Lactation Physiology Case Studies

*Please complete this form, providing descriptive and thorough answers. This is an opportunity to explore real scenarios that you might face as a lactation counselor.*

*IMPORTANT: When you have completed the form, save it to your computer. We suggest renaming the completed form to make it easier for you and your trainer to locate it at a later date. For example, if your name is Alex Smith you would call the file:*

*SmithA\_LactPhysiology.docx*

*Once saved, log in to the student website and go to the assignment. Click the upload button, locate the completed file on your computer, and click submit. Your trainer will provide feedback within 14 days.*

*This assignment can be submitted in a format that is comfortable for you. It can be written, voice-recorded (maximum five minutes), or submitted as a video (maximum five minutes). If using audio or video, please answer questions in the same order they are listed on this template. Save your audio or video file to an online repository (e.g., DropBox, OneDrive, Google Drive) and upload a file for assignment submission with your name, the name of the assignment, and a link to the file in your repository. You can also respond to each question in individual files and add the link to each response in this assignment template*

The aim of this assignment is to explore a number of possible scenarios related to clients so that you can:

* Relate the knowledge and understanding of pregnancy and birth physiology to real-life situations
* Explain the evidence to clients in a way that can be understood by the client, is relevant to them, and is at the level they desire

NOTE: All questions must be answered. If any answers are left blank, your assignment will be returned and you will be asked to complete the relevant sections.

## Assignment Instructions

In this assignment, you will read two case studies that relate to working with breastfeeding or chestfeeding individuals. The first relates to providing evidence-informed information to a client. The second case study relates to supporting a client in making informed decisions.

Your Name

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| Zoe Durant |

### Scenario One

As lactation counselors, we hope to be able to provide evidence-informed information to clients. However, you will have noted that in some areas the evidence is conflicting or unclear. In other cases, the evidence does exist but the practice within a clinic or hospital does not follow this evidence. Consider this scenario and explain how you would manage it if working with a client.

*Your client, who has a 2-week-old baby, tells you that their doctor has told them that they need to give supplements of water to the baby to help eliminate mild jaundice. The baby is alert and feeding well. The client has asked the doctor if they are concerned at all and the doctor has reassured your client that the baby is healthy and has no problems with weight gain or any medical issues.*

Write out the conversation that you would have with your client to help them consider their options, based on the available evidence, and the information you might present to them. (250-500 words / 2-3 paragraphs)

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| Thanks for sharing this information with me. I am so glad to hear that the baby is alert, feeding well, and gaining weight. Has the baby been having 6-8 wet & dirty diapers every day? If they are that’s a great sign that they are staying hydrated with your breastmilk & processing bilirubin well. Some doctors do not have updated information on this. The current evidence from the AAP & WHO show that giving babies water is not helpful at all for jaundice. Water fills up their stomachs, they nurse less often & that slows down their bowels which is the main way they eliminate bilirubin. If you ever notice baby is more sleepy that usual, stops gaining weight, stops pooping or turns more yellow you will want to look deeper. |

What do you hope the outcome of the conversation would be? (150-300 words / 1-2 paragraphs)

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| I hope the outcome of the conversation will lead the client to feel empowered in her decision to question the treatment option. They will know that water is no longer recommended for breastfed newborns. They would feel confident that breastmilk is effective for baby’s hydration & bilirubin levels. They would feel reassured that their body is doing the right thing and trusting the process. They will feel heard and validated, confident and more connected to their baby. The baby won’t have a gap of nutrition, they will continue gaining weight. The client would trust me more and see me as a helpful person. |

### Scenario Two

Much of the work of a lactation counselor is to support a client in identifying the possible causes of problems and then to work together to take steps to overcome those problems. Consider the following scenario.

*Your client has noticed that their 3-week-old baby is not gaining weight at the expected rate and they are concerned. Your client asks you for help in identifying what the problem might be. You want to support the client in providing information but avoid diagnosing the problem or making recommendations since these are clinical skills that are inappropriate for a lactation counselor.*

Identify three possible causes for poor weight gain. (150-300 words / 3 strategies)

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| 1. Scheduled feeding can cause this. Make sure the baby is feeding on demand. Suggest they wake the baby to feed if they are sleeping long stretches. |
| 1. Non-Nutritive Sucking vs Nutritive Sucking: Check the babies suck ratio. 2:1 is good, 5:1 needs adjustment. Check baby for swallowing & check if mom keeps baby on long enough to get higher fat milk (hindmilk) |
| 1. Refer to a specialist who handles lip or tongue ties if a shallow latch seems to be the issue. Making sure the baby is latched on properly. Suggest massaging breast during feeding to increase flow and stimulate baby to swallow. |

Explain three strategies that a client might use to address this. (150-300 words / 3 strategies)

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| 1. The best way to address this is to watch the mom feed the baby. They might need to hand express some foremilk before a feed to make sure that baby isn’t filling up on that and not accessing the hind milk. Ask the client what their goals are, if they are open to a referral, sometimes a second opinion is needed. |
| 2. Also pay attention to the overall health of the baby, sometimes babies just grow at different rates, there could also not be a problem at all, to rest assured if there are no other issues. If the baby is alert, having 6-8 dirty diapers |
| 1. Suggest they continue feeding their baby at every cue, explain that they don’t always cry to signal they are hungry, missed cues could be contributing. |

You can add any questions or comments here that you would like to share with your trainer.

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| If there is no reason for the slow weight gain, validate the clients concerns, explain that there is lots of variations of normal. Explain that the growth rate guidelines are mixed with formula fed babies which skew the data. Empower the client to stay vigilant on the big picture instead of just focusing on just the average numbers. |