



## Optimizing Newborn Nutrition Microlesson

## Infant Feeding Assessment: Using the LATCH score



## **Background**







#### Limitations



#### Limited Research

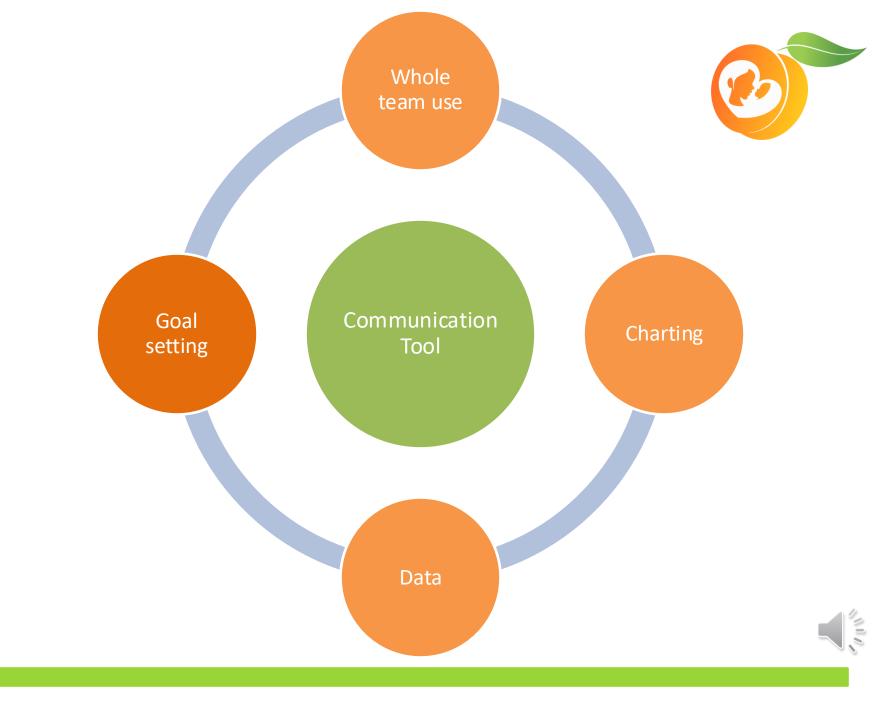
- Few studies
- Small sample size in existing research
- Poor representation → limited powers of explanation and generalization

### Variable Assessment Components

- No consensus
- Currently existing tools vary greatly
- Variable components complicates comparison validity

## Accuracy of current tools

- Author bias
- No clear assessment components or successful feeding definitions



	0	1	2
L Latch	Too sleepy or reluctant No latch achieved	Repeated attempts Hold nipple in mouth Stimulate to suck	Grasps breast Tongue down Lips flanged Rhythmic sucking
A Audible swallowing	None	A few with stimulation	Spontaneous and intermittent > 24 hours old Spontaneous and frequent < 24 hours old
T Type of nipple	Inverted	Flat	Everted (after stimulation)
C Comfort (breast/ nipple)	Engorged Cracked, bleeding, large blisters or bruises Severe discomfort	Filling Reddened/small blisters or bruises Mild/moderate discomfort	Soft Nontender
H Hold (positioning)	Full assist (staff holds infant at breast)	Minimal assist (e.g., elevate head of bed, place pillows for support) Teach one side; mother does other Staff holds and then mother takes over	No assist from staff  Mother able to position and hold infant

L in LATCH:
Infant's ability
to Latch to the
breast









A in LATCH:
Amount of
Audible
swallowing
noted





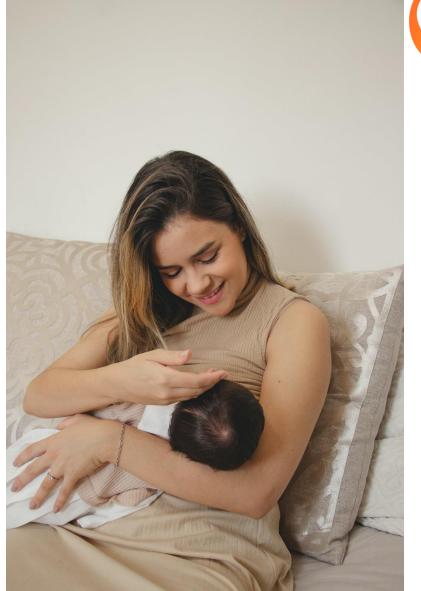


T in LATCH:
Mother's
nipple Type





# C in LATCH: Mother's Comfort





# H in LATCH: Help to Hold infant?





Photo credit: U.S. Breastfeeding Committee, Image Gallery

## Using the LATCH Tool



	0	1	2
<b>L</b> Latch	Too sleepy or reluctant No latch achieved	Repeated attempts Hold nipple in mouth Stimulate to suck	Grasps breast Tongue down Lips flanged Rhythmic sucking
A Audible swallowing	None	A few with stimulation	Spontaneous and intermittent > 24 hours old Spontaneous and frequent < 24 hours old
T Type of nipple	Inverted	Flat	Everted (after stimulation)
C Comfort (breast/ nipple)	Engorged Cracked, bleeding, large blisters or bruises Severe discomfort	Filling Reddened/small blisters or bruises Mild/moderate discomfort	Soft Nontender
H Hold (positioning)	Full assist (staff holds infant at breast)	Minimal assist (e.g., elevate head of bed, place pillows for support) Teach one side; mother does other Staff holds and then mother takes over	No assist from staff  Mother able to position and hold infant

### References



- Howe, T., Lin, K., Fu, C., Su, C., & Hsieh, C. (2008). A review of psychometric properties of feeding assessment tools used in neonates. JOGNN: Journal of Obstetric, Gynecologic, and Neonatal Nursing, 37, 338-349. doi:10.1111/j.1552-6909.2008.00240.x
- Jensen , D. , Wallace , S. , & Kelsay , P . (1994 ). LATCH: A breastfeeding charting system and documentation tool . JOGNN: Journal of Obstetric, Gynecologic, and Neonatal Nursing , 23, 27 32.
- Pados, B. F., Park, J., Estrem, H., & Awotwi, A. (2016). Assessment tools for evaluation of oral feeding in infants younger than 6 months. Advances in Neonatal Care, 16(2), 143-150. doi: 10.1097/ANC.0000000000000055

Images: <a href="https://www.pexels.com/license/">https://www.pexels.com/license/</a> and U.S. Breastfeeding Committee, Image Gallery