



November
2022

About Us



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Greetings Devon,

Happy November! Read our newsletter to learn about the latest breastfeeding news, updates, resources, and upcoming educational opportunities and events. This monthly e-Newsletter is one of the fantastic benefits of being a First Food community partner and serves to provide you with the tools and information you need to support mothers, babies and families throughout their breastfeeding journey! To submit items for the First Food e-Newsletter or for any breastfeeding program technical assistance, please contact Bridget Neumaier at bneumaier@paaap.org.

Food For Thought:

This month we recognize American Indians, Native Hawaiians and Alaska Natives through Native American Heritage Month. We recognize the contributions and importance that the First Nations have had as an integral part of the United States. The work we do to promote, support and protect breast and chest-feeding year-round will always embrace this community. We thank our community partner organizations that work to close the gap of breast/chest-feeding disparities in communities across the state. One of the goals of First Food is to cultivate collaboration opportunities between organizations, because we have seen first-hand, the impact of working together. Our favorite saying is that collaboration is half the work and twice the reach. We hope to see you for our Spring Collab meeting!

In Community,
The First Food Team

***Please complete the Lactation in the Workplace Survey by the
Pennsylvania Breastfeeding Coalition***

We ask for your participation in order to deepen our understanding of how

breast/chest-feeding and/or pumping is conducted in your workplace. We hope that by collecting varied viewpoints, we can create suggested program criteria across sectors and industries.

[Survey link here](#)

In case you missed our Fall 2022 Collaborative Meetings

You can watch the recordings below

Southeast:

SE recording here

Northeast/Northcentral:

NE/NC recording here

Northwest:

NW recording here

Southwest:

SW recording here

Congratulations to our Mini Grant Recipients!

First Food received numerous and compelling grant proposals, we ultimately were able to choose 15 organizations with the support and funding by the Department of Health.

We would like to congratulate the following organizations for being 2022-23 First Food Mini Grant recipients:

- Adagio Health, Inc.
- Crawford County Drug and Alcohol
- Community Progress Council WIC
- Congreso de Latinos Unidos, Inc.
- Emma's Footprints
- Family First Health
- Fayette County Community Action Agency
- The Wright Center
- YWCA of Lancaster
- Hamilton Health Center Inc./ WIC Program
- Health Promotion Council
- Healthy Start, Inc.
- Luzerne County Breastfeeding Coalition and Maternal Family & Health Services
- School District of Philadelphia
- Genesis Birth Services

Preparation for the Spring 2023 Collaborative Meetings

As we begin preparing for our Spring Collaborative Meeting, we welcome our supporters to reach out with topics of interest and speaker recommendations. Please contact Bridget Neumaier at bneumaier@paaap.org


Would your practice or that of a colleague be

interested in participating in a Breastfeeding Training with our EPIC BEST (Breastfeeding Education, Support, and Training) Program?

The EPIC BEST program is a one-hour statewide CME/CEU practice education program using office-based change as the key to promoting initiation and increasing duration of exclusive breastfeeding. EPIC BEST aims to improve policies that support breastfeeding, recognize misconceptions that create barriers and provide guidance to support parents in feeding and more.

Download the fillable Training Request Form and Letter. Send to Kaiden Levy, klevy@paaap.org to schedule a live training.

[Download the Training Request Form](#)



EPIC | Educating Practices In their Communities
BEST
Breastfeeding Education, Support and Training

Promoting the initiation and increasing the duration of breastfeeding.

The **EPIC (Educating Practices/Physicians in their Communities) - BEST** program is a statewide practice education program using office-based change as the key to promote initiation and increasing the duration of exclusive breastfeeding. BEST is funded by the PA Department of Health and contractually administered by the PA Chapter, American Academy of Pediatrics.

This 1-hour CME/CEU program helps physicians, nurses, and staff:

- Recognize misconceptions by health professionals that create barriers to breastfeeding.
- Develop office, hospital, and workplace policies to support breastfeeding.
- Provide anticipatory guidance to support mothers to successfully breastfeed.
- Assist women with breastfeeding problems, and help them utilize community.

To schedule a live-in person or live-virtual training, email **Kaiden Levy at klevy@paaap.org**

or access BEST online through UPMC's Internet-based Studies in Education and Research (SER) web portal:
<https://cme.hs.pitt.edu/SER/app/learner/loadModule?moduleId=19833>

For more information or questions, contact:
Dottie Schell, Program Director - dschell@paaap.org

Pennsylvania Chapter
American Academy of Pediatrics
ADVANCING THE HEALTH OF ALL CHILDREN

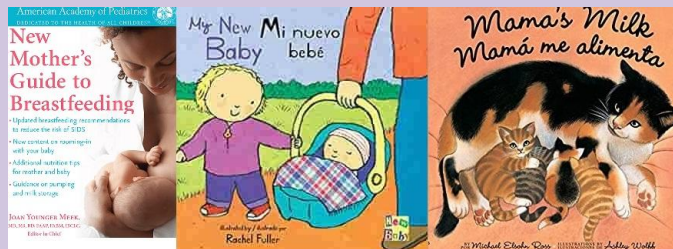
[Download the EPIC Best Letter](#)



Our Pilot Library Story Kit Project

In an effort to educate communities across Pennsylvania about the importance of human milk as "First Food," the Pennsylvania Chapter, American Academy of Pediatrics is providing public libraries with free Breastfeeding Library Story Kits as a story time resource to help normalize breastfeeding!

Libraries and librarians play a unique role in providing health information and have an opportunity to improve public support of chest/breastfeeding by ensuring that children's collections include picture books that depict breastfeeding in other mammals, in an age-appropriate manner.



In the News

Does Breastfeeding protect against RSV? Yes, studies show. (Nov, 2022)

Jessica D'Argenio Waller, MS, CNS, LDN weighs in on the components of human milk



that help bolster babies' immune systems and what that means for protection against RSV bronchiolitis.

[Read more here.](#)

Credit: CDC Creator: Higha Marie Pugh-Hornem



Credit: Black Mothers Breastfeeding Association

Could educating high school students about breast-feeding, change the future of feeding rates in the long-term in the US?



Creator: Monkey Business Images



Credit: CDC Creator: Davis Carothers

As Ireland faces one of the lowest breastfeeding rates in the world (37% of babies exclusively breastfed when discharged from the hospital), Green Party Senator Pauline O'Reilly proposes students learn about it early to normalize the concept, to propagate a cultural shift that could improve rates and health outcomes for future generations. While the proposal is under consideration in Ireland, the US could benefit from a similar initiative. Recent CDC reports that 83.2% of infants were exclusively breastfed when discharged from the hospital, but rates by state vary drastically. West Virginia has the lowest in the country at 59.8% while Colorado is the highest with 94%.

[Learn more](#)



Can you breastfeed a baby with Jaundice? Experts Weigh In (November, 2022)

Ashanti Woods, MD, pediatrician at Mercy Medical Center in Baltimore, MD and Meghan Hunter, DO, pediatrician at Phoenix Children's Hospital in AZ say there is typically no need for a mother to stop breastfeeding her infant who has jaundice. But it's important during this time that your baby's



MS Medication in Breastfeeding Mothers has been deemed safe for infants as per a recent study (November, 2022)

Breastfeeding by individuals with multiple sclerosis (MS) or

bilirubin levels are monitored by a pediatrician to check their progress. If the levels aren't improving, your pediatrician may suggest changing how they're fed. "The more a baby is breastfed, specifically the more volume they take in, the more that that baby will eliminate bilirubin, the pigment that causes jaundice, through urination and stooling, which of course will ultimately improve their jaundice."

[Learn more](#)

neuromyelitis optica spectrum disorder (NMOSD) who are taking anti-CD20 IgG1 monoclonal antibodies (mAb) appears to be safe for infants, new research suggests.

[Learn more](#)

Events, Updates, & Resources

Native American Heritage Month

With more than 500 federally recognized Indigenous nations comprising nearly 3% of the US population, at First Food we recognize the 12,000 American Indian inhabitants of PA and seek to form partnerships with organizations that support Natives in the state. In many Native cultures, feeding is more than nourishing babies the way nature intended, it's viewed as a way to nourish a baby's mind, body and spirit. For many Natives, the tradition of breastfeeding has subsided-with the lowest exclusive breastfeeding rates at 6 months of any race or ethnicity in the U.S. At the same time, they face serious health challenges, including skyrocketing rates of obesity and diabetes. Because of the enduring health benefits feeding provides, it's vital to reconnect Native communities to cultural traditions of feeding.



Lenape women, when still at stages of hunting/gathering or horticulture, were able to breastfeed by carrying their infants in an apparatus while they worked nearby. The device used can be seen to the right, shared by the Lenape Nation of Pennsylvania.

November is Prematurity Awareness Month

A baby born before 37 weeks is considered premature. The WHO estimates that approximately 15 million babies are born prematurely each year, that's 1 in 10 babies. Those infants face developmental challenges and are more susceptible and at risk for illnesses and diseases like necrotizing enterocolitis. Although the U.S remains among the most dangerous developed nations for childbirth, organizations like March of Dimes, continue to advocate for maternal and infant health.

[Visit their website](#)

Find more resources at nationalperinatal.org/Prematurity_Awareness

Prematurity Awareness

EACH NOVEMBER WE CELEBRATE Prematurity Awareness

Pregnancy is a time filled with hope and expectation. Every family hopes for an uncomplicated birth and a healthy baby. But sometimes the unexpected happens - and a baby is born early.

Every year in the U.S. more than 380,000 babies are born preterm, meaning that they were born before 37 weeks gestation - more than a month early. While babies who are born extremely preterm - sometimes as early as 22 weeks - are surviving, all preemies are vulnerable to medical and developmental complications.

While we are grateful for advances in neonatal care that allow more premature infants to survive and thrive, we know that we have more to learn. We need a better understanding of the factors that lead to preterm labor and delivery - and result in unacceptable disparities.



Did You Know? Preemies Aren't Just Tiny Newborns

Every baby is born vulnerable and immature. They rely on their caregivers to nurture and protect them as they adjust to life outside of the womb. But for babies who are born preterm, these effects are magnified. When a baby is born early they have to continue to grow and mature in an environment that is more challenging than in utero.

- Babies begin to learn to breathe in the womb. So preemies' lungs haven't had time to practice and mature so that they use oxygen effectively. Immature lungs can be easily damaged.
- Babies' brains reorganize and restructure dramatically in the final weeks of pregnancy. Preemies can struggle to control their temperature, breathing, and heart rate. Brain bleeds are common.
- To eat well, preemies must master the rhythm of breathing and swallowing. Their immature stomachs and intestines take time to absorb nutrients and learn to fight infections.

Common Complications of Prematurity:

- chronic lung conditions
- feeding difficulties
- developmental delays

With support and early intervention the negative effects can be minimized

Prematurity is the leading cause of infant mortality and morbidity in the U.S.

Our preterm birth rate continues to climb. In 2017 it grew to 9.9%.

Celebrate World Prematurity Day
November 17th



Call to Action: Help Pass the Protect Sick Babies Act or Owen's Law

Owen's Law is a legislation to cover and reimburse for medically prescribed pasteurized donor milk (PDHM) through insurance coverage to include inpatient and outpatient babies who have serious medical conditions. These medical conditions include babies who have a very low birth weight, a high risk of developing necrotizing enterocolitis (NEC) and those with a congenital heart disease that requires surgery in the first year of life, among other conditions. This legislation is meant to protect vulnerable and medically fragile babies who need it most. Dr. Kim Costello discusses the importance of donor milk in the NICU.

[Watch her brief Vimeo video here](#)

Protect the smallest and most fragile Pennsylvanians.

Pass the Protect Sick Babies Act - Owen's Law.



Medically prescribed pasteurized donor human milk (PDHM) saves and improves infant lives.

Senate Bill 1202 (Brooks) and House Bill 2017 (Thomas/Davis) expand access to PDHM by establishing insurance reimbursement for medically necessary donor milk.

Evidence-based.

Evidence shows that the use of PDHM when a mother's own milk is unavailable **reduces mortality rates, lowers healthcare costs, and shortens hospital stays**, while increasing rates of exclusive maternal breastfeeding upon discharge.¹

Lessens healthcare costs.

Preterm births have an annual overall cost in the U.S. of at least \$26 billion.² For babies in the NICU, PDHM provides unparalleled protection against serious and costly medical complications. Based on 2019 figures, if just one infant with NEC is able to avoid surgery, the savings would parallel the total estimated costs of donor milk across Pennsylvania on an annual basis.³

Avg hospital charge for a baby 0-28 days:

\$27,574

Avg hospital charge for a baby w/ NEC:

\$840,397

Avg hospital charge for a baby w/ surgical NEC:

\$2,890,477



Reduces NEC/NAS symptoms.

PDHM provides premature and at-risk babies with robust protection against the development of necrotizing enterocolitis (NEC), an inflammation of the intestines that can cause lifelong disability or even death; an exclusive human milk diet can decrease the overall incidence of NEC by up to 80% and the rate of surgical NEC by over 90%.⁴ For drug-exposed infants, PDHM may also reduce Neonatal Abstinence Syndrome (NAS) symptoms such as feeding intolerance.⁵

Addresses access & health disparities

Many factors contribute to prematurity, but statistics show it disproportionately affects minority populations — especially Black and Latino mothers. Fewer Black and Latino infants have access to both mother's own milk and PDHM! Insurance coverage of PDHM creates access to lifesaving treatments for minority populations.

Basecamp

You've been invited!

One of the many perks of being a First Food Community Partner is **joining the Basecamp platform for free.**

You might not have seen the invitation come in your inbox, but it might be in your spam/junk mail!

Sign in today to ask questions, post information, respond, and communicate with community partners both across the state and regionally.



Check out this clip to see everything you can do.

Questions? Email Devon for more info on your invitation at dgilinger@paaap.org

To submit something to share in this e-Newsletter, or if you would like to become a Community Partner:

Please contact Devon Gilinger at dgilinger@paaap.org.

Pennsylvania Chapter

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American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



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