

# Lactation Considerations for the New Mother

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Congratulations on your newfound status as dermatologist- or dermatology resident- mom! You have, without a doubt, already established yourself as highly successful and accomplished in life. You have faced and overcome challenges like nobody's business to get where you are today. You should feel proud! You navigate your way through exams and complex medical problems on the daily. So breastfeeding your little angel and mastering the ins and outs of breastfeeding while in practice or residency should be essentially effortless - as natural as reciting the Krebs cycle in your sleep. There is just one (or more) tiny problem(s)! You have never done this before. You currently live across the country from your family and support system. You did not learn how to breastfeed in medical school. Maybe you HAVE done this before, but how could you possibly keep up with all the new advances in breastfeeding technology and legislation while simultaneously trying to remember all of the x-linked recessive diseases and p450 inducers in dermatology? We have good news. Even if you feel overwhelmed right now, we want you to know that you can do this! We are here for you. We support you. Your baby is certainly proud of you, and that is worth more than all of the gold in this world- liquid gold, that is!

## Did you know?

You probably know that breastfeeding is recommended by the American Academy of Pediatrics as the sole source of nutrition for baby during his or her first six months of life (and thereafter for whatever duration is desired by both mom and baby). We're also fairly confident that you know breastfeeding is awesome for the immune system and has a protective effect against some viral illnesses and atopic tendencies. Breastfeeding also reduces the risk of sudden infant death syndrome (SIDS) and decreases the likelihood of childhood and adolescent obesity.

Maybe you did not know, however, that female physicians are more likely to breastfeed than non-physician peers at birth. This trend does not, unfortunately, hold true at six and twelve months of life.<sup>1</sup> Specific barriers to reaching breastfeeding goals were highlighted in recent 2018 issues of JAMA Internal Medicine and Breastfeeding Medicine.<sup>2,3</sup> These barriers included lack of time, inflexible schedules, limited access to space, short maternity leave, and feeling overwhelmed. Also this year, Rangel et al. reported in JAMA surgery that breastfeeding was important to 96% of new surgeon moms, but 58% stopped earlier than they wished because of inability to leave the operating room and limited access to lactation space.<sup>4</sup> In a 2013 study in Breastfeeding Medicine, only 7% of 404 OB-GYN residents believed their residency program had a formal breastfeeding policy and 2/3 of new mothers quit breastfeeding early.<sup>5</sup> In addition, a 2010 publication in Academic Pediatrics revealed that only 10 out of 132 program directors reported having a formal policy for breastfeeding.<sup>6</sup>

In light of the aforementioned studies we feel the need to prepare you for breastfeeding in the world of dermatology. Currently, no studies exist to show whether the same trends above apply specifically within our specialty. We aim to provide you with some tips and tricks to help you succeed and add to your armamentarium of knowledge on the topic to facilitate a successful breastfeeding journey for you and your baby. We won't lie to you. Breastfeeding, pumping, and still rocking the wards or clinic is hard work! Luckily, the challenges we face as new breastfeeding mothers are being recognized. The issue has even been brought up as an ethical one, with discussions in the literature regarding the hazards of delayed milk expression for new mothers and of pumping while driving.<sup>7</sup>

So, here we go!

### **Tip #1: Know your rights**

It may be helpful to know that break time for nursing mothers is required by federal law under the Patient Protection and Affordable Care Act (PPACA), which was implemented in 2010, amending the Fair Labor Standards Act (FLSA), Section 7.<sup>8</sup> Under this law, an employee must be granted the necessary time to express breast milk until baby is one year of age. A private space, other than a restroom, must also be available through the employer. However, there are certain exceptions to this legislation and we direct you to the United States Department of Labor for full details. In addition, physicians in private practice may consider obtaining leadership roles to help facilitate pro-breastfeeding policies or creating relationships with colleagues that might facilitate a pro-breastfeeding environment. You may also want to check your state's laws regarding lactation accommodations. If they are more thorough than federal requirements, they will apply! We also advise discussing available resources for breastfeeding mothers with your program director (if you are in residency), as specific resources may be available for you.

### **Tip #2: Set goals and make a plan**

Set short-term and long-term goals. Here are some examples:

1. If I need help, I'm going to ask for it.
2. If all goes well, I would like to breastfeed for as long as feasible given my current circumstances.
3. I will be reasonable with the expectations I set for myself on this journey.

Write them down. Be as vague or as specific as you need to be to remind yourself what you initially set out to do. Sure, there are studies and statistics that specifically analyze how you set goals and the likelihood that you'll reach them. Realistically, we just want you to be happy and do your best. We're all in this together and we really believe that it takes a whole lot of love and support to raise a child. As for making a plan, tailor it to your goals! We recommend once you return to work that you

communicate with your employers or residency directors and make sure you are aware of all of your lactation resources.

### **Tip #3: Reach out and get connected**

### **Tip #4: Determine what kind of gear will fit your busy lifestyle**

Breastfeeding is nothing new, although it may feel that way sometimes. Fortunately, there is a myriad of resources available to you as new moms that are right at your fingertips! We suggest connecting with current or past residents or colleagues that have been in your shoes, if only for solidarity and swapping of endless anecdotes and mishaps. Connect with a faculty mentor if you can and know that you have support within your program.

Here is a list of some of the products we think you may find useful:

- ✓ Breast pump (Life hack: Ask for a printed prescription for a breast pump from your doctor and find a vendor online. You might discover more options for pumps and gear than what is listed as covered by your insurance. You may have to pay an additional fee to purchase the pump of your choice.)
- ✓ Flanges, back flow protectors, tubing
- ✓ Hands-free pumping undergarment
- ✓ Nursing friendly apparel
- ✓ Clean change of clothes
- ✓ Storage containers
- ✓ Milk cooler
- ✓ Icepack
- ✓ Snacks
- ✓ Treat yourself to a LEGIT bag. You won't regret it. Prepare yourself to carry upwards of 20 lbs. on a daily basis (See list above, in addition to whatever else you need to carry with you on a daily basis, such as a laptop)
- ✓ Access to an in-person or online lactation consultant or colleague MD/CNM (This can be a lifesaver and quick resource for questions!)

### **To Recap**

- ✓ Know your rights
- ✓ Set goals and plan accordingly
- ✓ Reach out and get connected/know your resources
- ✓ Treat yourself to the best gear for you, your baby, and your lifestyle

**Citations:**

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