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Systematic review of cabbage leaves compared to gel packs for mothers with breast engorgement

Background: Breast engorgement is a condition that affects breastfeeding mothers early in the postpartum. The discomfort and tenderness as a result of the engorgement is a major contributing factor to the early cessation of breastfeeding. Many treatments for breast engorgement have been attempted and explored.

Objectives: To examine the effectiveness of cabbage leaf treatment on pain and hardness of the engorged breasts of post-partum women and its influence on the duration of breastfeeding in women with breast engorgement.

Design: Types of interventions: Cabbage leaf treatment on breast engorgement in reducing pain, hardness and increasing the duration of breastfeeding.

Types of outcomes: Primary outcomes: engorgement, severity of the distention, hardness to touch and pain associated with breast engorgement. Secondary outcome: duration of breastfeeding.

Types of studies: Quantitative studies including RCTs, quasi-randomized trials and quasi-experimental studies.

Search Strategy: Studies in English language from inception of the relevant databases to 2010 were considered for inclusion in this review. The databases searched included: CINAHL, MEDLINE, SCOPUS, EMBASE, Web of Science, Science Direct. The search for unpublished studies included: Google Scholar, Mednar, Proquest.

Methodological quality: Studies were assessed by two independent reviewers for methodological validity using standardised critical appraisal tools from the Joanna Briggs Institute.

Data Extraction: Data were extracted using the standardised data extraction tools from the Joanna Briggs Institute.

Data Synthesis: The results were presented in narrative format as the meta-analysis was not appropriate because study methods were heterogeneous.

Results: Four studies were included in this review: one RCT and two quasi-randomised studies and one quasi-experimental study. In one RCT after the first cabbage leaf application, fewer mothers were reporting breast engorgement through their second to fourth assessments as compared to the control group. On the second assessment a smaller proportion in the intervention group thought their breasts were engorged (51% vs 57%, $p = 0.68$). In one study the experimental group receiving cabbage leaf treatment improved from a pre-treatment score of 5.17 (70%) to 3.02 (20%) ($p < 0.001$). In addition, hot and cold compresses appeared to reduce scores more effectively than cold cabbage leaf ($p < 0.001$). In one study both cabbage leaf and hot and cold compresses interventions decreased numerical pain scores ($p \leq 0.001$) and thus pain in breast engorgement. In a study results showed statistically significant reduction in pain scores for both room temperature 2.0 points (37%)

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and chilled cabbage leaf 2.1 points (38%) ($p=0.0001$). There was no statistical difference in mean pre and post treatment scores of room temperature and chilled cabbage leaf ($p=0.84$). In one study pre and post treatment scores using the Bourbonnais scale showed a statistically significant reduction in pain scores: 1.8 points (30%) with cabbage leaf and 2.2 points (39%) with gel packs ($p=0.0001$). In one study it was found that 18% more mothers who received the cabbage leaf intervention were exclusively breastfeeding at six weeks ($p=0.09$). Less mothers had stopped breastfeeding prior to eight days (8.88% vs 24% $p=0.09$) and overall duration of breastfeeding was longer in the intervention group (36 vs 30 days, $p=0.04$).

Conclusion: Overall results showed that cabbage leaf treatment used on women with breast engorgement did reduce pain, the hardness of the engorged breasts and increased the duration of breast feeding. The current

available evidence suggests that cabbage leaf treatment helps reduce pain in breast engorgement and lengthens breastfeeding duration, although some studies have also reported that cabbage leaf treatment is not effective.

Implications for practice: Cabbage leaf may be useful in the treatment of breast engorgement. The chilled cabbage leaf may be used for breast engorgement in breastfeeding women but there is insufficient evidence to suggest the generalized use of cabbage leaf in protocols for the treatment of breast engorgement.

Implications for research: Researchers should aim to achieve more homogeneity across the studies by using similar tools and instruments (preferably validated) to compare the effectiveness of cabbage leaf treatment; measuring similar outcomes (i.e pain scores, breast engorgement scores, duration of breastfeeding).

Biography

Wong Boh Boi joined Thomson Medical Centre (TMC) in 1999. She headed the nursing education and ParentCraft department and put in place a structured Childbirth Education (CBE) programme for the hospital, which she still teaches till today. She established the Thomson ParentCraft Centre in 1999 to educate and build confidence of young parents in Singapore. Renowned for skill in settling a crying baby, many know Dr Wong as the "Baby Whisperer". As an experienced Lactation Consultant, Dr Wong has educated many young parents on how to provide better care for their newborn child. She pioneered the popular baby and children massage as a tool for parents to soothe agitated babies. She also conceptualised the "Thomson Dad's Enrichment Programme" to equip fathers with the basic necessary information to support their wives during pregnancy, and through to childbirth.

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