Effectiveness of early initiation of breast feeding on LATCH score in LSCS babies in a tertiary care hospital of Eastern Uttar Pradesh.

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Abstract- Breast feeding is the natural way of providing the new born baby with the appropriate nutrition for its overall growth and development. Initiation of breast feeding in the golden 1 hour not only improves the LATCH score but also the mother’s confidence in breastfeeding. It also provides New Born Baby with colostrum which is rich in immunoglobulins and provides protection against infection and diseases thus reducing neonatal mortality

Objective- The study aimed to assess the effect of early initiation of breast feeding on LATCH score.

Methods- An experimental study was conducted among NBBs of 30 LSCS mothers in each arm who were recruited by convenient sampling. The samples were randomly allocated to experimental and control group. Procedure was explained to the mothers during the antenatal period and their consent obtained for the same. Breast feeding was initiated within an hour among willing mothers and the NBBs LATCH score was assessed at 1 hr and 2 hr of birth. Sociodemographic data was collected using a structured questionnaire and LATCH score using a checklist.

Results- The experimental group had a higher LATCH score than the experimental group. The average LATCH score after 2 hours was significantly high with a P < 0.001.

Conclusion- Early breast feeding within golden 1 hour is an effective strategy in improving LATCH score of babies and thereby an effective breastfeeding pattern and healthy life.

Key Words- LATCH score

INTRODUCTION

Exclusive breastfeeding promotes sensory and cognitive development and protects infant against infectious and chronic diseases. Infants who are exclusively breastfed have 13% reduced risk of mortality compared to non-exclusively breastfed infants in low- and middle-income countries. The common problems encountered by mother – infant while trying to sustain exclusive breastfeeding are flat or inverted nipples, breast engorgement, cracked nipples, blocked ducts, mastitis and socioeconomic and cultural factors. WHO advocates exclusive breastfeeding of infants for first six months. LATCH is a breastfeeding charting system that provides a systematic method for gathering information about individual breastfeeding sessions and helps in identifying these problems and initiating the corrective measures. LATCH is an acronym that stands for Latch, Audible swallowing, Type of nipple, Comfort and Hold. Each component is scored from 0-2 and the total score ranges from 0-10. A total score less than 8 is considered low/unsatisfactory

MATERIAL AND METHODS

This experimental study was conducted among 30 NBBs of LSCS mothers in control and experimental group. The study was conducted among mothers undergoing LSCS at a tertiary care hospital of Eastern Uttar Pradesh during June to Aug 2021. Willing mothers irrespective of their age and parity was included in the study. Newborns born to acutely ill LSCS mothers or admitted in NICU was not included in the study. The research design adopted for the study is quantitative experimental study with control group post-test only design. A total of 30 LSCS mothers were enrolled for the study by convenient sampling and was randomly allocated to experimental and control group. A structured questionnaire was developed to collect their basic demographic characteristics and observational checklist for assessing LATCH score. The collected data was tabulated in a master sheet and analyzed using descriptive and inferential statistics.

Before the start of the study, the purpose was explained to the study participants and consent taken. Ethical clearance was taken from the Institutional ethical committee. The sociodemographic characteristics and the obstetric details of the mother was assessed before LSCS. Breast feeding of babies were initiated within Golden 1 hour and the LATCH score was assessed on first feed and after 2 hours.

RESULTS

<table>
<thead>
<tr>
<th>Latch score in first feed</th>
<th>Experiment</th>
<th>Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3 (Poor)</td>
<td>0</td>
<td>4(26.67%)</td>
</tr>
<tr>
<td>4-7 (Moderate)</td>
<td>13(86.67)</td>
<td>11(73.33)</td>
</tr>
<tr>
<td>8-10 (Good)</td>
<td>2(13.33)</td>
<td>0</td>
</tr>
</tbody>
</table>
Table 1 shows that in experimental group at first feed, majority (86.67%) had moderate LATCH score and 13.33% had good latch score. Whereas in Control group 73.33% had moderate latch score and 26.67% had poor latch score.

Table 2: LATCH score after 2 hours in experimental and control group

<table>
<thead>
<tr>
<th>LATCH score after 2 hours</th>
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<td>0</td>
</tr>
<tr>
<td>4-7 (Moderate)</td>
<td>2(13.33)</td>
<td>10(66.67)</td>
</tr>
<tr>
<td>8-10 (Good)</td>
<td>13(86.67)</td>
<td>5(33.33)</td>
</tr>
</tbody>
</table>

Table 2 shows that in experimental group, majority (86.67%) had good LATCH score and 13.33% had moderate latch score after 2 hrs of LSCS, whereas in Control group 66.67% had moderate latch score and 33.33% had poor latch score.

Table 3: Effectiveness of early initiation of breast feeding on LATCH score in experimental group

<table>
<thead>
<tr>
<th>Parameter</th>
<th>At first feed Mean± SD</th>
<th>After 2 hours Mean± SD</th>
<th>Wilcoxon Z value</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>LATCH score</td>
<td>6.67±0.976</td>
<td>8.27±0.961</td>
<td>3.37</td>
<td>&lt; 0.001</td>
</tr>
</tbody>
</table>

Table 3 shows that latch score was significantly higher after 2 hrs in experimental group. The calculated Wilcoxon Z value is highly significant at p value less than 0.001.

Table 4: Comparison of LATCH score at first feed in experimental and control group

<table>
<thead>
<tr>
<th>LATCH score</th>
<th>Experimental group Mean± SD</th>
<th>Control Group Mean± SD</th>
<th>Wilcoxon Z value</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>At first feed</td>
<td>6.67±0.976</td>
<td>4.53±1.641</td>
<td>3.38</td>
<td>&lt; 0.001</td>
</tr>
</tbody>
</table>

Table 4 shows that in the experimental group, the LATCH score was significantly higher than the control group. The calculated Wilcoxon Z value is highly significant at p value <0.001.

DISCUSSION

The experimental and control group was homogenous with majority of them belonging to the age group 28-32 years. Around 50% of them were primigravida mothers. Statistical tests revealed that there is no significant association between the sociodemographic variables like parity, education, age and family support with the LATCH scores. This is in contrary to the study conducted by Raphael SM et al which showed that caesarean delivery, primiparity and mother’s education were risk factors for a lower LATCH score at 6-12 hrs of birth. This may be attributed to the small sample size of the study.

Results showed majority (86.67%) in experimental group had good LATCH score whereas only 33.33% had good LATCH score in control group. Results also showed that the LATCH score further increased after 2 hours of LSCS. Similar results were brought out by a study conducted at a tertiary hospital at Udupi, which revealed that nurse led early initiation of breastfeeding improves LATCH Scores Early initiation of breast feeding within the first 1 hour of childbirth will help in significantly improving the breast feeding, mother-child bonding, immunity of babies and protection from various infectious diseases.

CONCLUSION

LATCH score is an objective way of gathering information about individual breast-feeding sessions. Early initiation of breast feeding significantly increases effective breast feeding among new born babies and so breast feeding within Golden 1 hour should be implemented and practiced in all hospitals which will go a long way in improving the neonatal health. LATCH score assessment may be implemented in the maternity wards of all hospitals to promote early breast feeding and also early assessment of factors preventing breast feeding.

ACKNOWLEDGEMENT

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Nil

CONFLICTS OF INTEREST

There are no conflicts of interest
REFERENCES:


