

# CHRD 2024: Abstract Submission Form

**Presenter Name**

Narges Khodabandehloo

**Presenter Status**

Masters Student

**Role in the project**

Design

Analyze Data

Write Abstract

**Research Category**

Community Health / Policy

**Title**

Lactating Parents Attending Winnipeg Breastfeeding Centre: A Descriptive Study

**Background**

The World Health Organization recommends exclusive breastfeeding for the first 6 months and continuation of breastfeeding for up to 2 years or longer. In Canada, 91% of mothers initiate breastfeeding, yet only 34% continue exclusive breastfeeding. The Winnipeg Breastfeeding Centre (WBC) is the only clinic in Manitoba providing breastfeeding care at the physician level.

**Objective**

Our project aims to describe the WBC patient population characteristics, breastfeeding difficulties, diagnoses, and treatments.

**Methods**

This retrospective longitudinal study describes the WBC client population from 2018-2024 using the clinic's electronic medical records (N=9,294 patient visits), intake questionnaire (N=3,305 unique patients), and referral data (N=11,887 referrals). Additionally, manual data extraction was performed on a representative sample of free-text visit notes (n=79).

**Results**

WBC primarily received client referrals from medical doctors (98.3%), with relatively few from nurse practitioners (0.8%) and midwives (0.1%). Mean maternal age was  $34.9 \pm 4.7$  years, and mean infant age was  $8.5 \pm 9.6$  weeks, with 57.9% being primiparous, 41.9% having a diagnosed comorbidity, and 55.4% having at least one delivery complication. In the visit notes, the most frequently diagnosed difficulties were infant feeding mechanic challenges (latch issues, tongue/lip tie, palate issues, inefficient feeding, lip blisters) (35.4%), supply issues (30.4%), and nipple issues (infection, pain, trauma, flat nipple) (29.1%). In the intake questionnaire, clients similarly reported low supply (54.7%), nipple pain (44.1%), and tongue tie concerns (29.5%) as reasons for attending the clinic. Other diagnoses included infant behavioral challenges, nutrition/growth issues, twin feeding, and maternal mental health (all < 10%). The most common interventions included discussions on infant care (e.g. cues, coping with fuss, skin-to-skin contact) (77.2%), guidance (e.g. tongue tie, lactation physiology, responsive feeding) (74.7%), and latch issues (e.g. deep asymmetric latch) (73.4%).

**Conclusion**

This study will guide future research on access and quality of lactation care in Manitoba and identify populations requiring extra support.

**Do you have a table/figure to upload?**

No

## Authors

| Name                  | Email                        | Role              | Profession  |
|-----------------------|------------------------------|-------------------|---|
| Narges Khodabandehloo | khodaban@myumanitoba.ca      | Presenting Author | Graduate  |
| Larisa Lotoski        | Larisa.Lotoski@umanitoba.ca  | Co Author         | Lab Research Associate  |
| Katherine Kearns      | drkkearns@gmail.com          | Co Author         | Family physician, assistant professor at University of Manitoba   |
| Christina Raimondi    | raimondi.christina@gmail.com | Co Author         | Family physician, clinical teacher at University of Manitoba  |
| Alexander Singer      | alexandersinger@gmail.com    | Co Author         | Associate professor at University of Manitoba, Director, Manitoba Primary Care Research Network                                 |
| Nathan Nickel         | Nathan.Nickel@umanitoba.ca   | Co Author         | Associate professor at University of Manitoba, Director of Manitoba Centre for Health Policy (MCHP)                             |
| Meghan Azad           | Meghan.Azad@umanitoba.ca     | Co Author         | Professor at University of Manitoba, Canada Research Chair in Early Nutrition & The Developmental Origins of Health and Disease |