



# Quintessence

F O U N D A T I O N

December  
2015

## Breastfeeding Challenge: Year 15!

**15 years** – the Quintessence Breastfeeding Challenge started 15 years ago. A Quintessence Board member, Wah Wong, suggested that we raise the profile of breastfeeding by holding an event that would encourage and support women and ensure media attention. In that way it would help spread the word about the challenges women face when they breastfeed their children and encourage communities to recognize the normalness of breastfeeding. Even though support for and awareness of the importance of breastfeeding has improved over the last 15 years, in many communities mothers still struggle to access support and to be welcomed to breastfeed “anytime and anywhere”.

It seems rather surreal in the 21st century in Canada, at a time where revealing clothing is the cultural norm, that public breastfeeding is still shunned in many communities. In wandering the internet I came across a blog called “Fifty Reasons to breastfeed anytime, anywhere (<http://www.phdinparenting.com/blog/2010/5/14/50-reasons-for-breastfeeding-anytime-anywhere.html>). Check it out as it covers human rights, logical, financial and societal reasons, normalizing breastfeeding and my favorite - just because. The other day I noted an ad for the Victoria Secret underwear show on the TV news broadcast. The barely-dressed were parading around and yet women still struggle to gain acceptance of public breastfeeding? What an odd culture we live in.

Over the years we have had requests to change the name of the event. Are we challenging women to compete against each other? Is it about who breastfeeds the longest? Is breastfeeding a challenge for everyone? Well, first off, when we started fifteen years ago we figured this would be something we did for a few years because times change and the issues would need a different focus. What we have realized over fifteen years is that we will be doing this for some time. Effective change is a long process. Women are still being harassed for breastfeeding their children in public. Ignorance about the importance of breastfeeding continues and good support is lacking in many communities. The *Quintessence Breastfeeding Challenge* celebrates every mother and her success in meeting her own goals. The “Challenge” part is all about how each woman overcomes whatever challenges come her way on her breastfeeding journey. We have never defined precisely how each site should do the Quintessence Challenge. For some communities, it is an event held in a closed room and mothers attend as a celebration of those mothers’ breastfeeding experiences. For other communities it is a very public proclamation about the importance of breastfeeding.

We thank all of you who have supported the Challenge over the years - some for the last 15 years. It is fun to consider that the babies from our first year are now teenagers - hopefully by the time they are parents, the challenges will be few as the needed support and understanding of breastfeeding will be available.

**Check out our Quintessence Foundation Website: [www.babyfriendly.ca](http://www.babyfriendly.ca)**

## Date of Quintessence Breastfeeding Challenge 2016

Quintessence Breastfeeding Challenge 2016 will take place on **October 1, 2016 at 11am**. Join us and invite all the hospitals, mother's groups, midwifery practices, HMBANA milk banks, public health units and any other applicable groups in your community to take part. Let's make a strong statement about the importance of breastfeeding and the need for support and community acceptance!

## Results: Quintessence Breastfeeding Challenge 2015

Congratulations to all participants and organizers. We hope you all had a good time getting together, supporting each other and exchanging information. The *Quintessence Breastfeeding Challenge* celebrates each and every one of you. For those into the numbers, here they are:

### Top Ten International Largest Sites

1. Nicosia, Cyprus: 226
2. Chilliwack, BC Canada: 133
2. St-Jean-sur-Richelieu, Quebec Canada: 133
3. Outaouais, Quebec Canada: 118
4. Niagara, Ontario Canada: 114
5. Trois Rivieres, Quebec Canada: 111
6. Kelowna, BC, Canada: 103
7. Limassol, Cyprus: 8
8. Halifax, Nova Scotia Canada: 81
9. Ottawa, Ontario Canada: 80
10. Vancouver, BC Canada: 69

### Top Ten North American Largest Sites:

1. Chilliwack, BC: 133
1. St-Jean-sur-Richelieu, Quebec: 133
2. Defi allaitment du club des mamans de l'outaouais, Quebec: 118
3. Breastfeeding Niagara, Ontario: 114
4. Defi Allaitement Mauricie Centre les Rivieres, Quebec: 111
5. Kelowna, BC: 103
6. Halifax, Nova Scotia: 81
7. Ottawa, Ontario: 80
8. Vancouver, BC : 69
9. Guelph, Ontario: 68
10. Granby, Quebec: 65

## Largest Country Participation (Number of Children)

1. Canada
2. Cyprus
3. Ireland
4. Luxemburg
5. United States

## Country with the most sites

1. Canada
2. Ireland
3. Cyprus
4. Unites States

## North American Results

### Category A (>50,000 births/year)

1. Quebec
2. Ontario
3. Alberta
4. Texas
5. Kentucky

### Category B (10,000 to 50,000 births/year)

1. BC
2. Saskatchewan
3. Manitoba
4. Arkansas
5. Iowa

### Category C (less than 10,000 births/year)

1. North West Territories
2. Nunavut
3. New Brunswick
4. Newfoundland and Labrador
5. Nova Scotia

## BC Women's Hospital Year 15: the best yet for the Breastfeeding Challenge

On Saturday October 3rd at the 11am "latch on" time, 69 mothers and their babies took part in the *Quintessence Breastfeeding Challenge* at BC Women's Hospital & Health Centre in Vancouver British Columbia, Canada. BC Women's is the largest single site maternity hospital in Canada with over 7,000 births a year. Our hospital has been taking part in this fun event since its inception in 2001. Initially, we held the event for both community and inpatients but now that public health holds community

*continued...*

sites, we focus on our inpatients including all postpartum units, birthing, PAR and NICU. We also invite mothers of young babies in BC Children's Hospital which is attached to BC Women's to join the Challenge. We had the highest number of participants ever in-house, particularly in the NICU where we had 23 of the 69 mothers.

Our lactation service nurses along with some community volunteers organize and run the Challenge each year. This is done as the lcs' contribution to breastfeeding support as it is not on paid time. We see this event as an opportunity to encourage mothers in their breastfeeding goals and increase the awareness of the need for donor milk for our milk bank. This year we gave out "gift bags" of breastfeeding information, a pen, a participation certificate and a child's book to each mother. We had two mothers who were visiting a new mother and they also joined in by breastfeeding their babies at 11am. We appreciate all the mothers who took part and the staff who helped spread the word and encouraged participation! We are looking forward to next year and invite other Canadian hospitals to join us.

## Rome Italy

On October 3rd in support of breastfeeding and World Breastfeeding Week, La Leche League promoted "Flash mobs" throughout Italy. Here are a couple of pictures of the group in Rome - love the recyclable paper hats!



*Flash mob Rome*



Outraouis Quebec



Rankin Inlet, Nunavut



Baie Verte, Newfoundland



Témiscaminque Quebec

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# Quintessence Breastfeeding Challenge 2015



St-Jean-sur-Richilieu, Quebec

Kapuskasing,  
Ontario



Coteau-du-Lac,  
Quebec

Cyprus: Part of the crowd



## Milk Banking in British Columbia: 2015

There are currently three HMBANA (Human Milk Banking Association of North America) non-profit milk banks in Canada located in Vancouver, Calgary and Toronto. The oldest is the BC Women's Provincial Milk Bank in Vancouver, founded in 1974 and a founding member of HMBANA. Currently, the BC Women's bank has 18 depots and is shipping milk to three level 3 NICUs as well as a number of other hospitals in the province. Most of our donors currently come from the Greater Vancouver area but we hope this will be changing in the near future.

Through an expansion program, BC Women's bank is in the process of negotiating with all of the BC health authorities to provide pasteurized human donor milk (PDHM) to all NICUs in the province. This would result in provincial guidelines setting out criteria for the use of PDHM and setting PDHM as the standard of care throughout the BC NICUs.

## Does breastfeeding really make a difference?

A controversial book, *Lactivism* written by Canadian university professor, Courtney Jung has received wide coverage in the North American media. On the positive side, Jung identifies some of the current challenges: some health care providers don't have basic counseling skills, some companies are making a buck off breastfeeding/human milk products. Unfortunately, she negates mountains of accumulating evidence about the importance of breastfeeding stating that she feels that breastfeeding is over-rated.

One of her main premises is that there is a battle ground between mothers and lactivists – lactivists being those who 'push' breastfeeding making women feel guilty when they use formula. Women can choose how to feed their babies - no one can be forced to breastfeed although many are prevented from succeeding due to system barriers (including 'unbaby-friendly hospital practices, aggressive marketing of formula and poor maternity leave provisions). As one blog pointed out (1), let's not pit women against women, let's work to ensure all women are supported in their feeding choices based on good information.

Troubling from the media coverage is the author's poor understanding of the Baby-Friendly Initiative (BFI) and differences in Canadian and American cultural issues. Jung describes the BFI as limiting the use of formula in the hospital. In reality, the BFI calls for practices supporting all mothers regardless of how they choose to feed their children and making clinical decisions on

best practice, not marketing. When formula is used is should be an informed decision by the mother. American mothers face issues quite different from Canadian mothers primarily because of maternity leave provisions. With 3-6 weeks of maternity leave it is not surprising that many women in the US feel judged and discouraged when they cannot meet recommendations or their own breastfeeding goals.

### *Here are a few responses on the net:*

1. Promotion without support: a reply to editorials that attack breastfeeding advocacy  
<https://bfmed.wordpress.com/2015/10/18/promotion-without-support-a-reply-to-editorials-that-attack-breastfeeding-advocacy/>
2. Brief summary of benefits of breastfeeding:  
<http://www.unicef.org.uk/BabyFriendly/News-and-Research/Research/Breastfeeding-research---An-overview/>
3. Are we becoming over zealous about breastfeeding?  
<http://www.npr.org/sections/13.7/2015/10/22/450805744/are-we-becoming-overzealous-about-breastfeeding>

## Prenatal Expression of Colostrum – the State of the Art

The concept of prenatal expression of colostrum is not new. As far back as 1946, Waller published a paper suggesting that women express (and discard) colostrum during pregnancy to increase the success of breastfeeding (1). More recently, the practice of expressing colostrum to provide to hypoglycemic infants born to diabetic mothers is growing in some countries. Some small studies done to date have not been conclusive on the potential benefits and risks (2). Cox, in 2010, questioned the ethics of not supporting this practice when the alternative meant that some infants would be given formula to treat hypoglycemia (3).

A pilot study in 2011 called for a larger randomized trial to answer questions about the feasibility and safety of prenatal expression (4). The DAME study aims to do just that. DAME, or the Diabetes and Antenatal Milk Expressing trial, will determine whether encouraging women with diabetes in pregnancy to express milk from 36 weeks of gestation on will increase the proportion of infants requiring neonatal intensive care, effect birth gestation, breastfeeding outcomes and economic impact (5). The results of the study are expected on late 2015-2016.

1. Waller, H. (1946). The early failure of breast feeding: A clinical study of its causes and their prevention. *Archives of Disease in Childhood*, 21(105), 1-12.
2. Soltani H, Scott AMS 2012, Antenatal breast expression in women with diabetes: outcomes from a retrospective cohort study. *International Breastfeeding Journal* 7:18.
3. Cox SG. (2010). An ethical dilemma: should recommending antenatal expressing and storing of colostrum continue? *Breastfeeding Review* 18(3): 5-7
4. Forster DA, McEgan K, Ford R, Moorhead A, Opie G, Walker S, McNamara C. (2011). Diabetes and antenatal expressing: a pilot project to inform the development of a randomised controlled trial. *Midwifery* 27: 209-214.
5. Forster <http://bmjopen.bmj.com/content/4/10/e006571.short-aff-1> DA, Jacobs S, Amir LH, Davis P, Walker SP, McEgan <http://bmjopen.bmj.com/content/4/10/e006571.short-aff-5> K, Opie G, Donath SM, Moorhead <http://bmjopen.bmj.com/content/4/10/e006571.short-aff-1> AM, Ford R, McNamara C, Aylward <http://bmjopen.bmj.com/content/4/10/e006571.short-aff-2> A, Gold <http://bmjopen.bmj.com/content/4/10/e006571.short-aff-7> L (2014). Safety and efficacy of antenatal milk expressing for women with diabetes in pregnancy: protocol for a randomised controlled trial. *BMJ Open* 2014;4:e006571 doi:10.1136/bmjopen-2014-006571

These authors found that in Western countries, about half of all breastfeeding women consume alcohol. Alcohol inhibits milk ejection thus potentially decrease the amount of milk consumed by the infant. In terms of potential behavioral effects on infants of alcohol-containing milk, the literature is contradictory. Though the concentration of alcohol in milk is similar to that of the mother's blood, breastfeeding infants receive approximately 5-6% of the weight-adjusted maternal dose and even in the "theoretical case of binge drinking, the children would not be subjected to clinically relevant amounts of alcohol".

Haastrup, Maija Bruun; Pottegård, Anton; Damkier, Per. *Basic & Clinical Pharmacology & Toxicology*. Feb 2014, Vol. 114 Issue 2, p168-173. 6p. DOI: 10.1111/bcpt.12149.

## Here's a few interesting websites:

***Overselling Breastfeeding? How one author exploits the majority to silence minority advocacy***

<http://www.elizabethgrattan.com/prose/oversellingbreastfeeding>

***Moms show us just how beautiful breastfeeding is***

[http://www.huffingtonpost.ca/2015/10/13/breastfeeding-photos\\_n\\_8288360.html](http://www.huffingtonpost.ca/2015/10/13/breastfeeding-photos_n_8288360.html)

<http://www.metronews.ca/views/2015/03/18/breastfeeding-is-not-gross-and-we-need-to-stop-shaming-mothers-for-it.html>

## Also in the Journals:

### ***Breastfeeding and the Use of Alcohol.***

Many mothers worry about harming their breastfeeding infants by consuming an occasional glass of alcohol. Some will even pump, dump their milk and give formula instead. A recent publication may help guide mothers and those asked questions about what precautions are needed. Haastrup, Pottegard and Damkier (2014) performed a systematic search and reviewed 41 publications on the prevalence of alcohol use and the pharmacokinetics of alcohol use in breastfeeding women. Acknowledging the well-established harmful effects of alcohol consumption during pregnancy, they conclude that:

*"Any long-term consequences for the children of alcohol-abusing mothers are yet unknown, but occasional drinking while breastfeeding has not been convincingly shown to adversely affect nursing infants. In conclusion, special recommendations aimed at lactating women are not warranted. Instead, lactating women should simply follow standard recommendations on alcohol consumption".*



***Quintessence Breastfeeding Challenge 2015***  
Vancouver, BC