

INITIATION OF BREASTFEEDING WITHIN ONE HOUR OF BIRTH BY CESAREAN SECTION

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Abstract

Aims: The purpose of this project was to determine the barriers to early initiation of breastfeeding in babies born via cesarean section and to investigate possible interventions to establish a process of early initiation of breastfeeding for babies within one hour of birth.

Background: The benefits of exclusive breastfeeding have been well established throughout the scientific literature. Delayed first breastfeeding is an independent cause of breastfeeding failure (Margaret H, 1990). Initiation of breastfeeding within one hour of birth is a requirement for a hospital to achieve The World Health Organizations' 'Baby Friendly' status. Therefore, Lucile Packard Children's Hospital is working towards a process for initiating breastfeeding within one hour of birth whenever possible.

Methods: Staff nurses in the Labor & Delivery and Post-Partum units were surveyed to identify their perceptions of the barriers to early breastfeeding. A retrospective chart review was completed to ascertain the average time between birth and first breastfeeding in babies born via C-Section. Benchmarking was performed with hospitals who have achieved 'Baby Friendly' status. Finally, observations were performed to determine observable barriers to the early initiation of breastfeeding in babies born via C-Section.

Results: As a result of survey, chart review, benchmarking and observation, the main barriers to the early initiation of breastfeeding in babies born via C-Section at LPCH included nurse work load, mothers' lack of intention to early breastfeed, and a lack of efficient communication between care providers to coordinate early initiation of breastfeeding.

Discussion: Based on the identified main barriers of early initiation of post-cesarean breastfeeding, a revised care process was developed and approved by key stakeholders in maternity unit. The new process facilitates initiation of breastfeeding in the Post Anesthesia Care Unit through efficient communication and care coordination between nurses in Well Baby Nursery and Labor & Delivery. A small group trial demonstrated that this process greatly decreased the time to first post-cesarean breastfeeding.

Conclusion: This project confirmed that a practical care process enables the timely initiation of post-cesarean breastfeeding. To achieve successful implementation of the new process, education for nurses and patients is needed on the benefits of early breastfeeding and the process to accomplish breastfeeding within an hour of birth whenever possible. Additionally, ongoing assessment and evaluation of the success of the process is necessary to sustain the change.

Key words: Breastfeeding, cesarean section, newborn