



#dontsaystoplookitup

Improving Education on the safe use of Medicines in Breastfeeding for FY1 Doctors



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Background

The importance of breastfeeding to public health cannot be underestimated, with increases in breastfeeding worldwide having the potential to prevent at least 823,000 annual deaths of children under 5 and an additional 20,000 deaths from breast cancer¹. In addition to this, it is estimated that substantial savings to the NHS could result from just a moderate increase in breastfeeding rates².

Incorrect advice on medicines use can present a danger to mothers and their babies and can be a factor in prematurely curtailing breastfeeding^{3,4}. Leading UK expert Dr Wendy Jones MBE explains, "Of the approximately 10,000 queries I get every year at least 70% are where mums have been told to stop breastfeeding incorrectly"⁵.

A local need for education on the safe use of medicines in breastfeeding was identified, in keeping with the national picture.

Aims

The aims of the project were to:

- Ascertain a cohort of FY1's baseline knowledge of breastfeeding and medicines use in breastfeeding
- Evaluate whether a training session resulted in improved knowledge around six weeks after completion of the training
- Gain insight into how valuable the trainees perceived this training to be
- Refine and deliver the training on a recurring basis

References:

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The authors are extremely grateful for the generosity of the women in the online breastfeeding support community who sent us their breastfeeding images for inclusion in this poster.

Method

A training session was designed for FY1 doctors collaboratively between pharmacy and the Infant Feeding Midwife/IBCLC covering areas including the public health benefits of breastfeeding, the Unicef Baby Friendly Initiative and safe use of medicines. A survey was designed to measure knowledge of these areas before and after the training.

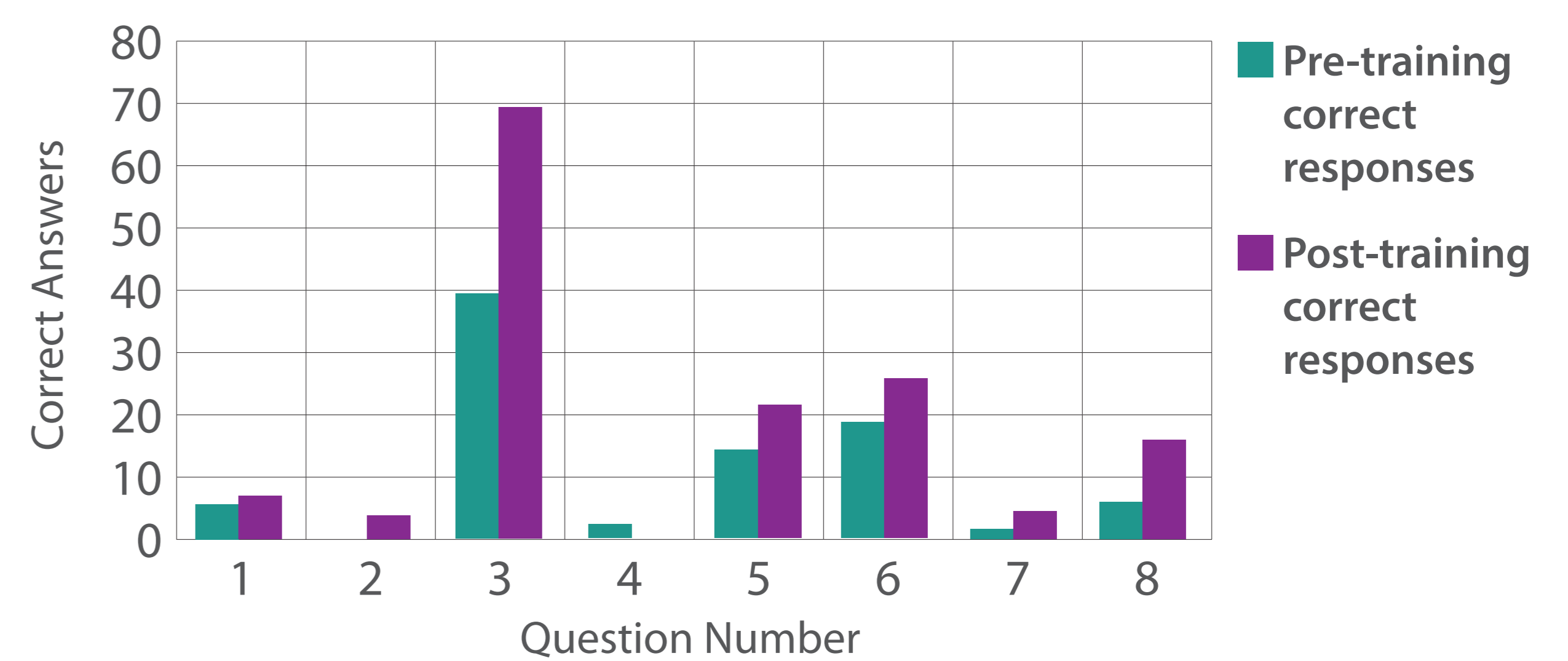
The survey was completed by the trainees immediately prior to the training and again around six weeks later.

The trainees also completed an evaluation form immediately after the training session to ascertain their opinion of the session.

Outcomes

Baseline knowledge on common medicines and their safety in breastfeeding was poor, as was the knowledge on appropriate sources to use when checking the safety of medicines. There was a marked increase in the proportion of correct answers on the second survey around 6 weeks after the training as demonstrated below.

Comparison of correct survey responses



The session was rated as good or excellent by all attendees, with many positive specific comments offered. Training and data collection is currently being repeated with the 2018-19 cohort of FY1s incorporating feedback from the last group of trainees.

