MOM Monday #2

Mother's Own Milk Initiative More Reasons why we are participating:

In the Beginning......

- o GI flora is sterile.
- Colonization of gut occurs with delivery
- o Flora is diet dependent by 4th day of life.
- Breast milk creates increased gut pH (bacteria not able to replicate i.e. milk is protective).
- Formula creates decreased gut pH (not protective).
- Gut pH recovery post any formula feeding takes 2-4 weeks.
- "The feeding of human milk during the NICU stay reduces the risk of short and long term morbidities in premature infants. Including enteral feeding intolerance, nosocomial infection, NEC, chronic lung disease, retinopathy of prematurity, developmental and neuro cognitive delay and re-hospitalization after NICU discharge. Recent evidence suggests that the impact of human milk on improving infant health outcomes is linked to specific critical exposure periods in the post-birth period during which the exclusive use of human milk and the avoidance of formula may be most important. "

Meier, P. Improving the Use of Human Milk During and After the NICU Stay. Pg. 217

Please see the attachment: NANN position statement #3065

If breastmilk was marketed as an Rx It would be ordered for every premature infant





Did you know?

- Exclusive human milk can significantly reduce the risk of:
- Necrotizing enterocolitis by up to 86%
- Ear infections by up to 50%.
- Serious respiratory tract infections by 72%.
- Gastroenteritis by more than 50%.
- Re-admission of infant by 60%.

*Schanler, R.J., et.al.; "Feeding Strategies for Premature Infants: Beneficial Outcomes of Feeding Fortified Human Milk Versus Preterm Formula." Pediatrics. Vol. 103, No.6 June 1999.

The MOM initiative
workgroup is
producing this flyer
weekly to help all
NICU team members
understand the work
of the project.
Periodically we will be
attaching articles, etc.
that support the work
and we feel are of
interest to the team.