

AUDIT OF HUMAN BREAST-MILK PROVISION FOR VERY LOW BIRTH WEIGHT BABIES IN A TERTIARY NEONATAL UNIT OVER A 10 YEAR PERIOD

P. Srihari Bhat, M. Gupta, C. Kingdon

Neonatology, St Thomas' Hospital, London, UK

Background and aims: Professionals involved in the care of sick preterm babies are familiar with difficulties in making decisions about feeding. This audit looks at the provision of human-milk to very low birth weight (VLBW) babies in a tertiary neonatal unit over a 10 year period and the impact of opening a human milk-bank.

Methods: Data was collected retrospectively using a regional neonatal database. All VLBW babies born in-house or transferred in within 7 days of life were included. The first 3 months of each year (2001-2010) were studied. Gestational age, weight and type of feed at weeks 1, 2, 3 and discharge were analysed. Feeding interventions, service and educational strategies developed in each year were noted.

Results: Results demonstrated consistent improvement in breast-milk provision for VLBW babies, particularly with the opening of a milk-bank. More than 80% babies were discharged receiving breast milk and 100% babies received exclusive human-milk for first two weeks in the audit's final two years. Improvement in breast-milk provision occurred due to:

- (I) Robust, closely adhered to, feeding guidelines for VLBW babies,
- (II) Earlier interventions with parents,
- (III) Nursing and medical staff education,
- (IV) Successful milk-bank established in 2004 to ensure continuous supply of donor breast-milk; and
- (V) Community nurses pro-actively supporting breastfeeding mothers pre-discharge.

Conclusion: This 10 year audit confirms the impact of a coherent feeding policy for VLBW babies in a hospital with a donor milk-bank. This strategy led to more than 80% of the smallest and sickest babies being discharged still receiving maternal milk.