

# BREASTFEEDING Connections

Issue 1 | 2019 | Vol. 25

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## MARIJUANA: WHAT ARE THE RISKS?

**Marijuana is now legal to use in the state of Michigan and many breastfeeding advocates are concerned about how this will impact our breastfeeding education and support. The American Academy of Pediatrics says mothers who are breastfeeding their babies shouldn't use marijuana. The goal of the breastfeeding counselor is to educate and inform. Once families have the information they need, it's their decision on how to care for their children. With this in mind, [Kellymom.com](http://Kellymom.com), [Colorado Dept. of Public Health & Environment](http://Colorado Dept. of Public Health & Environment) and other researchers have attempted to educate the medical community and public about the risks associated with marijuana use when caring for an infant. There is limited research on breastfeeding and marijuana use.**



**Here is a summary:**

The risks below apply to any parents using marijuana around children, regardless of feeding method:

- Breathing secondhand marijuana smoke is dangerous for parents and children.
  - ◆ Marijuana smoke has many of the same chemicals as tobacco smoke. Some of these chemicals may cause cancer (Callaghan, 2013) or heart problems (Wang, 2016).
  - ◆ Babies exposed to secondhand marijuana smoke have a higher risk of SIDS (Klonoff-Cohen H, 2001).
  - ◆ Being exposed to marijuana smoke may cause sleepiness in babies. This could slow down their body and brain growth (Liston, 1998).
- Being high while caring for a baby isn't safe.
- There is no pesticide oversight by the FDA, USDA or EPA which can cause cannabis crops to contain toxic levels of pesticides. Pesticides are not meant to be ignited and if inhaled can lead to severe breathing problem (Sullivan, 2013).
- Many of Michigan's marijuana providers have been cited for selling medical marijuana contaminated with chemical residue, arsenic, yeast, mold and residual solvents. <https://www.michigan.gov/lara/0,4601,7-154-11472---,00.html>.
- If using edibles, marijuana products can be mistaken for regular food or candy by small children (Barrus, 2016).

In addition to the risks above, using marijuana while breastfeeding may add the following additional risks:

- There is limited research on breastfeeding and marijuana use, including: the amount of THC in breast milk, the length of time THC remains in breast milk and effects on the infant (Baker, 2018)
- Because THC is stored in body fat, it stays in your body for a long time. A baby's brain and body are made with a lot of fat. Since your baby's brain and body may store THC for a long time, you shouldn't use marijuana while you're pregnant or breastfeeding.
- Breast milk contains a lot of fat. This means that "pumping and dumping" your breast milk may not work. Alcohol isn't stored in fat, so it leaves your body faster.
- Using marijuana may decrease the amount of breast milk you produce (Hale, 2017)

**In conclusion, what should we communicate to families about the use of marijuana when caring for an infant:**

- No smoking in the home or around your baby.
- Carefully choose who is taking care of your baby when you're not around.
- If you choose to use marijuana, make sure there is another person around who is not using marijuana and can safely care for your child/children.
- Choose wisely where your baby sleeps.
- Your baby is precious cargo. Treat him/her as such. Don't drive high.
- Properly label and store your marijuana products in places where your child can't reach it.
- Talk to your healthcare provider about ways to reduce your marijuana use.
- If you decide to continue to use marijuana while breastfeeding—know the facts.



Find more information in the Colorado on Marijuana Pregnancy & Breastfeeding Guidance [here](#)

**Works Cited**

Baker, T. D.-F. (2018). Transfer of Inhaled Cannabis Into Human Breast Milk. *Obstetrics & Gynecology*, 783-788.

Barrus, D. G. (2016). Tasty THC: promises and challenges of cannabis edibles. *Methods report (RTI Press)*.

Callaghan, R. C. (2013). Marijuana use and risk of lung cancer: a 40-year cohort study. . *Cancer Causes & Control*, 1811-1820.

Hale TW, Rowe HE. [Medications and Mothers Milk](#). 17th Edition. New York, New York: Springer Publishing Company; 2017: 146-48.

Klonoff-Cohen H, L.-K. P. (2001). Maternal and paternal recreational drug use and sudden infant death syndrome. *Archives of Pediatrics and Adolescent Medicine*, 765–770.

Liston, J. (1998). Breastfeeding and the use of recreational drugs-alcohol, caffeine, nicotine and marijuana. *Breastfeeding review*, 27.

Sullivan, N. S. (2013 ). Determination of pesticide residues in cannabis smoke . *Journal of Toxicology*.

Wang, X. D. (2016). One minute of marijuana secondhand smoke exposure substantially impairs vascular endothelial function. *Journal of the American Heart Association*.

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## **BREASTFEEDING PEERS: WE WANT YOUR INPUT!**

The theme of this year's Breastfeeding Awareness Month will be, **"This is What Exclusivity Looks Like"**. We would like to feature quotes from you and from moms with whom you work that describe:

- Why You Breastfeed Exclusively
- How You Make Exclusive Breastfeeding Work

Additionally, we would like models who would be willing to pose while breastfeeding or expressing milk in their busy life. Please email Heidi Maki at [MakiH1@michigan.gov](mailto:MakiH1@michigan.gov) by 3/8/19. Don't forget your name and contact information!

## PEER SPOTLIGHT

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### Mid Michigan Community Action Agency

*Meet MMCAA's Rachel Delgado!*

Rachel is the Breastfeeding Peer Counselor with the Mid Michigan Community Action Agency, Inc in Midland. On a personal note: She recently came back from maternity leave and has six children ranging in age from 5 1/2 months to 14 yrs old. She had some breastfeeding challenges with her first child and had to supplement him with formula, but proudly explains, "I grew from my experience and all the rest of my children only had breastmilk". Rachel states "I absolutely love what I do and I love babies".

Her experience of being a WIC mom for the past 14-15 years gives her the insight to connect with WIC moms and provide each client with a personal touch. "I discuss with Moms going back to work how to continue breastfeeding and pumping while away... and they then tell me their struggles whether it be work, school, or being busy with their other children. Whatever the case, we make a plan. I encourage them to reach out to me with any questions or concerns. The best advice I can give to moms is to take it one feeding at a time".

Rachel recently assisted along with an IBCLC at her agency a mom whose baby has special needs. The baby is exclusively breastfed by being provided pumped breast milk, but mom still places baby to breast to offer exposure to bacteria for promoting a healthy immune system for the baby. She commented about this mom and baby, "She is pumping around 40 ounces a day and her baby will thrive because of her dedication and our (WIC staff's) belief that she is going to succeed". Rachel is truly dedicated to her clients and her family.

*Do you have a special story about a Breastfeeding Peer Counselor or are you that special Breastfeeding Peer Counselor? Let us know—Dionne or Marji and we will highlight that peer or you in a future Breastfeeding Newsletter!*



Are you interested in pursuing advanced breastfeeding certification (IBCLC)? If so, we have funds available to help you pay for books or coursework in preparation for the IBLCE. Please contact Marji at [CyrulM@michigan.gov](mailto:CyrulM@michigan.gov) for more information.

## IBCLC's in WIC

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### Congratulations to our newly-certified IBCLCs!

- \* Carrie Allgaier, RD, IBCLC Ingham County
- \* Brie Carlson, MPH, RD, CSP, IBCLC Kent County
- \* Micia Eddins, IBCLC, CLS, MPH (c) Detroit Health Department
- \* Ora Rosenfeld, RDN, IBCLC, Arab Chaldean Council (ACC)
- \* Kirsten Sonnevile-Douglass, IBCLC, CLC, CLS Oakland Livingston Human Services (OLHSA)
- \* Casey Wunderink, RN, IBCLC Kent County

## COFFECTIVE CORNER

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Thank you to everybody who participated in Coffective Coaching Calls this past summer and fall. We continue to be impressed by your dedication and creativity in implementing Coffective materials into your WIC clinic.

Here's what you told us:

### KEY TAKEAWAYS FROM COACHING CALLS:

- Coffective tools have been integrated into many WIC agencies prenatal education curriculum.
- Breastfeeding Peer Counselors utilize the materials most often with the We're Prepared Checklist being the most popular tool.
- Where Coffective tools are being utilized, hospitals and WIC agencies have had great success in working together.
- The greatest challenges identified were not having enough guidance on how to utilize the tools, staff buy-in, and time to train staff.

### NEEDS IDENTIFIED FOR WIC CLINICS:

- Guidance on how to utilize the Coffective tools.
- Many WIC agencies are unaware of all the resources available to them and where to obtain them.
- Continuous communication and training regarding implementation and how to incorporate the tools.
- More training and tools on how to engage hospitals and providers.
- Additional training for local WIC agencies on relationship building and implementation of prenatal breastfeeding education.

### Here are our specific plans on supporting you:

- A complete list of Coffective materials available to Michigan WIC clinics has been developed. (Attached)
- Coffective guidance will be provided in each WIC Newsletter and Breastfeeding Connections Newsletter.
- Drawing on each of your individual successes with Coffective, we will be asking you to share with each other at the Breastfeeding WorkGroup, the annual WIC Conference, in the newsletters, and in individual calls.



Coeffective has developed a [Breastfeeding Peer Counseling Toolkit](#). This toolkit will help you incorporate Coffective messaging into your breastfeeding peer counseling support and education.

## Tips on How to Create a (trauma-free) Breastfeeding—Friendly WIC Clinic

What makes a WIC clinic breastfeeding friendly? Breastfeeding posters. Open door policy. Breastfeeding brochures. Judgement-free zone. Coffective waiting room videos. Educated and supportive staff. A smile. Mothers encouraged to breastfeed anywhere in the clinic. (Provide a private area only if the mom requests it). A support group. Access to breastfeeding equipment. Staff that know how to assemble, clean and issue equipment. Staff that feels supported in their own efforts to breastfeed.

\*Management Evaluations include how the WIC clinic’s environment encourages breastfeeding. These pictures from Breastfeeding Friendly WIC Clinic, Health Dept. of Northwest Michigan, demonstrate some examples of this.



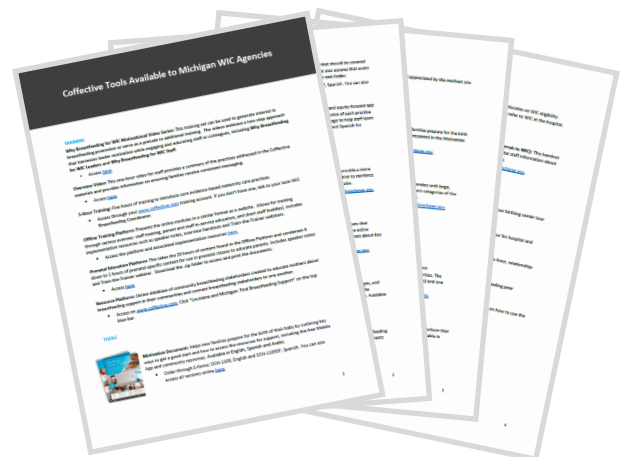
## BREASTFEEDING DATA: WHERE DO I FIND IT?

If you’re looking for the breastfeeding rates in your community, click the link below.

[https://www.michigan.gov/mdhhs/0,5885,7-339-71547\\_4910\\_60308\\_60309\\_60416-275924--,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4910_60308_60309_60416-275924--,00.html)

### Do you need posters, brochures and infographics for your clinic?

You can access and/or order Coffective posters, screensavers and waiting room videos from the attached document called “Cffective Tools Available to Michigan WIC Agencies”.

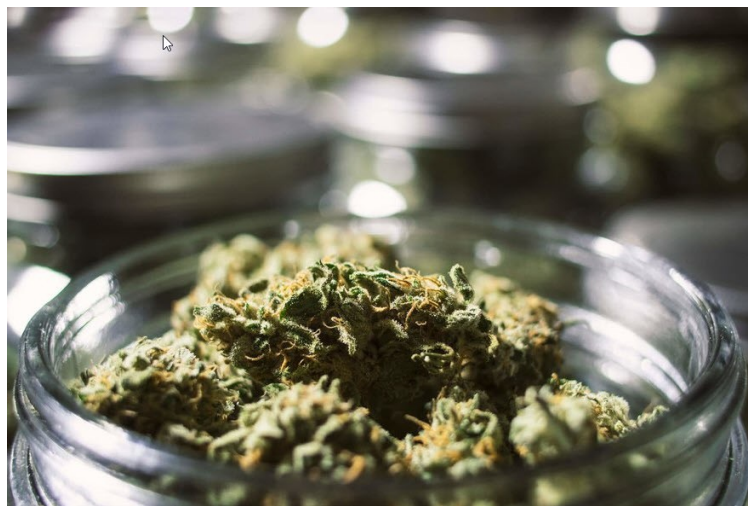


# Marijuana legalization leaves doctors wondering 'What do we tell our patients?'

January 8, 2019 FierceHealthcare

Recently, the editors of the *Annals of Internal Medicine* asked readers to share their perspectives on prescribing or recommending marijuana to patients. From 100 submissions, the editors chose to publish six essays that they say touch on some of the most important issues that clinicians face when discussing marijuana with their patients.

The essays, published in a special section of the [new issue](#) of the medical journal, touch on questions from the safety of marijuana use by pregnant and breastfeeding women, to its use in treating pain, to the problem of hard scientific evidence to back claims about its benefits.



- **Doctors need more scientific evidence about the benefits and risks of marijuana use.**
- **Doctors should consider marijuana use harmful to pregnant and breastfeeding patients until there is evidence that proves it is safe.**
- **Doctors should take a “start-low, go-slow” philosophy when it comes to cannabinoid dosing for managing patients’ chronic pain.**
- **Greater availability of marijuana has unintended consequences for emergency departments, which provide some red flags for doctors and patients.**
- **Evidence is growing that marijuana use is not without risks, including those for patients with cardiovascular disease.**
- **As they look for alternatives to opioids, doctors and health insurers face a “cannabis conundrum.”**

**Read more here:**

<https://www.fiercehealthcare.com/practices/marijuana-legalization-leaves-doctors-wondering-what-do-we-tell-our-patients>

# OUTREACH MATERIALS



U.S. DEPARTMENT OF AGRICULTURE  
**WIC BREASTFEEDING SUPPORT**  
LEARN TOGETHER. GROW TOGETHER.

[WATCH VIDEO](#)

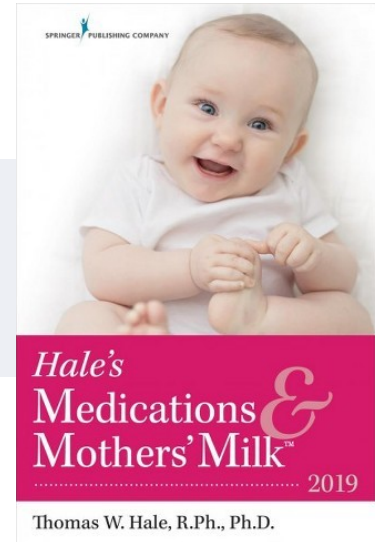
Have you explored the WIC Breastfeeding Support website? There's a lot of great information for WIC families!

<https://wicbreastfeeding.fns.usda.gov/>

Every peer counselor should have a copy of Hale's 2019 reference book.

*Do you have yours?*

If not, email Hanna Thelen at [MDHHS-WICBreastfeeding@michigan.gov](mailto:MDHHS-WICBreastfeeding@michigan.gov)



Do you need more of Breastfeeding: You Can Do It! DVD's?

Email Hanna Thelen at [MDHHS-WICBreastfeeding@michigan.gov](mailto:MDHHS-WICBreastfeeding@michigan.gov)

Are you sharing "Why WIC For Breastfeeding Families?" with your local home visitors, child care centers, hospitals and doctor offices? You can print a copy in English, Spanish, Arabic, Burmese and Japanese from MIBreastfeeding.org. Click on the Advocacy tab, select Maternity Care, then Tools.



**WHY WIC FOR BREASTFEEDING FAMILIES?**

- IT'S LOCAL!**  
WIC is available in every county throughout our state.
- INCOME QUALIFICATIONS ARE HIGHER THAN YOU THINK!**  
One out of every two babies born in Michigan receives WIC benefits.
- ALL WIC STAFF ARE TRAINED TO SUPPORT BREASTFEEDING!**  
WIC is a leading voice of breastfeeding support in our state. Most offices have peer counselors, certified lactation specialists, IBCLCs, and other trained staff to meet a variety of needs.
- BREASTFEEDING WIC PARTICIPANTS GET MORE FOOD!**  
Breastfeeding mothers who are income eligible for WIC receive additional food as part of their benefits package, in addition to referrals to health services and nutrition education.
- WIC SUPPORTS ALL BREASTFEEDING MOTHERS!**  
All breastfeeding mothers - whether they are income eligible for WIC or not - can attend WIC breastfeeding support groups and classes and use the Collective mobile app.

Call 211 to find your local agency or use the FREE "WIC Connect" mobile app to find your local agency and see if you qualify.

**MIBFN**  
Michigan Breastfeeding Network

[LEARN MORE](#)  
[www.mibreastfeeding.org](http://www.mibreastfeeding.org)

## TRAININGS, WEBINARS AND CONFERENCES

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### **Breastfeeding Coordinator Training Tuesday, March 19, 2018**

This training will provide new local agency Breastfeeding Coordinators with the necessary information, skills, and administrative tools to implement a WIC Breastfeeding Program.

Register at: <https://events.mphi.org/wic-breastfeeding-coordinator-training/>

### **Time Savers—Milk Expression Training: Wednesday, March 20, 2019**

This training will provide new local agency Breastfeeding Coordinators with the necessary information, skills, and administrative tools to train their local WIC staff on how to effectively and efficiently provide information on breast pumps and hand expression of milk to WIC participants. Experienced Breastfeeding Coordinators who have not attended a previous training are welcome to attend. Since this is a train the trainer format, it is limited to one representative per agency.

Register at: <https://events.mphi.org/time-savers-milk-expressions>

### **Free Breastfeeding Webinars— Educational Opportunities**

**Great Lakes Breastfeeding Webinars** are held the 3rd Tuesday of each month from 1-2pm EST: 2/19, 3/19, 4/16

Topics this quarter: Expressing Human Milk/Exclusive Lactation, Breastfeeding and Returning to Work, Contraception

Register at: <https://mibreastfeeding.org/webinars>

### **Medela Breastfeeding Webinars:**

Held on 2/21 and 3/20 this quarter

Topics this quarter: Breast Shield Flanges and Establishment and Maintenance of Milk Supply

Register at: <http://www.medelabreastfeedingus.com/for-professionals/education-research>

SEE ATTACHED DOCUMENT FOR A CALENDAR OF 2019 WIC TRAININGS.

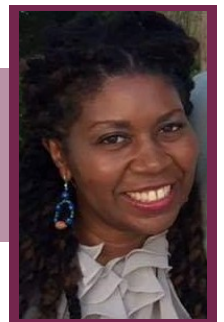
## MEET YOUR STATE BREASTFEEDING TEAM!

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