# **MilkWorks Provider Update**



## **Consultations at MilkWorks**

MilkWorks has been Nebraska's expert resource for breastfeeding support, consultations, information, and supplies for over 20 years. Our dedicated team has 160 years of combined experience providing lactation support. in MilkWorks stands out for our commitment to compassionate, nonjudgmental care, creating a supportive environment where patients feel empowered and encouraged on their breastfeeding journey.

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"MilkWorks normalized my experience and helped me see that I wasn't alone, that everything was going to be okay and that I could do this! Success looks different to everyone. And MilkWorks really helped me see that."

With a focus on education and empowerment, we equip families with the knowledge and skills necessary to overcome breastfeeding obstacles and foster a positive breastfeeding experience.

Studies have shown that 60% of families do not meet their breastfeeding goals. Our nonprofit community breastfeeding center has been recognized by the Centers for Disease Control as a model program for community-based interventions that improve access to professional lactation support.

All patient's leave MilkWorks with a care plan and a follow-up plan tailored to their individual goals. We believe in coordinated approach to healthcare and provide updates to both the parent's and baby's healthcare providers.

## **Exclusive Breastfeeding Rates at 6 Months**



\*Data from the 2013-2020 Center for Disease Control National Immunization Survey.

Our mission is to create a healthier community by empowering families to reach their breastfeeding goals. We provide clinical lactation consultations as well as a variety of free resources and services at our two locations in Lincoln and Omaha. MilkWorks also offers telehealth appointments and virtual classes.

BREASTFEED

NONPROFIX

### Legislative Update

MilkWorks

We would like to express out gratitude to Senator Jen Day for introducing two bills, LB1106 and LB1107, during this year's Nebraska Legislative session. These two bills will assist parents in breastfeeding by allowing for earlier access to higher quality breast pumps and allow for more visits to lactation consultants, improving outcomes for both parent and baby! Both were added to the Health & Human Services Committee package and passed in the Nebraska Legislature.

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# **Our Clinic Team**

Lactation support is a covered service with most insurance plans and Nebraska Medicaid. Appointments are available six days a week - please call to schedule.



Dr Kathy Leeper, MD, IBCLC, NABBLM-C

Dr. Leeper was one of the first breastfeeding medicine specialists in the US. She accepts referrals for parents and babies with breastfeeding problems beyond the scope of an IBCLC.

## Spasm of the Blood Vessel Tissue Damage

### What Are Vasospasms of the Nipple? (Raynaud's Phenomenon)

A spasm of blood vessels (vasospasm) in the nipple can result in nipple and/or breast pain, particularly within 30 minutes after a breastfeeding or a pumping session. It usually happens after nipple trauma and/or an infection. Vasospasms can cause repeated disruption of blood flow to the nipple. Within seconds or minutes after milk removal, the nipple may turn white, red, or purple, and a burning or stabbing pain is felt. Occasionally the lactating parent will feel a tingling sensation or itching. As the nipple returns to its normal color, a throbbing pain may result. Color change is not always visible. To reduce future nipple damage, it is recommended to see an IBCLC for assistance with the latch and/or pumping.

Raynaud's phenomenon is so severe and throbbing, it is often mistaken for *Candida albicans* infection.\*

Raynaud's phenomenon is now felt to be common, affecting up to 20% of women of childbearing age.\*

Treatment options include methods to prevent or decrease cold exposure, avoidance of vasoconstrictive drugs/nicotine that could precipitate symptoms, and [occasionally] pharmacologic measures.\*

\*Anderson, Jane E et al. "Raynaud's phenomenon of the nipple: a treatable cause of painful breastfeeding." Pediatrics vol. 113,4 (2004): e360-4. doi:10.1542/peds.113.4.e360

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