

The Science of Secretory Activation: Implications for Breastfeeding Medicine Specialists



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Disclosures

Active Research and Training Awards

- NIH: *Reducing Disparity in the Receipt of Mothers' Own Milk in VLBW Infants: An Economic Intervention to Improve Adherence to Sustained Breast Pump Use: ReDiMOM Trial* (2020-2024; Patel and Johnson, PIs)
- NIH: *Early Childhood Neurodevelopmental, Economic and Nutritional Outcomes Among Former VLBW Infants from the ReDiMOM Trial* (2022-2026; Johnson and Patel, PIs)
- PCORI: *Clinically Integrated Breastfeeding Peer Counseling to Promote Breastfeeding Equity* (2021-2025; Borders, PI)
- NIH: *Effect of Gestational Age at Delivery on Lactation Outcomes in Pump-Dependent Mothers of Critically Ill Infants* (K23; Bendixen, 2023-2026)
- NIH: *Reducing the Disparity in the Receipt of Mothers' Own Milk in Black VLBW Infants: Understanding the Perceptions of Mothers and Maternal Matriarchs* (ReDiMOM Diversity Supplement; 2022-2024; DeVane-Johnson)
- AHRQ: *Optimizing Utilization of Lay Health Workers to Address Maternal and Child Health Disparities: Comprehensive Evaluation of a Clinically Integrated Breastfeeding Peer Counselor Program* (K01; Keenan-Devlin, 2022-2026).

Industry Research Funding and Consultation

- Medela AG, Baar, Switzerland

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The first month postpartum is the time of greatest risk for early, unplanned cessation of lactation



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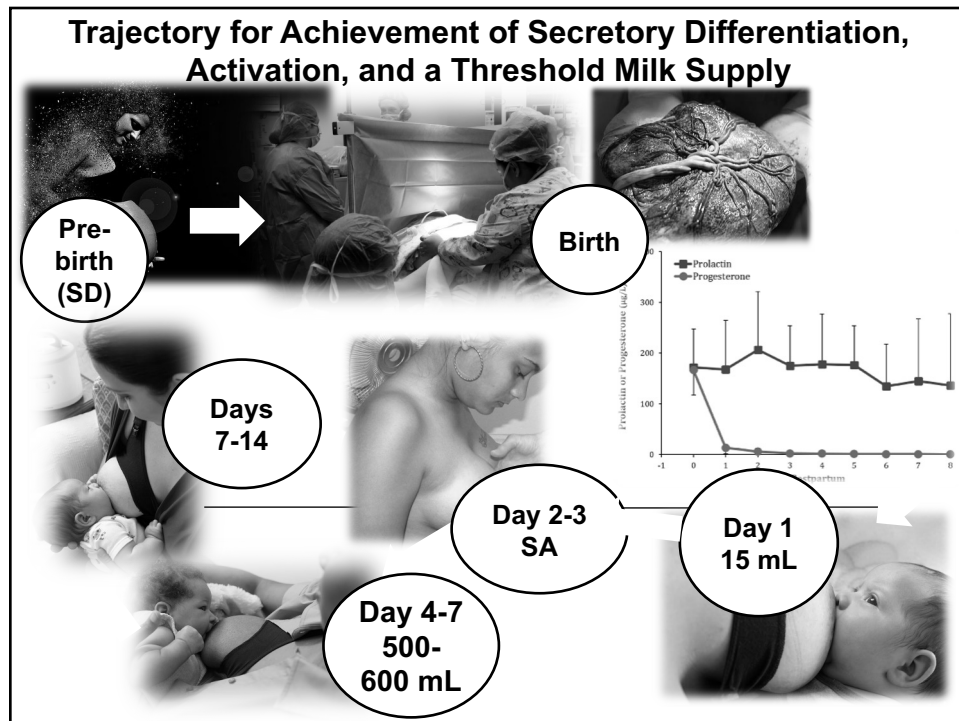
The first month postpartum is the time of greatest risk for early, unplanned cessation of lactation

- Practitioners recommend “extra support” but without specific, evidence-based interventions to characterize effective “support” and evaluate outcomes
- Most interventions have been behavioral and/or motivational (additional education, visits with lactation care providers, use of peer counseling, economic incentives)
- Lost in all of this is leveraging the complex biology of the first 2-4 weeks postpartum to identify and mitigate predictable and unpredictable lactation problems in “healthy” and “at risk” dyads

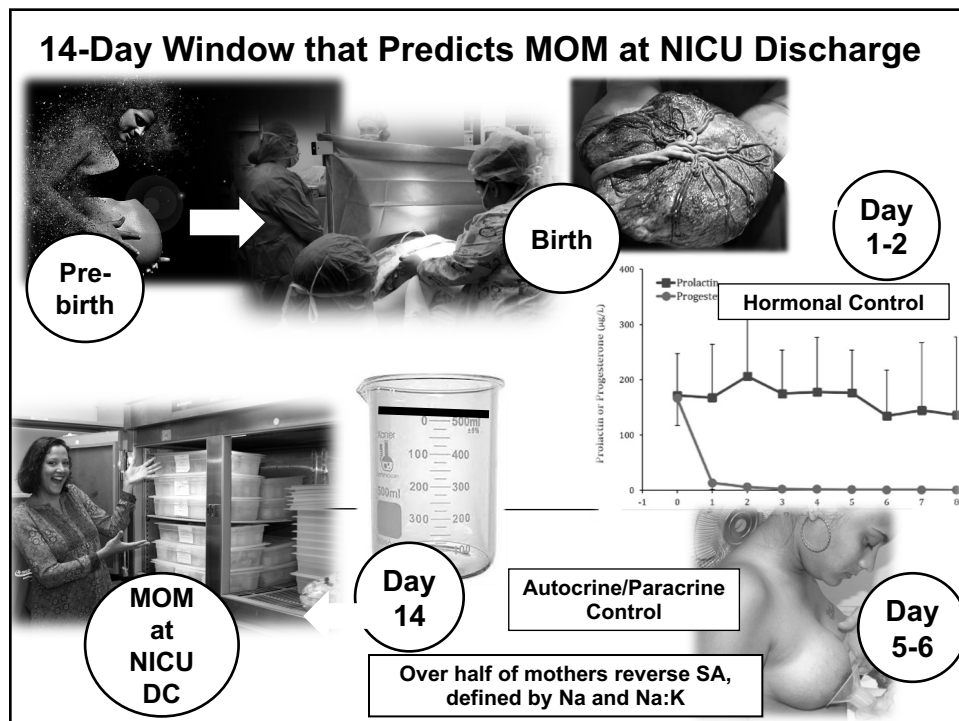
Meier PP, Parker LA (2025). Overview of Special Issue, **Breastfeeding Medicine**,



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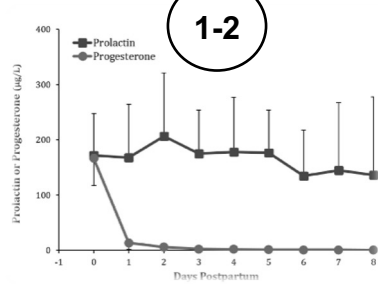


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From Birth to SA Achievement



- Affected by adiposity (Fat tissue harbors progesterone)
- Retained placental fragments
- Is the mechanism for concerns about early hormonal contraception (EHC)
- Affected by pumping/suckling frequency and effectiveness (optimal latch, LPT infant, incorrect suction pressures, breast shield sizes)
- Affected by maternal metabolic disorders (obesity, hypertension, diabetes)
- May be affected by other co-morbidities attributable to disordered secretory differentiation

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Maternal Co-Morbidities Affect Pumping, Pumped MOM Volume, SA and CTV Achievements in Breast Pump-Dependent Mothers of Premature Infants



Integrating Biological, Behavioral, and Economic Factors in the Practice and Study of Early, Unplanned Lactation Cessation

Larelle H. Bookhart¹, Stephanie Devane-Johnson², Anita Esquerra-Zwiers³, Yarden Golan Maor⁴, Jessica Gomez⁵, Katie T. Kivlighan⁶, Clarisa Medina Pooliniz⁷, Rachel Walker⁸, Tricia J. Johnson⁹, and Leslie A. Parker¹⁰


Maternal Complications of Pregnancy and Achievement of Secretory Activation and Coming to Volume in Breast Pump-Dependent Mothers of Preterm Infants

Rebecca Hoban^{1,2}, Qinglin Pei³, Clarisa Medina Pooliniz⁴, Yarden Golan Maor⁵, Rachel E. Walker⁶, Paula P. Meier^{4,7}, Angela Monk⁸, and Leslie A. Parker⁹



Are these data generalizable to otherwise healthy dyads, especially with high maternal BMI?

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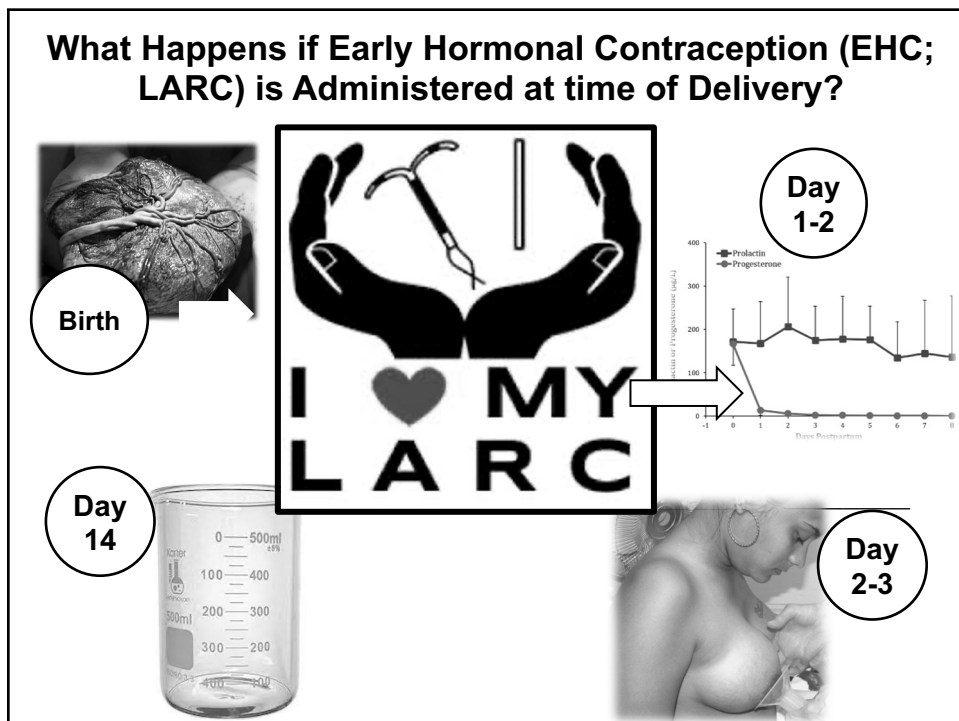
When Two Public Health Priorities Collide: Early Hormonal Contraception and Lactation Initiation in Mothers of Very Preterm Infants

Rebecca Hoban, MD MPH

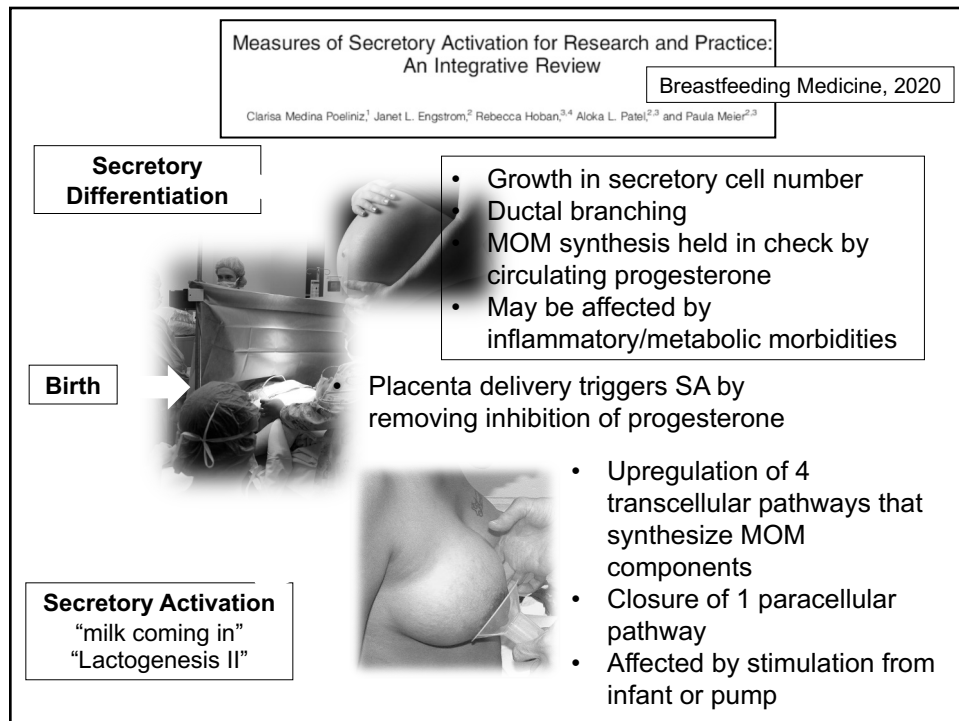
Assistant Professor of Pediatrics
Rush Children's Hospital, Section of Neonatology

- Study Conceptualized in 2015
- Use of MOM Biomarkers of
SA and Pumped MOM Volume
as Outcome Variables

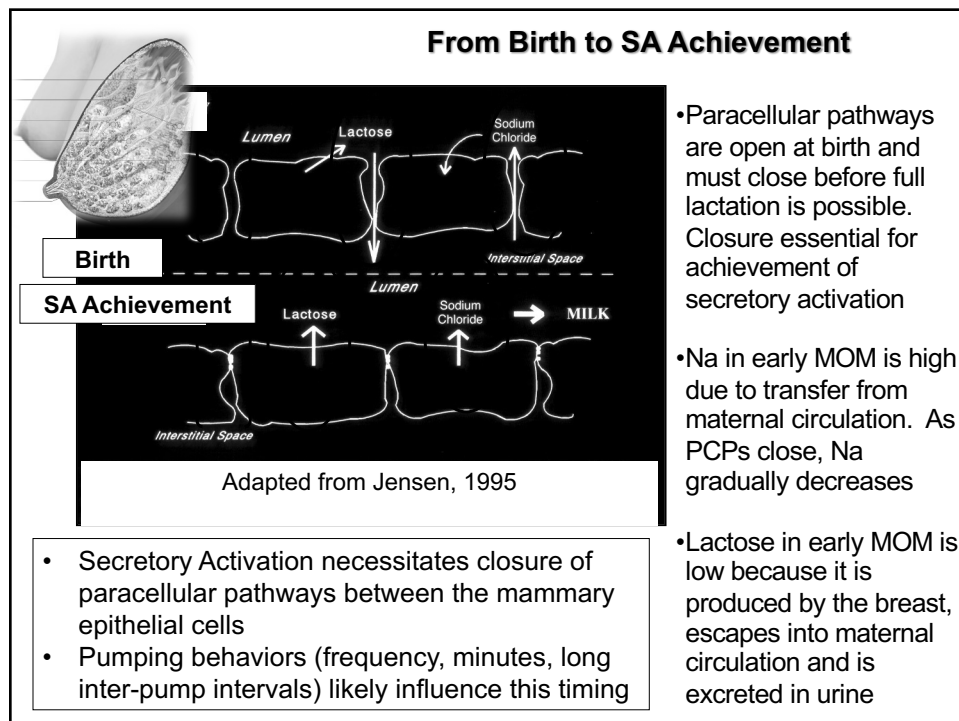
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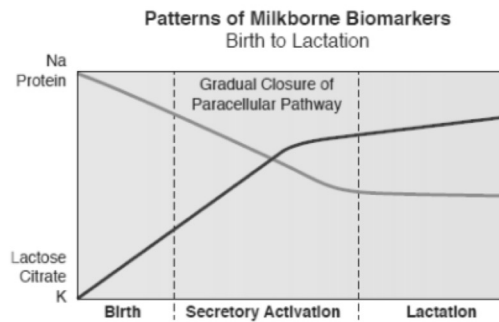
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MOM Biomarkers of Secretory Activation (SA)

- Reflect the upregulation of 4 transcellular pathways and closure of a single paracellular pathway in the mammary gland



- WNL for all 4 biomarkers (Na, citrate, protein, lactose, Na:K ratio)
 - Dose-response between number of biomarkers WNL and MOM volume (Hoban, 2020)
- Na and Na:K ratio only
 - Na ≤ 12 , Na:K < 0.6
 - Na ≤ 16 , Na:K < 0.8
 - Na ≤ 20 , Na:K < 1.0

Measures of Secretory Activation for Research and Practice:
An Integrative Review

Breastfeeding Medicine, 2020

Clarisa Medina-Poeliniz,¹ Janet L. Engstrom,² Rebecca Hoban,^{3,4} Aloka L. Patel,^{2,3} and Paula Meier^{2,3}

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Measures of Secretory Activation for Research and Practice:
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Clarisa Medina-Poeliniz,¹ Janet L. Engstrom,² Rebecca Hoban,^{3,4} Aloka L. Patel,^{2,3} and Paula Meier^{2,3}

Breastfeeding Medicine, 2020

Reviews Open Access

Point-of-Care Techniques to Identify Risks for Early, Unplanned Lactation Cessation Among Term Mother/Infant Dyads: An Integrative Review

Larelle H. Bookhart,¹ Stephanie Devane-Johnson,² Katie T. Kivlighan,² Clarisa Medina-Poeliniz,¹ Leslie A. Parker,² and Anita L. Esquerro-Zwiers,²

Breastfeeding Medicine, 2025



- 1 mL MOM sample
- Measure daily change for Na or for Na:K ratio
- Easily done as a bedside POC test

Milk Biomarkers of Secretory Activation in Breast Pump-Dependent Mothers of Preterm Infants:
An Integrative Review

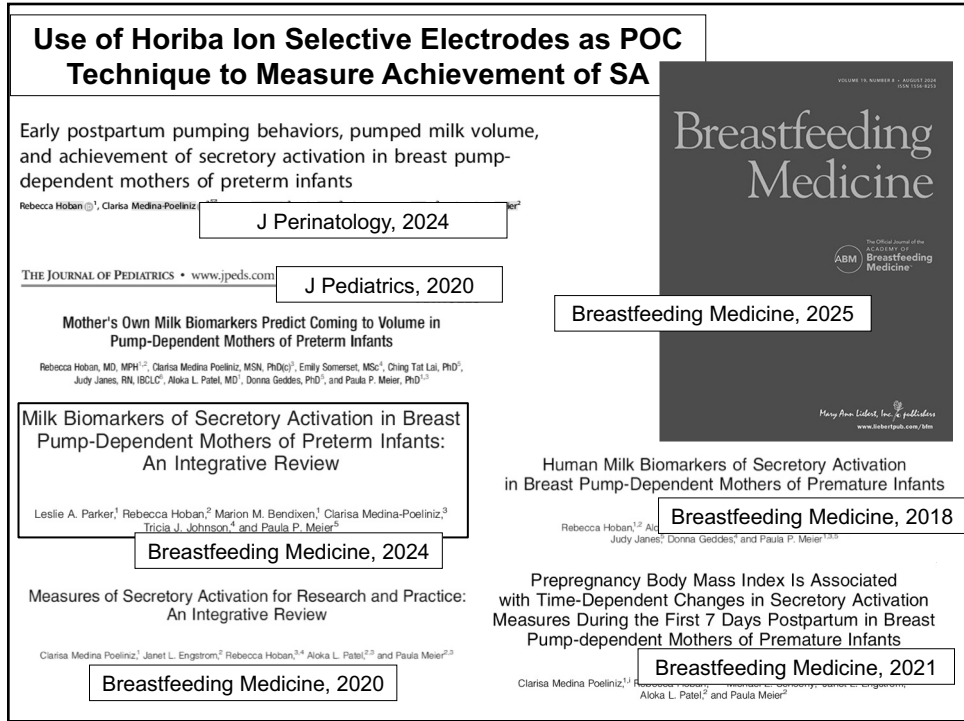
Leslie A. Parker,¹ Rebecca Hoban,² Marion M. Bendixen,¹ Clarisa Medina-Poeliniz,³ Tricia L. Johnson,⁴ and Paula P. Meier⁵

Breastfeeding Medicine, 2024

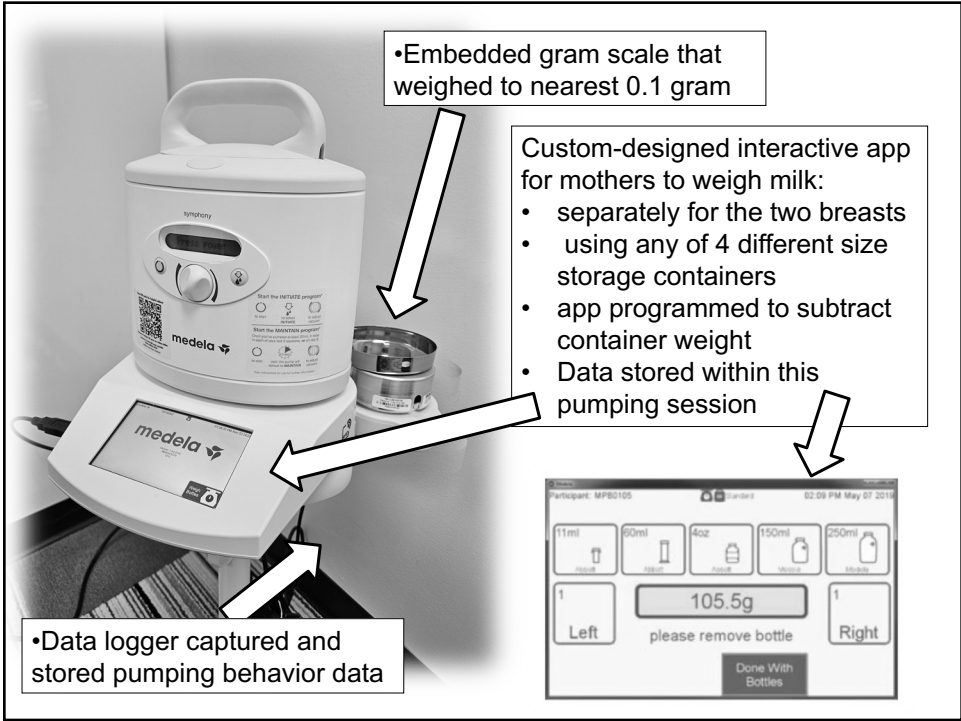


Point of Care Measures to Identify/Manage at Risk Mothers

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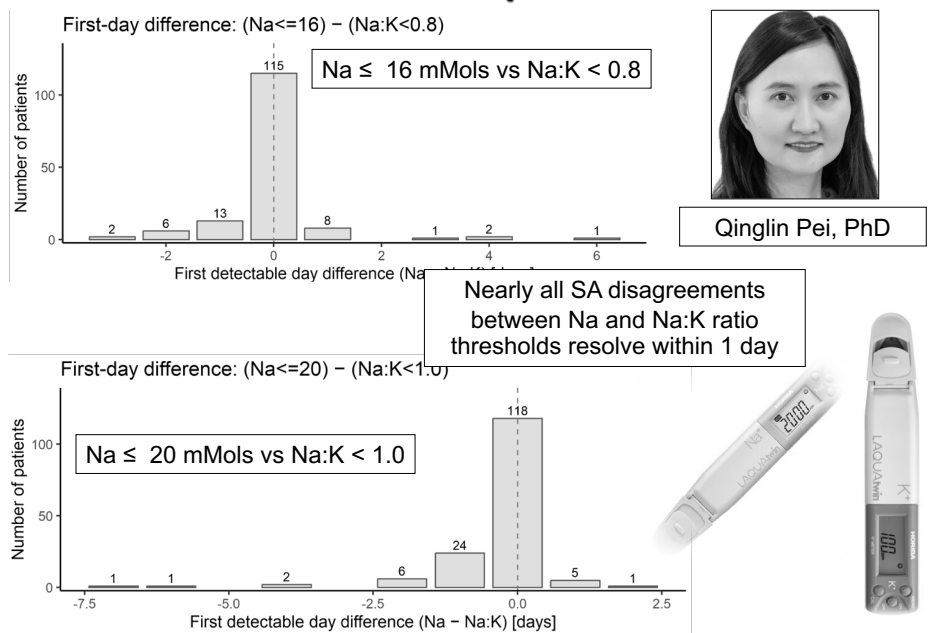
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What is the best measure of paracellular pathway permeability in the mammary gland?

- Lactose and citrate are the most relevant components, signaling upregulation of transcellular pathways and closure of paracellular pathway
 - 24-hour urinary lactose measures used as SA identification in older studies
 - Citrate, the “harbinger of lactogenesis”, is not affected by paracellular pathway patency
- Na has been used for decades and is the oldest measure in both humans and animals
 - Measures are unaffected by maternal diet (Ereman, 1987) nor which breast sampled, or whether sampled pre- or post-feed (*during established lactation*)* Koo, 1982). Which breast and inter-feed/pump interval may be important for SA
- Na:K ratio first credited to Filtreau (1999) to detect subclinical mastitis in Bangladeshi women
 - Proposed standardizing the Na only measure by K to control for measurement variation and changes in biomarkers over longer lactation (goal to detect mastitis)
- Some studies have used both Na and Na:K ratio or only Na:K for early lactation outcomes, based on Filtreau’s rationale
 - LeMay (2014), Murase (2017), Wang (2025), Hoban (2018, 2020, 2024), Esquerre-Zwiers (2022)

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Is the Na:K ratio needed in practice and research?



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What about mastitis and return of menses?

Sodium and Potassium Concentrations and Somatic Cell Count of Human Milk Produced in the First Six Weeks Postpartum and Their Suitability as Biomarkers of Clinical and Subclinical Mastitis

Nutrients, 2022

Ryan M. Pace ^{1,*}, Christina D. W. Pace ¹, Bethaney D. Fehrenkamp ^{1,2}, William J. Price ³, Meghan Lewis ⁴, Janet E. Williams ⁴, Mark A. McGuire ⁴ and Michelle K. McGuire ^{1,*}

Breastfeeding and Reproduction in Women in Western Australia — A Review

Birth and Family Journal, 1981

P. E. Hartmann
J. K. Kulski
S. Rattigan
C. G. Prosser
L. Saint

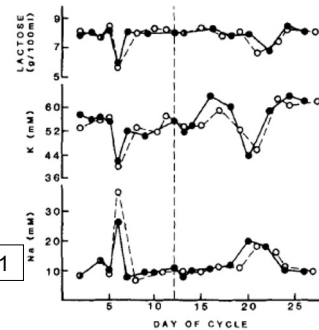


Figure 7. Changes in the concentration of lactose, potassium and sodium in milk from the right (●) and left (○) breast of a woman throughout the menstrual cycle. Ovulation is indicated by the dashed line.

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Summary and Next Steps

- Na alone is an accurate biomarker of paracellular pathway patency to detect SA
 - Na:K ratio is not needed for clinical practice
 - If Na:K ratio is used for research, threshold values need to be altered for the K Horiba ion electrode
- Na alone does NOT truly measure SA achievement
 - It is the best default, and likely detects most problems
 - Achievement per se may be having all biomarkers WNL (lactose, citrate, sodium, total protein, potassium)
 - This scenario may characterize problems with SD that present as problems with SA
- Current Na thresholds for SA are likely just placeholders until we can model trajectories between various Na thresholds, postpartum day and pumped MOM volume
 - In other words, trends versus absolute values (similar to managing bilirubin post-birth) will likely be the future algorithm for interventions
- Case studies from your practices, especially if in collaboration with our research team, will be important to this work.



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