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Original Research Paper

Nursing

ASSESSMENT OF LATCH SCALE ON INITIATION OF BREASTFEEDING AMONG IMMEDIATE POSTNATAL MOTHERS :A DESCRIPTIVE STUDY

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The Present study is to assess the LATCH score regarding breastfeeding among immediate postnatal mothers. A cross sectional descriptive study was conducted on non probability sample (purposive sample) of (60) immediate postnatal women who have either normal vaginal delivery or cesarean section. A questionnaire was used as a tool of data collection to fulfill with objectives of the study and consisted of three parts, including demographic, reproductive characteristics, LATCH Breastfeeding Assessment Tool. Descriptive and inferential statistical analyses were used to analyze the data. Results: The results of the study revealed that the highest percentage (33.3%) of the sample their age was ranged between (30-33) years, (30%) of them was graduated from secondary school, and (58.3%) of them were housewives, (60%) had 1-2 birth, (63.33%) had delivered male newborn had (51.67%)high score of LATCH Breastfeeding Assessment and that there is a significant relationship (P= 0.05) between their ages ,no of parity with LATCH breastfeeding study sample. Conclusion: Nearly half of study sample had high score of LATCH breastfeeding assessment.

KEYWORDS: Breastfeeding, Immediate Post Natal Mothers, Initiation And LATCH Scale.

INTRODUCTION

Breastfeeding has the potential to save lots of neonatal, infant and young child lives and to scale back morbidity and mortality. it's estimated that promotion of exclusive breastfeeding (EBF) for 6 months, it means giving nothing to neonate only breast milk except vitamins, minerals or medicines, this might prevent 8% of worldwide annual child mortality. Breastfeeding is ranked together of the safest and most effective health interventions to realize the millennium development goal four (MDG4): reduce child mortality(1). LATCH may be a tool supported observations and descriptions of effective breastfeeding which include five characteristics of breastfeeding (2). there's strong evidence to support the planet Health Organization (WHO) recommendations for ladies to breastfeed their infants exclusively for the primary six months of life, with continued breastfeeding together with the gradual introduction of other sorts of nutrition beyond that point (3). The objectives of present study were to assess the LATCH score regarding breastfeeding among study group, to find out the association between latch scale score with selected demographic variables.

METHODOLOGY

A descriptive design was conducted on non probability sample (purposive) which consisted of (60)immediate postnatal mothers who have either normal vaginal delivery or caesarean delivery . Data were collected for the quantity of 1 month . The study was conduct at selected hospitals at Kanpur (Rama hospital, C.H.C Kalyanpur) . subjects were eligible to

participate within the study if they met the next selection criteria: postpartum women who have either normal vaginal delivery or caesarean delivery with healthy newborn; Normal weight and newborns is rooming in with their mothers, additionally participants were excluded from the study if their mothers had any complications and multiple gestation births twins, triple, etc; newborn with low birth weight; premature baby (baby born before 37 gestational weeks) and infants with any congenital malformation or genetic diseases which can affect the study results. Questionnaire was used as a tool of data collection to satisfy with objectives of the study which consisted of three parts: including demographic characteristics, reproductive characteristics and LATCH breastfeeding assessment tool is based on observations and descriptions of effective breastfeeding, evaluates five characteristics of breastfeeding. A numerical score (0,lor 2) is assigned to each measure for a possible total score 10, as shown in table (1). Each letter of acronym denotes a category for LATCH (L: represents how well the infant latches onto the breast, A: represents audible swallowing noted, T: describes the mother's nipple type, C: represents the mother's degree of breast or nipple & general feeding comfort, H: evaluates the number of help the mother must position her baby at breast as shown in table (1). Data are analyzed through the use of Excel (Statistical package). Through the appliance of descriptive statistical data analysis include (Frequencies, Percentage, Mean and Standard Deviation) and Inferential statistical data analysis include Chi-Square test for testing the varied among several observed frequencies and their expected.

Score value	0	1	2
LLatch	Too sleepy or reluctant and No latch obtained	Repeated attempts, Must hold nipple in mouth and Must stimulate to suck	
AAudibleSwallowing	None	Afewwithstimulation	Spontaneous, intermittent (less than 24 hours old), Spontaneous, frequent(greaterthan24hoursold)
T Type of Nipple	Inverted	Flat	Everted(afterstimulation)
CComfort Level (Breast/Nipple)	Engorged, Cracked, bleeding, large blistersorbruises, Severediscomfort		
HHoldPositioning	Full assist (staff holds infant at breast)	Minimal assist (i.e. elevate head of bed, placepillows), Teachoneside, mother does other. Staff helps, mothertakesoverfeeding.	position/holdinfant.

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III. RESULTS

Table(2): Distribution Of Socio-demographic Characteristic For Study Sample.

Variables	StudySample(n=60)	
Age/years	No.	%
18-21	3	5.0
22-25	15	25.0
26-29	20	33.3
30-33	14	23.3
34-37	7	11.7
38-41	2	3.3
Educationallevel		
Primaryschoolgraduateandless	8	13.3
Intermediateschoolgraduate	16	26.7
Secondaryschoolgraduate	18	30.0
Institutegraduate	10	16.7
Collegegraduate&more	8	13.3
Occupation		
Employed	25	41.7
Housewife	35	58.3
Placeofresidence		
urban	19	32
Rural	41	68
Typeoffamily	•	
Nuclear	24	40
Extended	36	60

Table (2) shows that the highest percentage (33.3%) of study sample was at age group (30-33) years, (30%) was graduated from Secondary school, and (58.3%) of them were housewives. The highest percentage (68%) was from urban area. (60%) of them was living in the extended families and (88.3%) of study sample was low socioeconomic status.

Table (3): Distribution Of Reproductive Characteristic For

Study Sample.		
Variables	StudySample($n=60$)	
No.ofparity	No.	%
1	36	60
2-4	24	40
5andabove	0	
No.ofabortion	-	
None	30	50
1-2	25	41.67
3	5	8.33
No.ofstillbirth	•	
Non	49	81.67
1-2	11	18.33
No.ofAlivechildren	•	
1-2	36	60
3-4	24	40
5andabove	0	
Typeofpreviousdelivery	•	
NVD	39	65
C/S	21	35
Currentoftypeofdelivery	•	
NVD	29	48.33
C/S	31	51.67
Genderofthebaby	•	
Malenewborn	22	36.67
Femalenewborn	38	63.33

Table (3) shows that the highest percentage (60) of study sample were primipara. The majority for study sample (50%) did not have any previous abortion. The highest percentage (81.67%) did not have previous stillbirth. (60%) had 1-2 alive

children. The highest percentage (65%) was delivered normally and (35%) had cesarean section. Concerning the current of type of delivery: The highest percentage (51.67%) had a cesarean section . the highest percentage (63.33%) of study sample had born a female baby. while the lowest percentages (36.67%) had born a male baby.

Table (4): LATCH Breastfeeding Assessment Tool for Study Sample (n = 60).

%	No.	Classification
8.33	5	(Poor)0-3score
40	24	(Moderate)4-7score
51.67	31	(High)8-10score

There is no association of latch assessment tool score with demographic variables, except age and no. Of parity of mothers

V. RECOMMENDATIONS

- Providing information for antenatal mothers during ANC visits about importance of initiation of breastfeeding and benefits of breastfeeding
- Implementing LATCH breastfeeding assessment tool for mothers after childbirth.
- Distribution of breastfeeding pamphlet of the instructional material to all mothers having C/S or normal vaginal delivery in the institution
- This study can be conducted as an interventional study
- A comparative study can be conducted among mothers undergone normal Vs caesarean

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