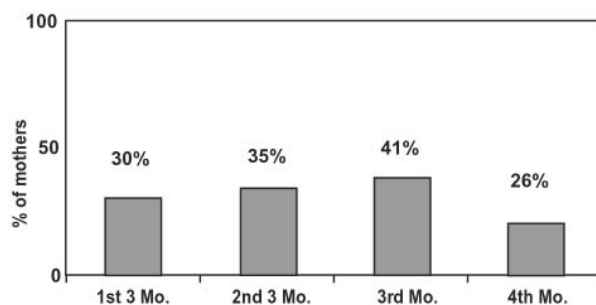


Fig.3. % of mothers requiring oketani breast massage in different periods (3 months) (n=500)

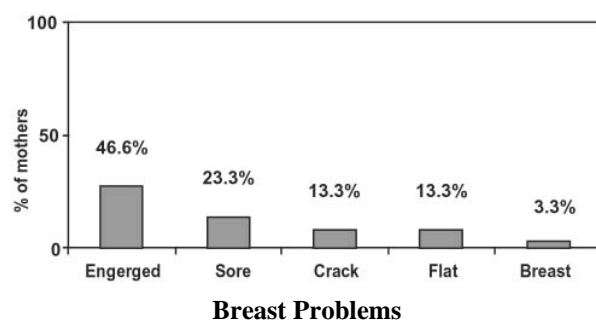


Fig.4. Mothers having different breast problems

Discussion

This study describes the function of LMC in a hospital setting. Mothers who were coming to this centre for various breast feeding and breast problems were managed with counseling, correction of position and attachment and also by applying oketani breast massage technique. The breast problems were engorged breast, flat nipple and sore nipple.

The LMC of RMCH is a purpose built centre where the nursing staff and doctors are trained with breast feeding management and oketani massage technique. An obstetrics and Gynaecology consultant and a paediatrics consultant with the hospital BFHI committee supervised the function of the centre constantly.

Conclusion

LMC is an important centre for supporting mothers for effective management of breast feeding and also for continuing breast feeding for long days. Most of the mothers required counseling and correction of position and

attachment and some mothers needed Oketani breast massage technique. Engorged breast was the commonest problem. Not only in the tertiary level hospital but also LMC should be established in all District and upazila Health complexes for giving support to the mothers for effective management of breast feeding.

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