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Internationalt Certificerede Ammekonsulenter i Danmark

Speakers Abstract DACLC fagdag 21.9.2016

Emne: Seksuelt misbrugte kvinder og amning. (1 E-CERPS)

Presentation: Malene Steen Holmboe, Aalborg. DK

Masterafhandling Master i Sexologi, Aalborg Universitet. Maj 2015

Background: Many women who have experienced sexual abuse in childhood do not disclose to midwives or other healthcare professionals this abuse during their pregnancy, labour or postpartum period. The impact of the abuse may, among other issues, create significant trouble in breastfeeding. Due to this impact it is important to focus on the subject. The aim of this study was to explore problems that sexually abused women in Denmark experience in relation to breastfeeding, and how midwives in the Danish antenatal/maternity care program can best help these women in regards to breastfeeding or the decision not to breastfeed.

Methods: The study was based on qualitative interviews with three sexually abused women and includes background information from other studies of sexually abused women, along with theory on coping and stigmatization.

Results: Sexually abused women experience many issues in relation to breastfeeding such as loss of control, flashbacks, dissociation, feeling as though they are committing abuse while breastfeeding, and perceiving themselves as different from women who have not been sexually abused. Despite these issues, these women are determined to breastfeed as they see a connection between breastfeeding and being a good mother.

Conclusions: Midwives and other health care professionals need to be aware of the impacts of sexual abuse on breastfeeding, and should inquire with every patient during their pregnancy about any sexual abuse. The women must feel accepted when meeting the healthcare professionals and should be informed of the potential impacts of sexual abuse in relation to breastfeeding. Information regarding sexual abuse must be documented in a patient's medical record so maternity health care professionals can follow up with the patient and make individual considerations while helping with breastfeeding

Emne: 1.Reflux, GERD and breastfeeding, 2.Babyhands during latch, Facilitating infant Competence, 3. Assessing for Tongue Tie

Presentation: Catherine Watson Genna, NY. US.

IBCLC, Adelphi University, Associate editor and auther, BS science.

Private IBCLC practice.

1. Reflux, GERD and Breastfeeding (1,5 L-CERPS)

Irritable infants are commonly diagnosed with reflux, but might also be suffering from feeding related difficulties or allergy. This presentation explores the recent research on regurgitation, reflux and GERD in infants and their relationship to feeding problems. Clinical evaluation and management of breastfeeding issues that can contribute to reflux are also covered.



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2. Facilitating Infant Competence: Hand Use During Latch (1 L-CERPS)

Most breastfeeding instruction includes strategies to prevent baby's hands from 'getting in the way' during positioning and latch. Careful observation reveals that infants use their hands in predictable ways that help them find, shape, and move the breast to assist attachment. This presentation focuses on these predictable behaviors and ways to work with them and when necessary modify them to assist breastfeeding dyads. The longer version includes the research base for these observations.

3. Assessing for Tongue Tie (1L-CERPS)

Subtle difference in tongue attachment can cause feeding difficulties in infants. Traditional guidelines such as requiring a heart-shaped tongue-tip or complete inability to extend the tongue over the gum ridge miss these more subtle cases of ankyloglossia. This presentation uses extensive clinical photography and video to illustrate a systematic assessment strategy that examines tongue mobility and tongue attachment in light of recent research.