


Speech therapy during breastfeeding in maternity wards

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ABSTRACT

Introduction: Breastfeeding is the most appropriate means of feeding to provide the growth and development of the child's structures and functions, such as breathing, sucking, swallowing, chewing and speaking. Currently, there are several campaigns to encourage exclusive breastfeeding, which seek to support mothers throughout this process. However, the numbers still point to many children who suffer early weaning. This study aims to describe the speech-language pathology practice in maternity hospitals and how speech-language pathology can be more valued in the context of breastfeeding. **Methodology:** Through an integrative review of the literature, this study analyzed the scientific production on speech-language pathology performance during breastfeeding in maternity hospitals, from articles in Portuguese, published between 2018 and 2023. **Results and Discussion:** Of the 9 articles included in this research, the following were unanimously addressed: breastfeeding and speech-language pathology performance. In addition, factors that influence breastfeeding were also presented in all studies. Studies highlight how much puerperal women and neonates tend to gain from the perspective of a qualified professional, in the face of issues of orofacial disorders and human communication, making approaches more specialized and humanized. **Conclusion:** The present study described the speech-language pathology practice in maternity hospitals, with professionals being able to disseminate information about the benefits of breastfeeding, promote a greater bond between the mother-newborn dyad, evaluate breastfeeding and sucking patterns and avoid early weaning. Regarding the valorization of the work of speech-language pathologists in the context of breastfeeding, it was observed the lack of clear and relevant exposure of speech-language pathology performance, strengthening and reinforcing the need for actions that promote an individual environment and moment to address issues about breastfeeding and how the speech-language pathologist should be inserted in this scenario.

Keywords: Breastfeeding, Speech therapy, Maternity.

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INTRODUCTION

The moment of breastfeeding is the coming together of several employees and agents involved in the guarantee of life. Acting in a synchronous and complex way, it requires an organization among all participants such as hypothalamus, pituitary, breast, milk, in addition to the mother-baby dyad; making it difficult to understand and study in its entirety (Carvalho and Gomes, 2019).

Studies state that breastfeeding (BF) can reduce mortality rates by up to 13% up to five years of age, in addition to avoiding postpartum comorbidities, both for the mother and the newborn (NB), such as respiratory diseases, allergies, diabetes, hypertension and obesity for children and breast cancer, ovarian cancer, endometriosis, postpartum depression and hemorrhages for the mother. Breastfeeding is also important for the development of the muscles of the face, stomatognathic functions such as sucking, breathing, swallowing, chewing and speaking, and craniofacial alignment, through the proper movements of the orofacial muscles. Above all, it promotes the bond between mother and newborn, cognitive and emotional development. During feedings, the NB receives several stimuli that will help him develop his senses, such as heat exchange, smells, sounds, and looks, establishing his first affective bonds (Ministry of Health, 2022). Evidence states that the best form of feeding is through exclusive breastfeeding (EBF) until the child is six months old and should be maintained until the child is two years of age or older, in a complementary way (Oliveira et al., 2019).

Hospital discharge from maternity wards depends, among other factors, on the ability to function safe feeding. Techniques to assess the readiness of newborns and infants were developed and improved through the study of the anatomical and physiology of sucking and swallowing. Sucking, lip position, nipple apprehension are some aspects considered during breastfeeding assessment (Levy and Almeida, 2018). Sucking and swallowing reflexes are present from the 17th week of gestation, and coordination between sucking, swallowing and breathing can be observed from the 32nd - 34th week of gestation (Caetano et al., 2003)

Breathing and swallowing follow a rhythmic sequence during nutritive sucking, so that exhalation and inhalation are interposed between swallows. The labia provide the seal for nipple pickup. The tongue participates in the creation of intraoral negative pressure, in addition to lengthening the beak, giving it shape and stabilizing it. The mandible provides a stable base for the movement of the other structures associated with suction, contributing to intraoral negative pressure when moving downward and widening the oral cavity. In addition, it also performs compression of the lactiferous ducts. The cheeks ensure a lateral boundary, aiming at the centralization of breast milk and act together with the jaw providing stability. The palate compresses and keeps the beak in a stable position and prevents escape to the rhinopharynx (Zimmermann, 2023).

Preterm newborns who are in intensive care units (ICU) tend to have physiological and neurological immaturity that can interfere with motor, respiratory, muscular, and oral reflex skills



(Lima et al., 2015). Speech-language pathology enables professionals to work in neonatal Intensive Care Units (ICU), providing them with knowledge about the anatomical physiology of the stomatognathic system, in order to identify changes in the sensory-motor-orofacial system, especially in the coordination of sucking, swallowing, and breathing (SxDxR) (Amorim and Lira, 2021).

In order to avoid early weaning, it is necessary to reinforce the importance of speech-language pathology within the multidisciplinary teams in maternity hospitals. The role of the speech-language pathologist is to assess, guide, and encourage EBF, aiming at strengthening the phonoarticulatory organs and the development of stomatognathic functions (Oliveira et al., 2019). The speech-language pathologist acts in several ways within the maternity hospitals, both in the NICU, with the necessary procedures, and as the professional trained to develop the role of educator, guiding and aiming to stimulate the continuity of lactation, from the prenatal period, during childbirth and in the puerperium, and may interfere with the swallowing function in cases of neonates with difficulties.

The literature states that the main causes of early weaning are the lack of experience and difficulty during the act of breastfeeding, leading to incorrect latching on from the first latch and, consequently, nipple fissures and low weight gain in the newborn. In addition, studies report that most mothers are unaware of Speech Therapy as an active area of maternal and child health. Speech-language pathology can be performed from the prenatal period, through guidance that can help prevent future problems, such as poor posture and inadequate grip, or orofacial myofunctional changes. Thus, the importance of a careful evaluation of breastfeeding and sucking pattern is evidenced, in addition to all the necessary guidelines, which can prevent early weaning and the suffering of mother and baby (Leite et al., 2009).

Several breastfeeding promotion practices have been carried out, such as the Baby-Friendly Hospital Initiative (BFHI), which has the "Ten Steps to Breastfeeding Success", in order to promote practices and guide during the prenatal, perinatal and postnatal periods. In addition to being in accordance with the Brazilian Standard for the Commercialization of Foods for Infants and Early Childhood Children, Nipples, Pacifiers and Bottles (NBCAL) (Medeiros, et al., 2015). In addition, the Network of Human Milk Banks (rBLH-BR) is an action to promote, protect and support breastfeeding, which encompasses actions for the collection, processing and distribution of milk for preterm or low birth weight newborns. In addition to guidance and support for mothers. Brazil has the largest network of human milk banks in the world (Ministry of Health, 2022).

In view of the above, it is evident that there is a need to deepen studies and disseminate information to mothers, pregnant women and other professionals about speech therapy during breastfeeding in maternity hospitals, in order to avoid early weaning and family stress.

This study aims to describe the speech-language pathology practice in maternity hospitals and how speech-language pathology can be more valued in the context of breastfeeding.



METHODOLOGY

This integrative literature review (Pereira et al., 2018) was guided by the following research question: What is the speech-language pathology performance in maternity hospitals and how can speech-language pathology work be more valued in the context of breastfeeding by the multidisciplinary team? For this study, the following databases were used: *CAPEJournals*, *PUBMED* (*National Library of Medicine*), *Virtual Health Library (VHL)* and *SCIELO* (*Scientific Electronic Library Online*).

To carry out the search in the aforementioned databases, the *descriptors* (**Breastfeeding**), *AND* (**Maternities**), *AND* (**Speech-Language Pathology and Audiology**) of articles in Portuguese and ("Breast Feeding", "Hospitals, Maternity", "Speech, Language and Hearing Sciences") of articles in English were used as the first strategy. For the second search strategy, the *following descriptors were used*: (**Breastfeeding**), *AND* (**Speech-Language Pathology and Audiology**) of articles in Portuguese and ("Breast Feeding", "Speech, Language and Hearing Sciences") of articles in English.

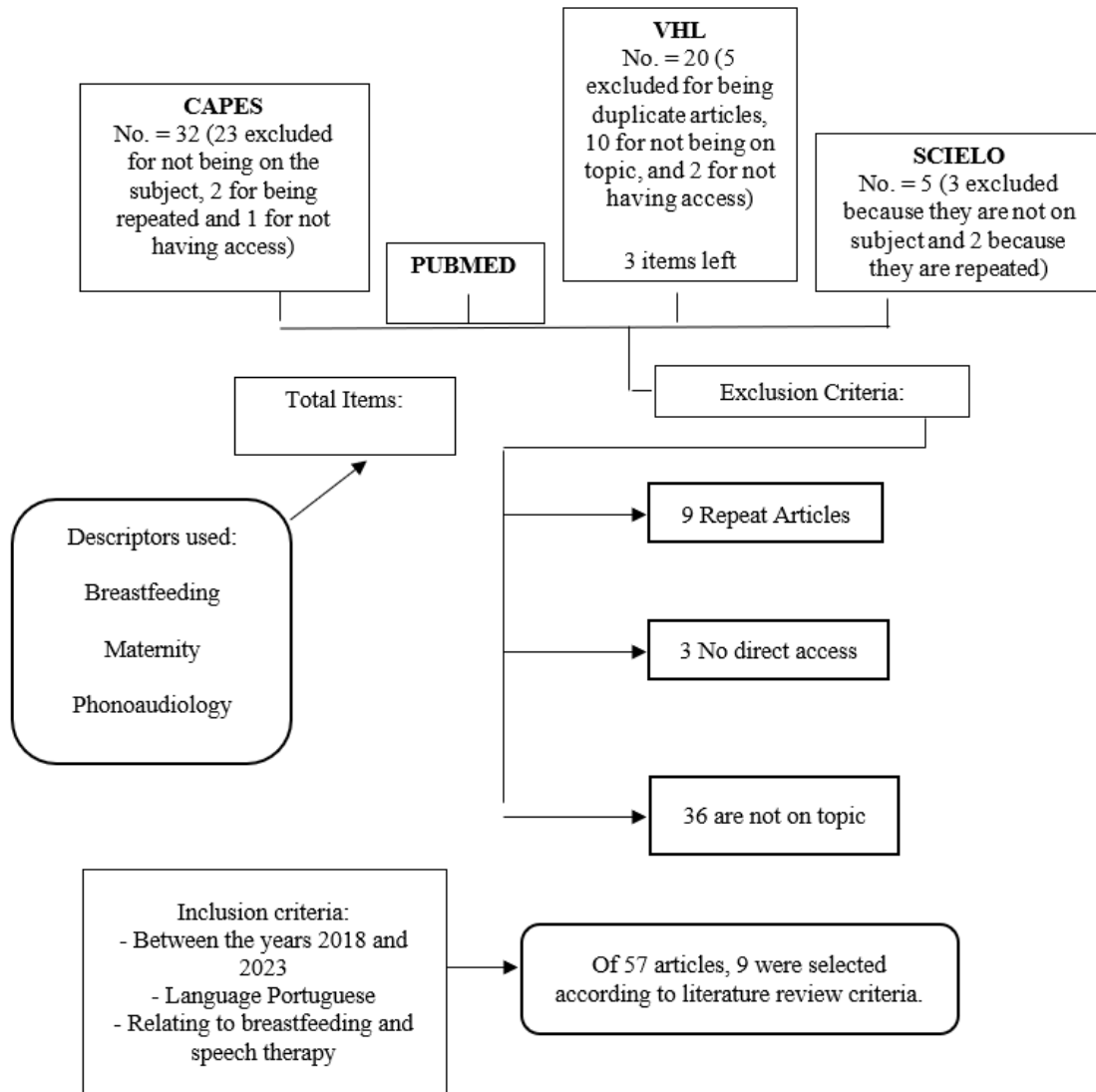
For the selection of the studies used in this review, in addition to the Portuguese language, the inclusion criterion was adopted: the delimitation of the period of publication of the works, from 2018 to 2023; in addition to the theme of the studies related to breastfeeding and the functions of a speech therapist within maternity hospitals, as outlined in the objective of this review.

Repeated articles, without the possibility of direct access, sources with broken links, as well as works with no direct relation to the theme, retrieved in the search only due to the incidence of the term breastfeeding, in only once in the text, or superficially, for example, were manually excluded.

The literature search generated a total of 57 articles initially selected from the scientific databases previously cited in methods, aligned with the approach of the proposed theme. After the omission of duplicates, 09 studies were excluded. Title and abstract were screened: 36 studies were excluded because they were not directly related to the theme and 03 studies were excluded because they did not have direct access. Finally, 09 studies met the inclusion criteria and were included in the qualitative and quantitative synthesis of the proposed review.

Figure 1 shows the flowchart of information on the processes carried out in the literature review.

Figure 1 - Flowchart of information of the processes carried out in the literature review



Source: Author's own (2023)

RESULTS AND DISCUSSION

Of the 9 articles included in this research, the following were unanimously addressed: breastfeeding and speech-language pathology practice. In addition, factors that influence breastfeeding were also presented in all studies.

Table 1 shows how speech-language pathology performance occurred in the articles found in the literature review.

Table 1 – Speech-Language Pathology and Audiology

AUTHORS AND YEAR	OBJECTIVE	SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY	CONCLUSION
SANTOS, J; ALVES, Y; BARRETO, I; FUJINAGA, C; MEDEIROS, A. 2020.	OBJECTIVE: To investigate the relationship between maternal aspects (age, education, type of delivery and previous experiences with breastfeeding) and the performance of the mother-newborn dyad (NB) in breastfeeding in a public maternity hospital.	<ul style="list-style-type: none"> • Evaluation of feeding; • Identification of factors that prevent BF. 	Maternal age and previous experiences with breastfeeding are factors that influenced breastfeeding performance in this population. The evaluation of the performance of the dyad in breastfeeding allows the identification of difficulties, which can contribute to the design of conducts by health professionals, considering the singularities of each dyad.
SANTOS, K; NASCIMENTO, H; SÁ, T; BARRETO, Í; MEDEIROS, A. 2020	To verify the knowledge of mothers about breastfeeding and speech-language pathology aspects involved in breastfeeding (language, orofacial motor skills and hearing).	<ul style="list-style-type: none"> • Evaluation of feeding; • Orientation of puerperal women. 	We conclude that not all parturients demonstrated full knowledge of the contents addressed, although some aspects of speech therapy are well recognized.
FROIS, C. DE A.; MANGILLI, L. D. 2021	To present a clinical protocol and a system for measuring indicators that assist in monitoring the quality of speech-language pathology care for breastfeeding in rooming-in.	Development of an evaluation protocol; <ul style="list-style-type: none"> • Orientation of puerperal women in the rooming-in. 	The use of standardized methods may allow better care for the speech-language pathology health conditions of the mother-baby binomial, as well as better training of speech-language pathologists. Further studies should be carried out in order to verify the effectiveness of PASMI in relation to the population involved.
MEDEIROS, A; NASCIMENTO, H; SANTOS M. 2018	To analyze the content and appearance of the Speech-Language Pathology and Audiology Follow-up Protocol – Breastfeeding and to develop an instructional guide for the instrument.	Development of an evaluation protocol; <ul style="list-style-type: none"> • Dyad accompaniment. 	The analysis of the content and appearance of the protocol, as well as the elaboration of its instructional guide, intend to enable its use in a consistent and systematic way in the speech-language pathology field related to breastfeeding, addressing both the recording of the evaluation and the monitoring of the mother/newborn dyad in the breastfeeding situation. It is important to carry out the next steps of protocol validation.
SANTO, F; COSTA, C; CONTO, J; BAGAROLLO, M; CZLUSNIAK, G. 2020	To investigate the mothers' knowledge about breastfeeding, deleterious oral habits and other methods to offer the diet to the baby.	<ul style="list-style-type: none"> • Orientation of puerperal women on the development of deleterious habits. 	There is a great deal of adherence to exclusive breastfeeding, but there is still a portion that does not perform it this way. Mothers have knowledge about pacifiers, bottles, breastfeeding and other forms of breastfeeding, but information about the Stomatognathic System is scarce. It was found that there was not much intervention of the speech-language pathologist with this population. It is noteworthy that there is a greater number of nurses compared to the number of speech therapists.

<p>MEDEIROS, A; RAMOS, B; BOMFIM, D; ALVELOS, C; SILVA, T; BARRETO, I; SANTOS, F; GURGEL, R. 2018</p>	<p>OBJECTIVE: To verify the time spent in the transition from gavage feeding to exclusive oral feeding, in the probe-chest technique, comparing low birth weight newborns, considering their clinical/medical complications, submitted to the exclusive breast with those who, in addition to the breast, received complement by cup/bottle</p>	<p>Enabling a safe food transition;</p> <ul style="list-style-type: none"> • Evaluation and follow-up of feeding; • Orientation of puerperal women. 	<p>NBs without important clinical complications had a shorter chance of discharge. NBs with clinical complications, who transitioned from gavage exclusively to the breast, had a shorter transition time than those who used cup/bottle supplementation. The feeding transition through the probe-chest technique is important to be recommended in the speech-language pathology practice in Neonatology.</p>
<p>FEITOSA, A; SILVA, M. 2022</p>	<p>To report the possibilities of speech-language pathology in a human milk bank.</p>	<p>Identify orofacial alterations;</p> <ul style="list-style-type: none"> • Promote improvement in the BF standard; <p>Collaborate during the interview for milk donation;</p> <ul style="list-style-type: none"> • To act in the technical and practical scope of BLH. 	<p>It was possible to identify, through experience, the role of the speech-language pathologist in the human milk bank, as well as to understand the need for their insertion in the team of this sector in the hospital environment.</p>
<p>MUNIZ, L; PEIXOTO, M. 2021</p>	<p>To describe the strategies used in a Basic Health Unit during the experience of the Multiprofessional Residency in Family Health to encourage and support breastfeeding.</p>	<ul style="list-style-type: none"> • Breastfeeding consultations; • Tongue test. 	<p>The strategies were implemented with acceptance by the population and enabled the prevention, diagnosis and rehabilitation of alterations in the breastfeeding process.</p>
<p>MADRUGA, T; MILLIONS, F; FURLAN, R; FRICHE, A; MOTTA, A. 2020</p>	<p>OBJECTIVE: To characterize the guidance on breastfeeding received by pregnant and postpartum women in the city of Belo Horizonte, and to investigate factors that influence exclusive breastfeeding, pacifier and bottle feeding.</p>	<ul style="list-style-type: none"> • Orientation of puerperal women. 	<p>There is a lack of guidance in the late postnatal period and the need to review orientation strategies since educational practices did not influence exclusive breastfeeding and the use of bottles and pacifiers.</p>

Source: The authors (2023)

J. C. Santos et al. (2020) highlights that even though breastfeeding has instinctive characteristics, it should be seen as a process that requires specific learning and guidance. The study states that several maternal factors, such as type of delivery, age, education and previous experiences with breastfeeding, influence breastfeeding performance. Advancing age and the experiences previously lived by the mother contribute to a greater mastery over aspects of the child's development, but it can also contribute to the repetition of some mistakes. Young mothers tend to wean early, which may be due to aesthetic factors, return to studies or work. The difficulties can also be related to the



anatomical characteristics of the breast and nipple or even to family members who discourage lactation. In addition, the mothers' lack of knowledge becomes an obstacle in the breastfeeding process.

The dissemination of knowledge to the population and support for pregnant and breastfeeding women is of paramount importance for the health education strategy. Access to information on breastfeeding and speech-language pathology health should be included in public policies for the dissemination and recognition of the profession. J. C. Santos et al. (2020) states that the literature is quite restricted on the interaction between speech therapy and breastfeeding in the immediate postnatal period, even in the hospital environment. Some group actions are used as tools that enable the dissemination of information about the benefits of breastfeeding in the prenatal, during and postnatal periods.

The social reality is directly linked to the lack of information about speech-language pathology during breastfeeding. Studies state that most parents associate speech therapy with difficulties related only to speech and hearing. The lack of mastery in relation to speech-language pathology actions points to a need for greater dissemination of the subject, through specific campaigns in the area of speech-language pathology and breastfeeding, public policies that take this knowledge to the population, in order to implement health education and ensure the success of breastfeeding (J. C. Santos et al., 2020).

In agreement with J. C. Santos et al. (2020), Medeiros et al. (2018a) state that the schooling and social reality of the puerperal woman and her support network are considered extremely important to understand the sociodemographic context in which the dyad is inserted, in order to adapt the language used during the intervention. The author points out that the higher level of maternal education is pointed out as a good indicator of success during exclusive breastfeeding, because mothers with low education tend to introduce foods in an erroneous way, resulting in early weaning.

The study rectified the need for speech therapists to work in maternity hospitals. Promoting the well-being of the dyad and the effectiveness of breastfeeding, providing information to breastfeeding women, such as the impact of sucking on orofacial development, in addition to stimulating language, hearing, and the bond between mother and baby (Medeiros et al., 2018a).

In order to record and monitor the binomial during their hospital stay, speech-language pathology follow-up protocols are developed. In which they include observations of the mother, newborn and the progress of breastfeeding (Medeiros et al., 2018a).

According to Frois and Mangili (2021), the use of these clinical protocols is part of the need for standardization of care actions, facilitating the team's work. Its application will allow the promotion, maintenance and recovery of the health of the mother-baby binomial. Being the speech-language pathologist, the professional trained to be inserted in the rooming-in, guiding the mothers about the EBF and the speech-language pathology aspects. In addition, it is hoped that with the speech-



language pathology work, the duo will be able to receive an early discharge and reduce hospital expenses. It is the hospital's responsibility to train professionals in the face of such protocols.

K. C. Santos et al. (2020) mentioned the importance of implementing public policies that encourage EBF, such as: BFHI, Stork Network, Kangaroo Method, Breastfeeding Friendly Basic Unit, Alimenta Brasil Network and National Strategy for the Promotion of Breastfeeding and Complementary Feeding. They have the role of training health professionals to work in the promotion of breastfeeding.

The impacts of breastfeeding on the development of deleterious habits and how mothers received the necessary instructions on the subject were observed by Dal Santo et al. (2020). The author stated that children who were exclusively breastfed for more than 12 months tended not to develop deleterious habits such as the use of pacifiers.

However, he noted that most of the mothers who reported having knowledge about the matter reported that they had acquired it through neighbors and relatives. In addition, none of the mothers claimed to know the impacts of breastfeeding on oral motor development and stomatognathic functions. Regarding the mothers who confirmed having received guidance within the hospitals, most of them reported being informed by nurses, doctors, and nutritionists (Dal Santo et al., 2020).

Madruga et al. (2020) observed that the largest number of orientations regarding breastfeeding were carried out by the gynecologist in the prenatal period, by the nurse in the postnatal period, and by the pediatrician in the late postnatal period. In addition, she pointed out that at various times the mothers had difficulty in informing which professional guided them, demonstrating the lack of a clearer presentation and greater contact between the professional and the patient. The study stated that the speech-language pathologist was not very present in the orientation activities, and that the main points mentioned during the orientations were the baby's latching on to the breast, the benefits of breastfeeding and breast care. Excluding the use of bottles and pacifiers and the overall development of the baby.

It is evident that there is a need for speech-language pathologists to dedicate themselves more and more to gain space in this area and to show health authorities and society how much speech-language pathology guidance is beneficial for the mother and baby, and can contribute to the reduction of early weaning and prevent changes in orofacial structures and their respective functions (Madruga et al., 2020).

Muniz da Silva and da Silva Peixoto (2021) detailed the speech-language pathology work within the SUS and primary care. Evidencing a "constant walk increasingly committed to the social and collective issues and health needs of the population". The speech-language pathologist is trained to favor child development, promote health education and communication activities through topics such as maternal and child health and carry out shared consultations with the family health team.



Among the experiences reported in this study, the role of the speech-language pathologist concomitantly with nursing during childcare, puerperium or prenatal consultations stands out. This evidenced the need for a specific environment and time to address breastfeeding issues. Such advice aimed to solve demands in secondary care and reduce waiting lists, in addition to promoting continuous care and the bond between the team and the family (Muniz da Silva and da Silva Peixoto, 2021).

In addition, it was observed that the offer of the Tongue Test at the Basic Health Unit, both due to the geographical proximity of the families and the greater bond between user and professional, enabled interventions in breastfeeding situations, such as an alteration of the lingual frenulum. The implementation of such strategies has facilitated the diagnosis, prevention, and rehabilitation of the main causes of early weaning (Muniz da Silva and da Silva Peixoto, 2021).

Medeiros et al. (2018b) sought to evidence speech-language pathology performance with NB at risk. It is based on promoting safe and efficient feeding, through sucking-swallowing-breathing coordination. The author states that, currently, there is a great effort for this population to be able to be fed through EBF and the transition from gavage feeding is a safe and effective alternative, because in the case of NBs with clinical complications, the use of the chest tube had a shorter transition time than the cup/bottle.

In addition, it points out that several medical complications may be related to the delay in speech therapy, which may even compromise the child's development. The importance of speech-language pathology intervention in monitoring the feeding pattern of newborns and the effectiveness of the chest tube in Neonatology as a means of encouraging EBF is evident (Medeiros et al., 2018b).

According to Feitosa and da Silva (2022), the Human Milk Bank (HMB) should be treated as a space for multidisciplinary action in the promotion and encouragement of breastfeeding. However, this practice is still little discussed regarding the performance of the speech-language pathologist. Their actions, within the scope of HMB, can occur in the technical setting, in which they perform all the receiving, processing and storage of expressed human milk, and in the care setting, related to direct interventions with the binomial, such as manual milking techniques, latching, positioning and breastfeeding management.

In this context, studies highlight how much puerperal women and neonates tend to gain from the perspective of a qualified professional, in the face of issues of orofacial disorders and human communication, making approaches more specialized and humanized.

CONCLUSION

The present study described the speech-language pathology work in maternity hospitals, and the professional was trained to disseminate information about the benefits of breastfeeding, to promote



a greater bond between the mother-newborn dyad, to evaluate breastfeeding and sucking patterns, and to avoid early weaning.

It was evident that the maternal aspects and their social reality, in addition to the lack of information, specific evaluation protocols, public policies and a specialized look at the complications at the time of breastfeeding, culminated in several cases of early weaning and development of deleterious habits.

Regarding the valorization of the work of speech-language pathologists in the context of breastfeeding, it was observed the lack of clear and relevant exposure of speech-language pathology performance, strengthening and reinforcing the need for actions that promote an individual environment and moment to address issues about breastfeeding and how the speech-language pathologist should be inserted in this scenario. Through a more committed look at the social, individual and collective issues of the population studied.

I suggest the elaboration of future studies that portray the speech-language pathology practice within the Neonatal ICUs, in addition to the creation and dissemination of methods that can insert the speech-language pathologist, even more, in the area of breastfeeding.



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