CV dr Utami Roesli

@drUtamiRoesli
tamiroes@gmail.com

N a m a : dr. Utami Roesli, SpA., MBA, IBCLC., FABM.

Pendidikan : Dokter Spesialis Anak

Jabatan : - Founder Sentra Laktasi Indonesia
- Dokter Anak Senior di RS. St Carolus Jakarta

RIWAYAT PENDIDIKAN

Perguruan Tinggi : Dokter FK UNPAD / RSHS. Bandung (1972)

Pendidikan Ahli / Spesialisasi : Dokter Spesialis Anak FK UNPAD/ RSHS, Bandung (1980)

Pendidikan Management : Master Business Administration University of the City of Manila Philippine 1994

Pendidikan Tambahan

Neonatology : Sint Raadbout Hospital, Nijmegen, Belanda 1987

Lactation Consultant : International Board Certified Consultant (IBCLC) 2001, Recertified 2006, 2011, 2016

American Academic of Breastfeeding Medicine : Fellow of Academic of Breastfeeding Medicine (FABM) Agustus 2008

Pengalaman Sebagai Pembicara antara lain di

- Clinton Global Initiative's 2008
- Annual Meeting USAID di Washington DC
- Global Health Forum Conference New York
- ABM Annual Meeting di New York
- ICPD Bangkok
- Konggres IBCLC Perth di Australia
- Sosialisasi UU Kes 35 thn 2009 & PP 33 thn 2012 dg Promkes KemenKes di Provinsi Jatim, Jateng,Sumut, Sulsel
- Sosialisasi UU Kes 35 thn 2009 & PP 33 thn 2012 dg Direktorat Gizi Kemenkes di berbagai provinsi, kabupaten/kota di Indonesia
- Pemda berbagai kabupaten Kota dan Provinsi
- Dinas Kesehatan berbagai Kabupaten Kota dan provinsi
- Kemenakertrans untuk pembuat keputusan dan karyawati
- MenegPPPA keuntungan menyusui bagi ibu
- Kementrian BUMN nonember 2013
- Kementrian PU Desember 2013
- *Bimbingan dari teuku dan ustad di NAD, Bener Meriah. dan tuan guru di Lombok ; Pasteur2 di Sikka Maumere dan Kupang; Pendeta di Soe NTT*

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Penghargaan

-

- Tanda Kehormatan Satya Lancana Karya 20 tahun dari Presiden RI Prof DR Ing. B.J. Habibie tgl 19 Juli 1999.
- Tanda penghargaan Bakti Karya Husada Triwindu dari Menteri Kesehatan RI Prof. Dr. F.A. Moeloek tanggal 19 Agustus 1999.
- Tanda Penghargaan Ksatria Bakti Husada ARUTALA dlm pembangunan nasional di bidang kesehatan dari Menteri Kesehatan RI Dr. Achmad Sujudi pada tanggal 1 November 2001
- Penghargaan sebagai tokoh yang konsisten dalam pengembangan program ASI eksklusif dari IDAI cabang DKI Jakarta 24-8-2013
- Tanda penghargaan Wahidin Sudirohusodo atas jasa-jasanya yang menonjol di bidang pengamalan profesi kedokteran khususnya dalam pengembangan program ASI eksklusif dari IDI 29 Nov 2006.
- Duta IKATAN DOKTER INDONESIA (IDI) tahun 2007 – 2008
- *PENDEKAR ANAK (Children Champion) dari UNICEF 2010*
- People of The Year Koran Sindo 2014
- Life Time Achievement Award meningkatkan Penggunaan ASI dari Yayasan St Carolus Borromeus 2015
- Life Time Achievement Award Nobel Health Promotor dari Brand Foundation 2016

Menyusui untuk mencegah Stunting

dr.Utami Roesli SpA,IBCLC, FABM

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Foundation of Life
WABA | WORLD BREASTFEEDING WEEK
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1 dari 3 anak Indonesia mengalami stunting

Prevalensi *Stunting* Global tahun2015

159 JUTA ANAK DIBAWAH 5 TAHUN DI SELURUH DUNIA MENDERITA "STUNTED"

85% tinggal di 37 negara berbeban tinggi

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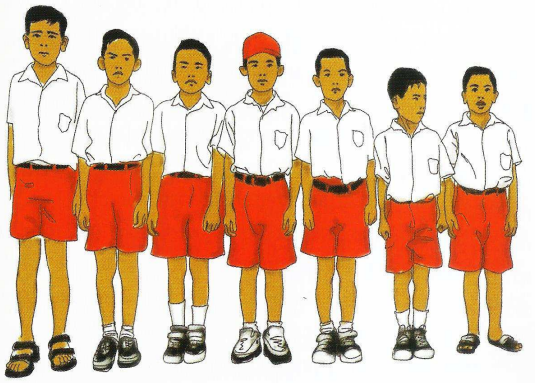
Hampir 9 juta

Sindroma Stunting suatu perubahan patofisiologis multiple ditandai (Prendergast 2014) :

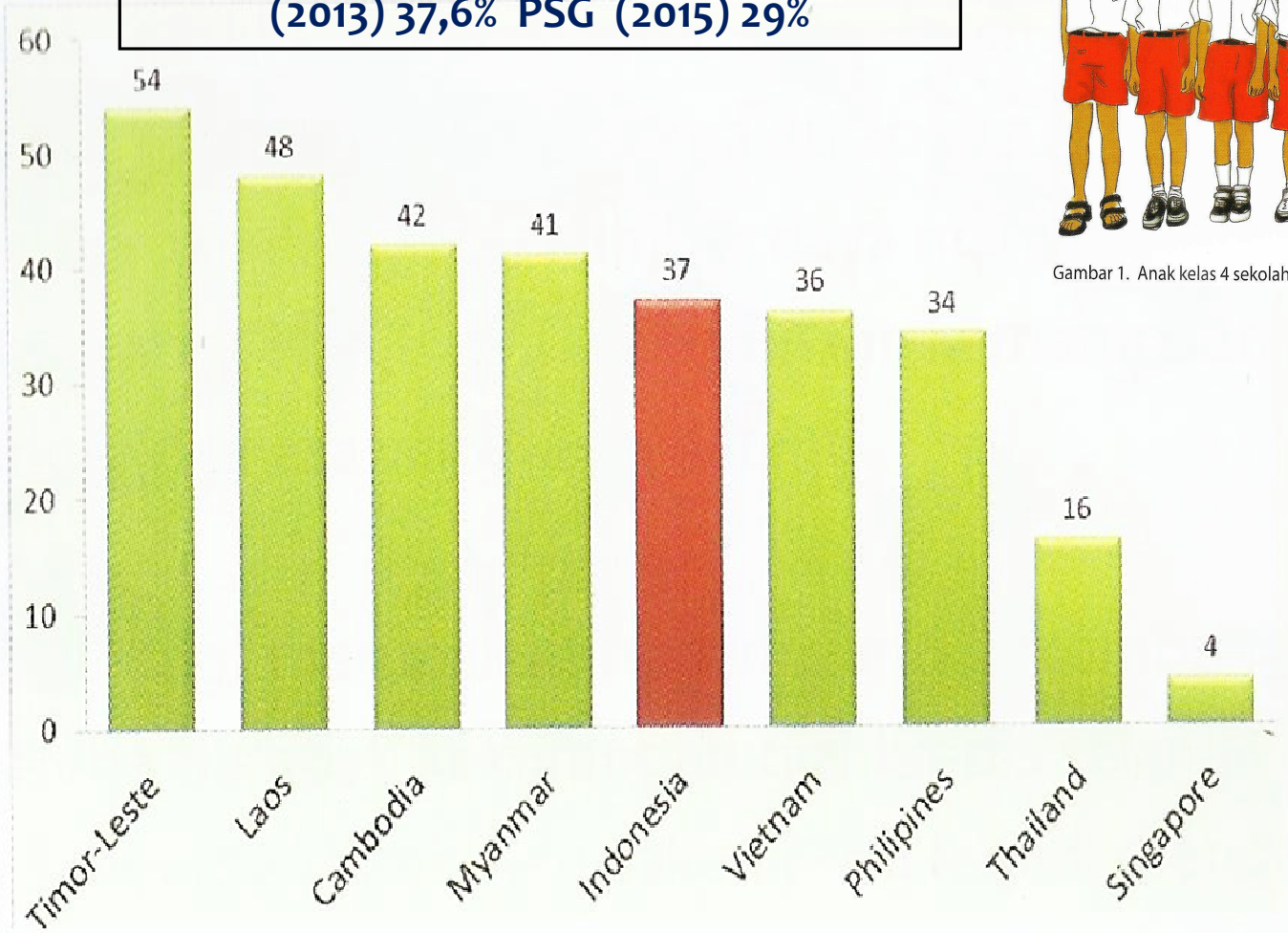
- pertumbuhan linear terhambat,
- peningkatan mortalitas & morbiditas
- berkurangnya kapasitas fisik & neurodevelopment

Anak Stunting jika tingginya dibawah -2SD dari WHO Standar

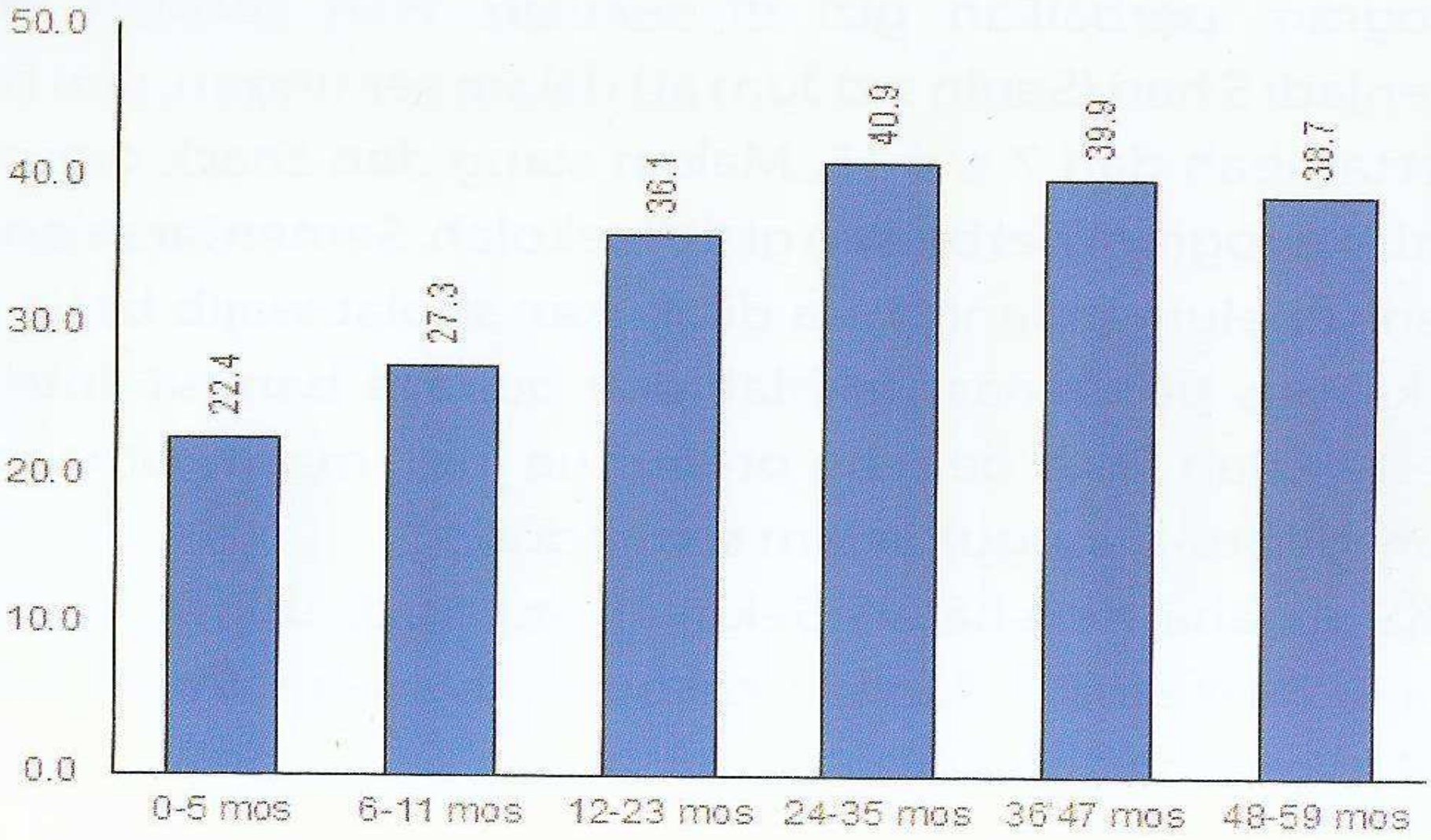
-Angka Stunting menurut Riskesdas (2013) 37,6% PSG (2015) 29%



Gambar 1. Anak kelas 4 sekolah dasar dengan tinggi yang berbeda

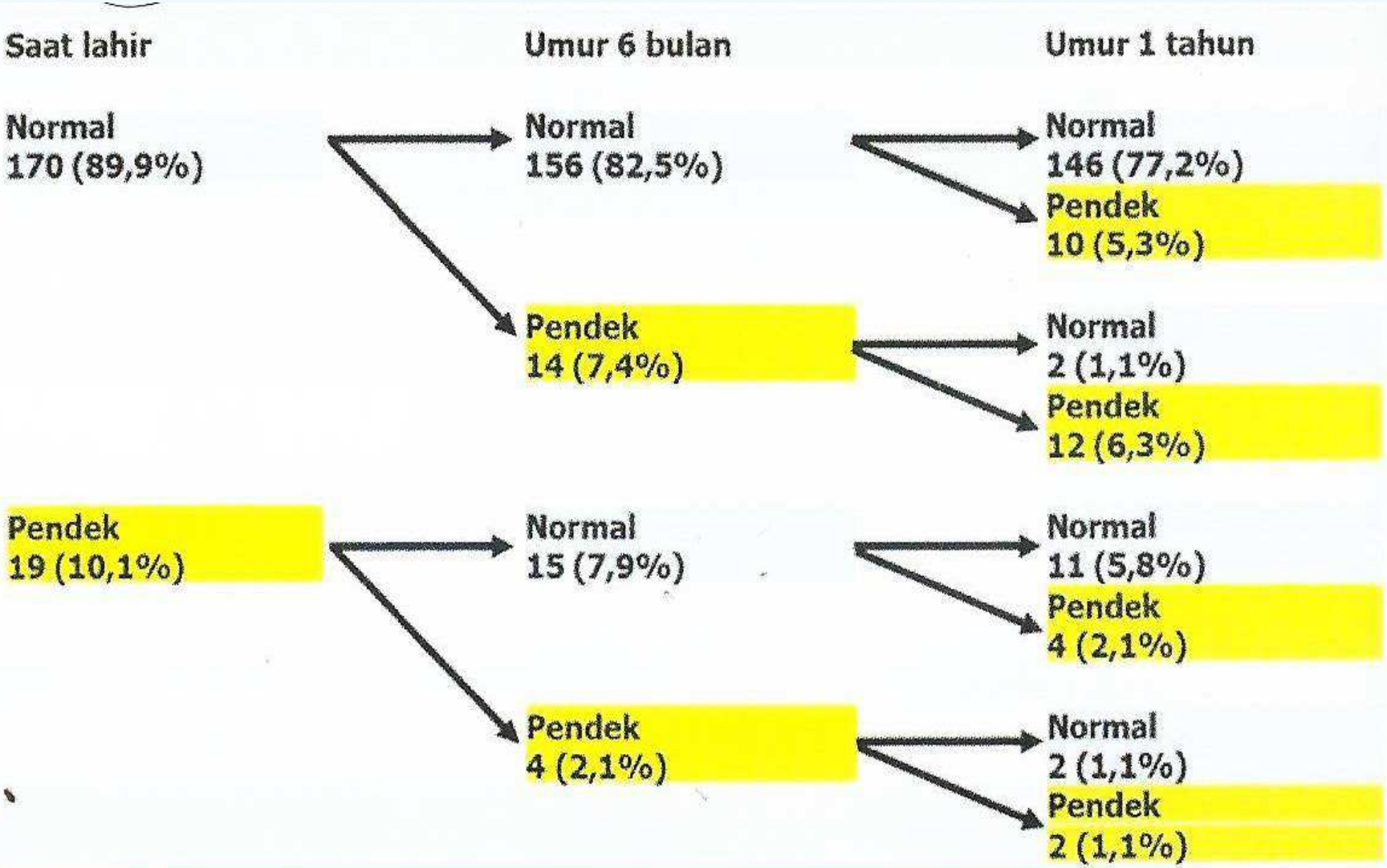


Gambar 3. Perbandingan prevalensi pendek antar beberapa negara



er: Riskesdas 2013

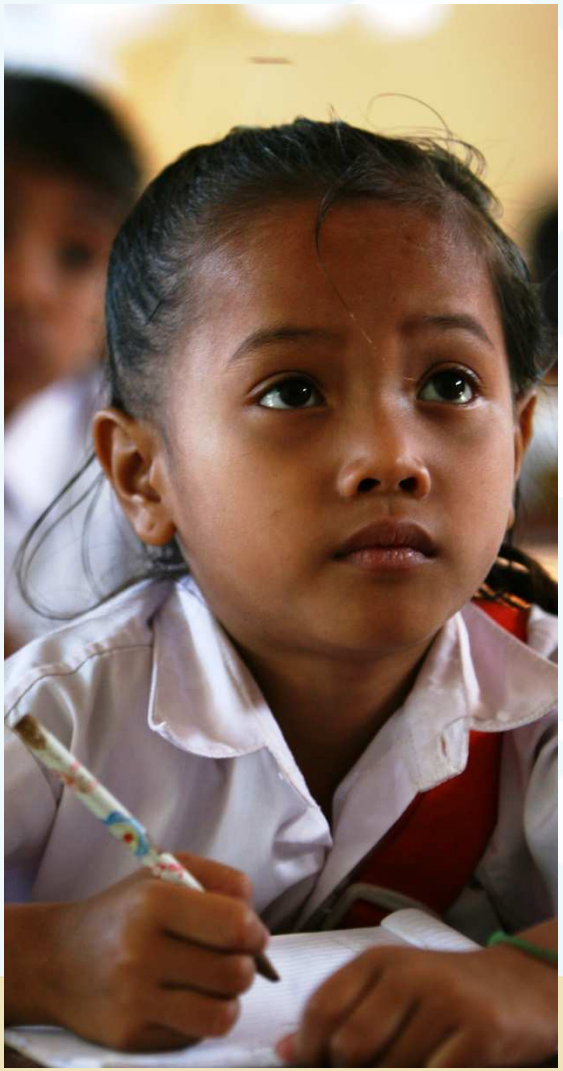
Gambar 73. Proporsi pendek balita menurut umur, 2013



Sumber: Studi stunting di Kab. Bogor, 2012

Gambar 46. Dinamika perubahan status gizi pendek tiap individu dari saat lahir sampai usia 1 tahun

Mengapa Kita Perlu Concern Permasalahan Stunting ?



Kurang Gizi pada 1000 HPK meningkatkan resiko kerusakan otak dan resiko penyakit diabetes dan jantung pada masa mendatang

Anak pendek *stunted* tidak dapat berprestasi di sekolah

Studi menunjukkan bahwa stunting menurunkan penghasilan saat dewasa sebesar 20%

Kurang gizi menyebabkan lemahnya system imunitas- sehingga rentan terhadap infeksi

Ancaman stunting dalam jangka pendek dan jangka panjang

Dampak Stunting

Jangka pendek

Gangguan perkembangan otak

IQ rendah

Kelemahan sistem imunitas

Jangka panjang

Kehilangan produktivitas &

Meningkatkan biaya kesehatan

Perawakan pendek

Risiko tinggi diabetes dan kanker

Kematian dini

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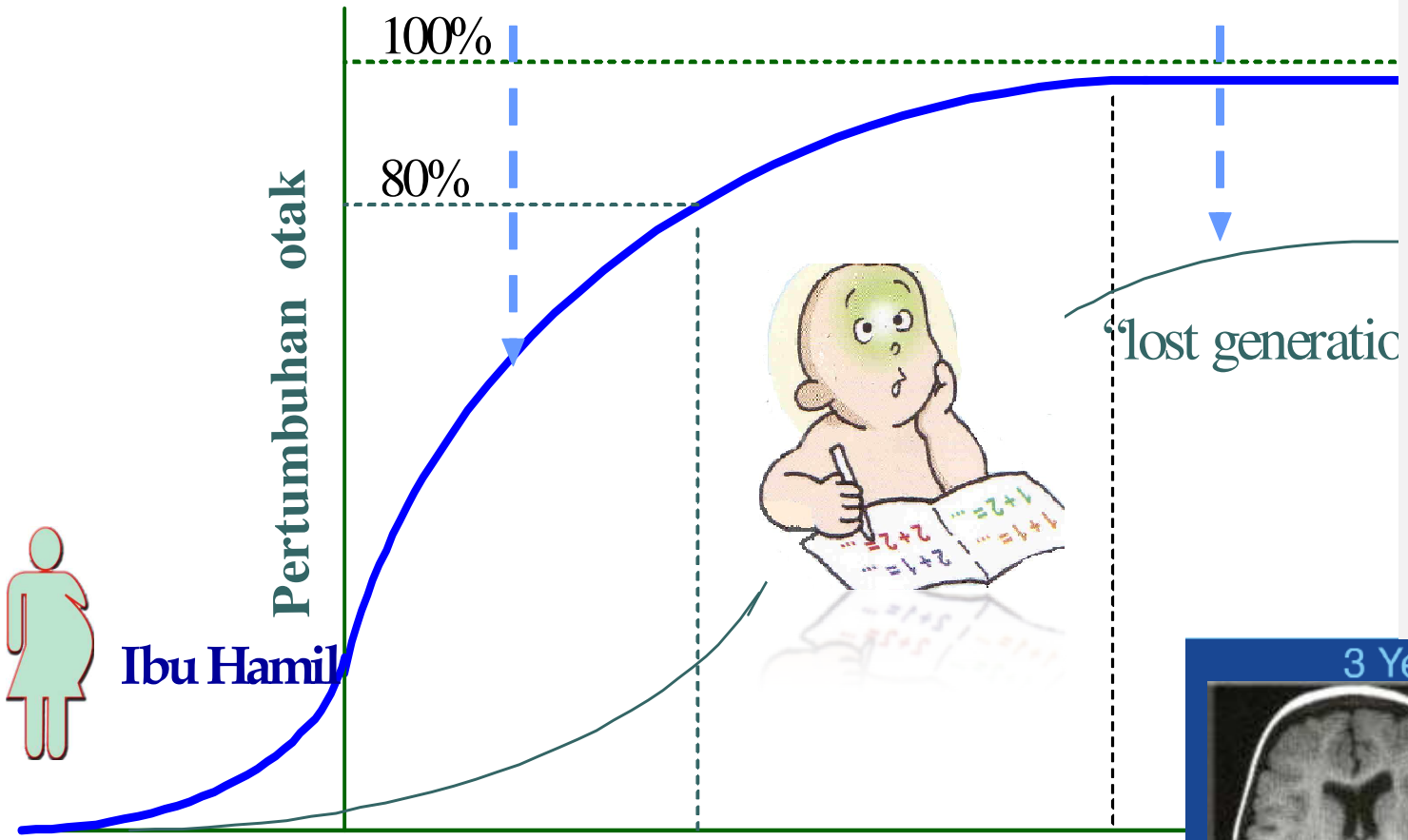
PERTUMBUHAN OTAK

Investasi tepat waktu

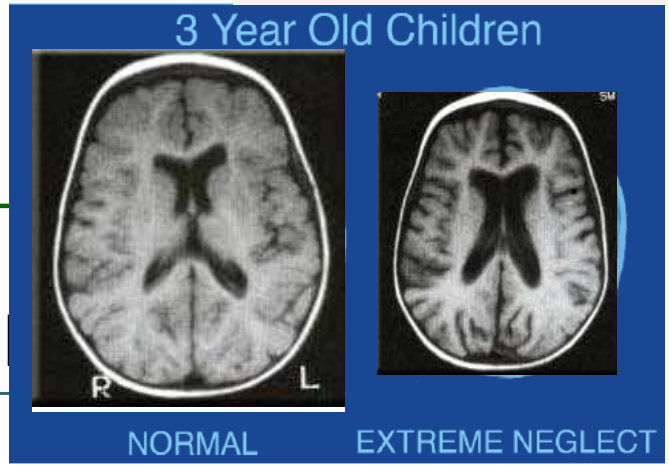
Investasi terlambat



90 % pertumbuhan otak terjadi sejak janin sampai 5 thn

80 % pertumbuhan otak < 2thn

Gangguan pertumbuhan saat ini irreversible .



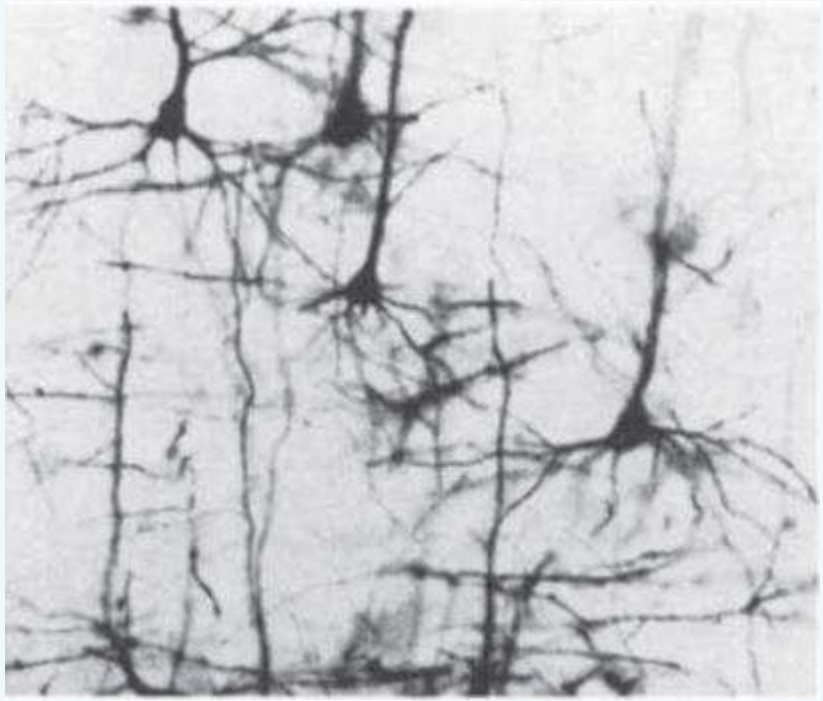
Sumber: Asbobat Gani, 2005

Mahlil Ruby

STUNTING & Perkembangan Otak

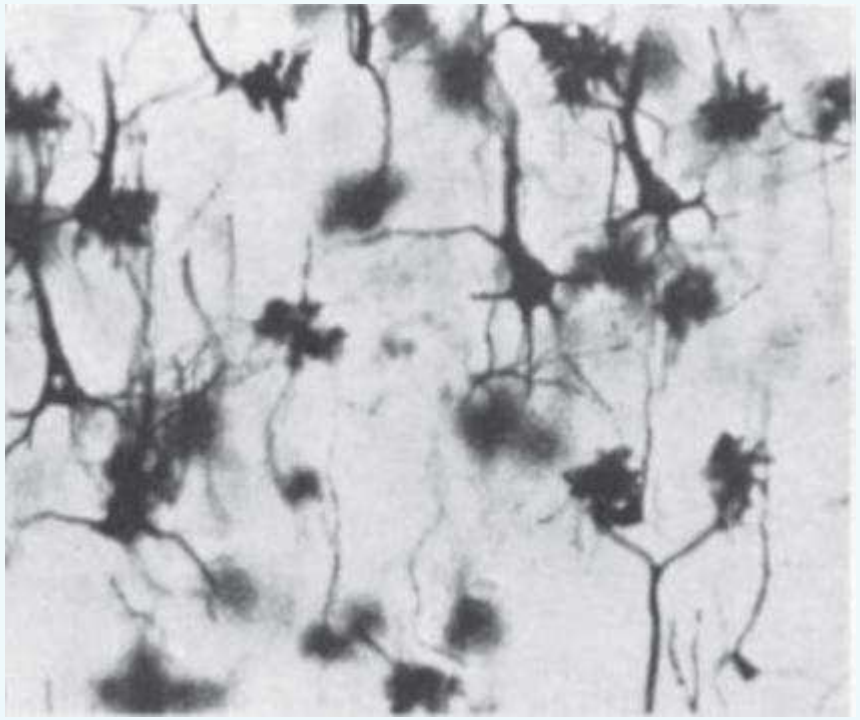
NORMAL

SEL OTAK NORMAL
Cabang/ranting terlihat panjang



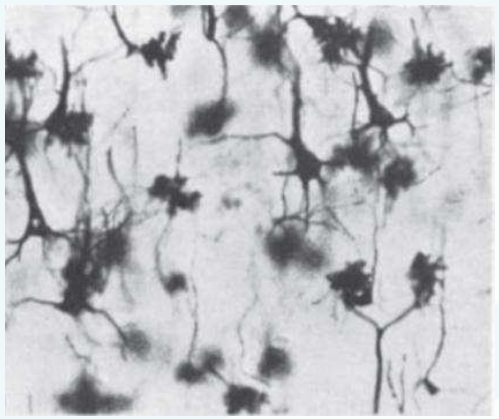
PENDEK

SEL OTAK YANG RUSAK
Cabang/ranting ABNORMAL, PENDEK



Cordero et al, 1993

KONSEKUENSI STUNTING



Rusaknya Sel Otak
Terganggunya
perkembangan kognitif

Kemampuan Belajar
Rendah (Kehilangan 5-11
IQ Points→ resiko tidak
naik kelas 16%)

Menurunnya Produktivitas
Kemampuan Bersaing,
Pendapatan (3-4 GDP loss)

Target 2025: prevalens balita stunting berkurang 40% (dari tahun 2012)

STUNTING TARGET

REDUCE THE NUMBER OF STUNTED CHILDREN UNDER AGE 5 BY 40% BY 2025

Stunting bukan hanya **kegagalan mencapai tinggi badan sesuai potensi genetik**, tapi juga:

- **defisit kognitif** → prestasi akademik tidak optimal
- kehilangan peluang kerja yang lebih baik → **perbaikan status sosial-ekonomi**
- ibu stunting berisiko melahirkan BBLR → **lingkaran malnutrisi**
- meningkatkan risiko penyakit degeneratif (**PTM**)

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3 faktor penyebab stunting

1. Kesehatan dan gizi ibu yang kurang terjamin:

ibu stunting, jarak persalinan terlalu rapat, kehamilan remaja

2. Praktik pemberian makan bayi dan anak yang tidak adekuat:

tidak mendapat inisiasi menyusu dini, tidak disusui eksklusif, pemberian MPASI yang tidak memenuhi kuantitas, kualitas dan variasi

3. Infeksi pada 1000 hari pertama kehidupan:

terkait dengan pola asuh, lingkungan dan higinitas yang buruk, juga kemiskinan dan minimnya layanan kesehatan

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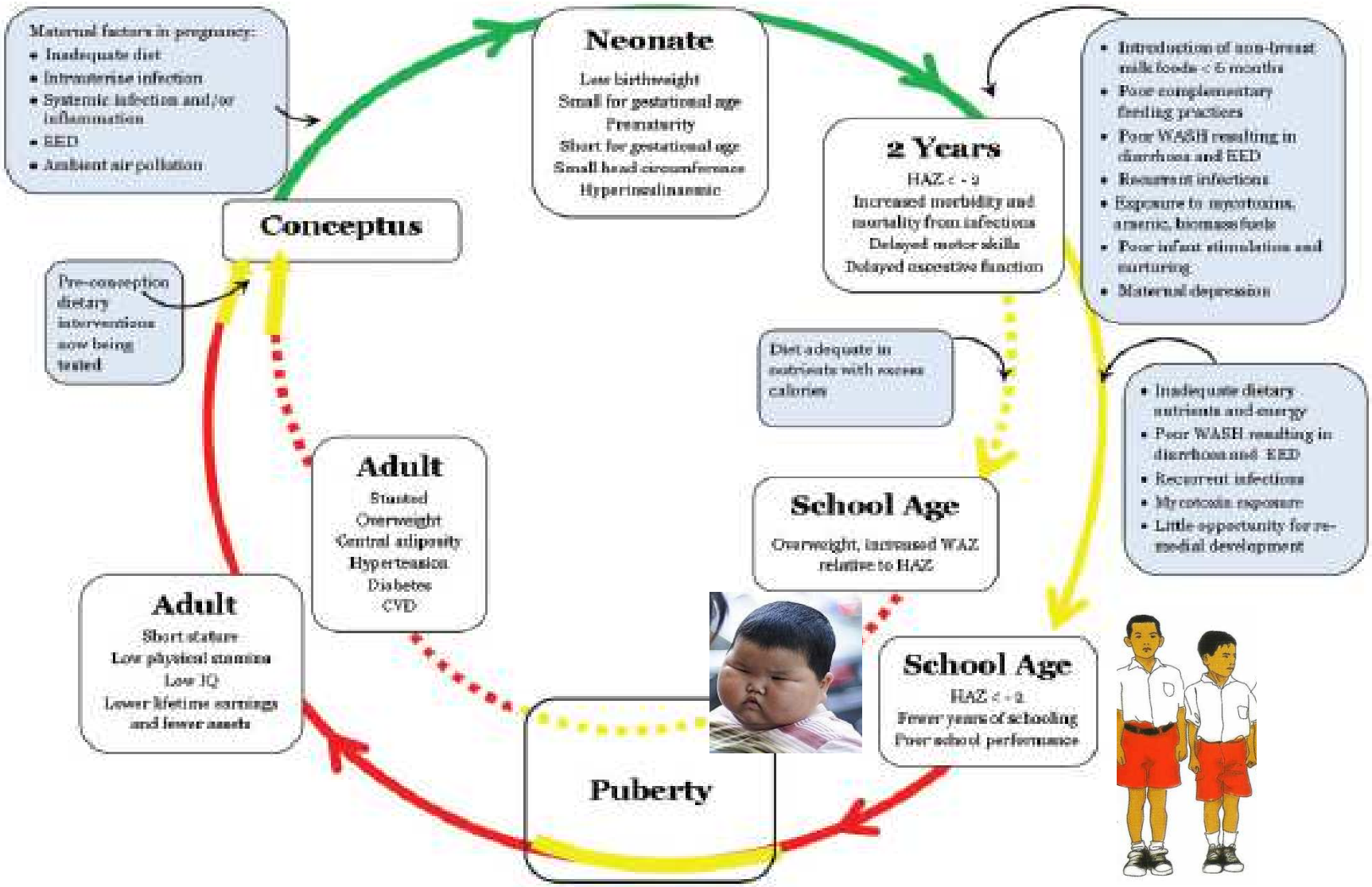
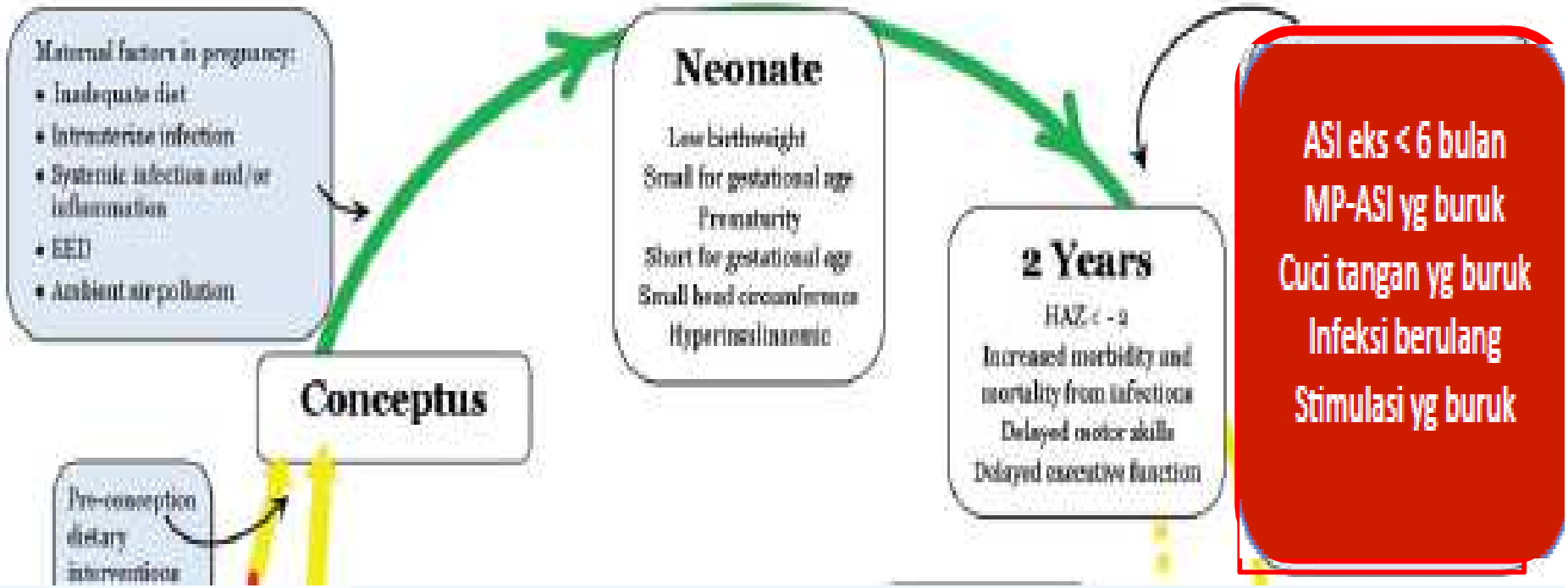


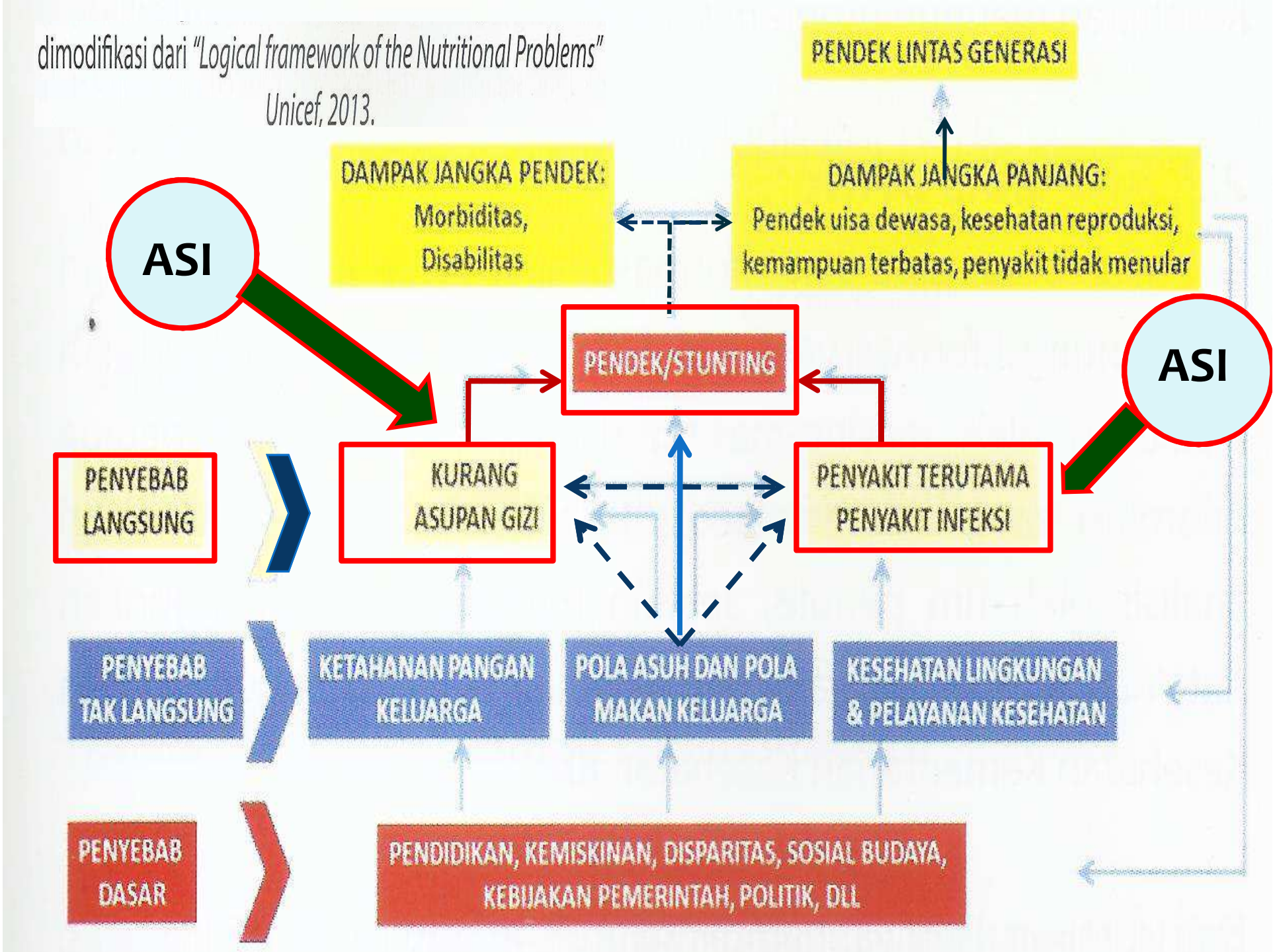
The short- medium- long term sequele of stunting and age specific causative

Garis merah menunjukan stunting syndrome TIDAK responsive terhadap intervensi. Kotak putih outcome .Kotak biru penyebab berdasarkan usia

Garis Hijau menunjukan perioda konsepsi - 2thn **(1000 HPK)** dimana stunting dan penyebabnya paling responsif dan dapat dicegah dg intervensi ***"window of opportunity"*** *untuk intervensi*



dimodifikasi dari *"Logical framework of the Nutritional Problems"*
Unicef, 2013.



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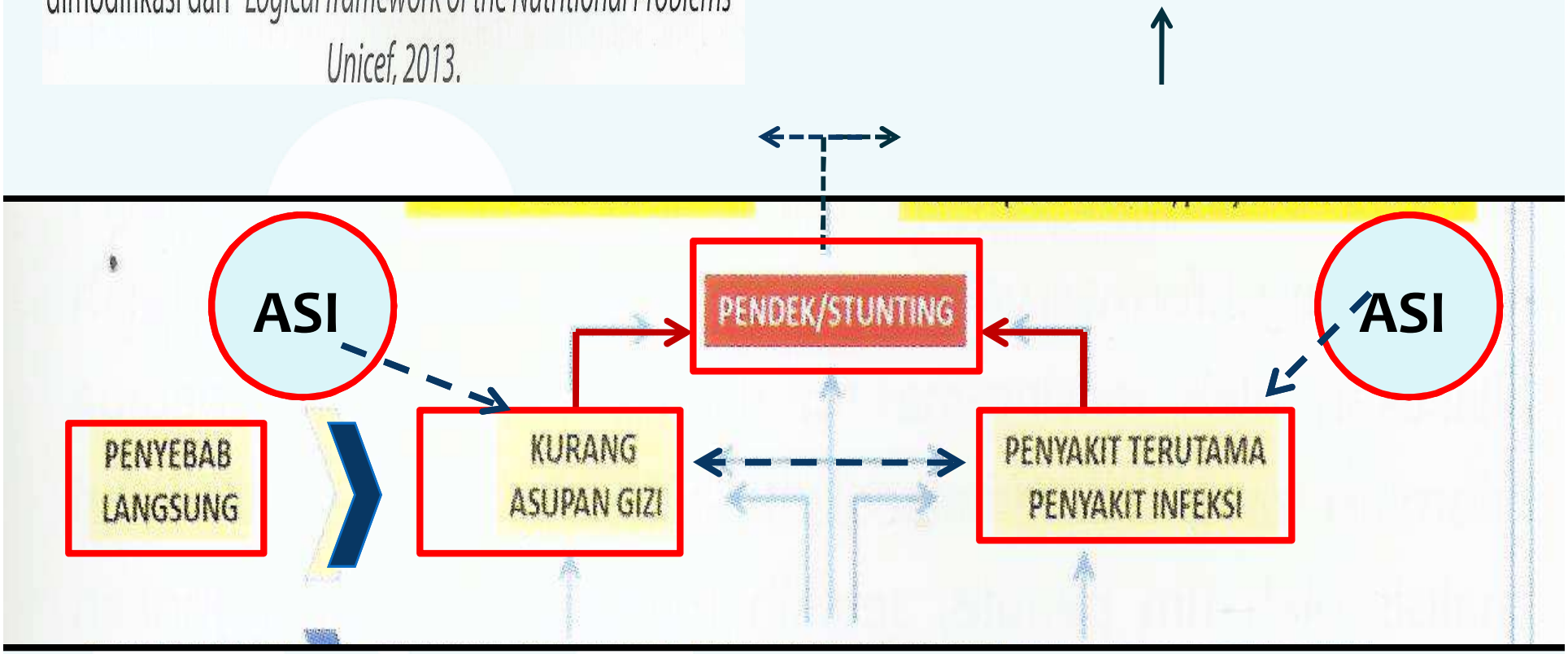
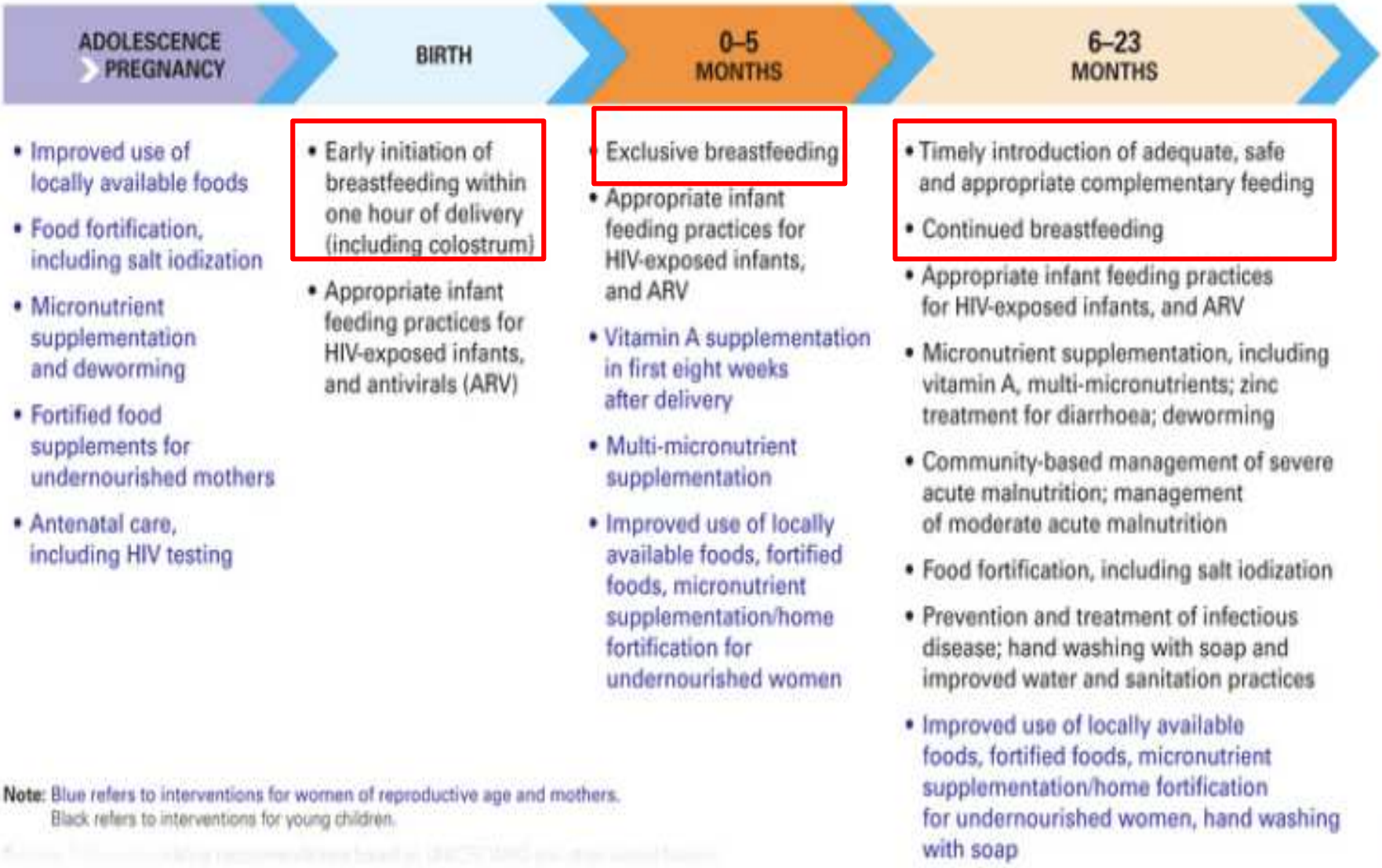


FIGURE 18 Key proven practices, services and policy interventions for the prevention and treatment of stunting and other forms of undernutrition throughout the life cycle



Note: Blue refers to interventions for women of reproductive age and mothers. Black refers to interventions for young children.

UNICEF. Improving Child Nutrition. The achievable imperative for global progress. 2013

Menyusui yang benar Mencegah Kurangnya Asupan Gizi

1.Inisiasi Menyusu Dini

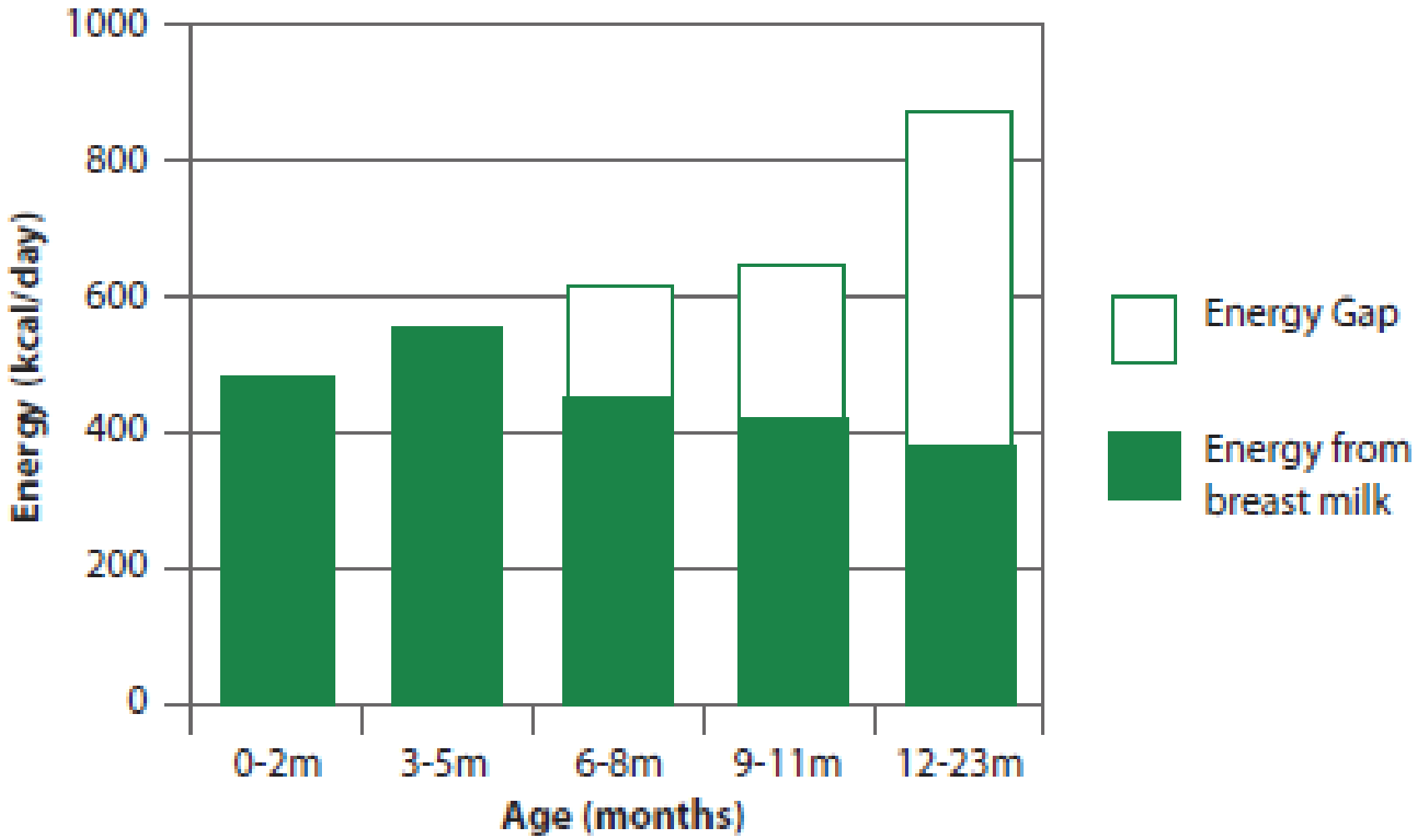
2.ASI eksklusif 6 bln

3.Tetap menyusui s.d usia 2 thn atau lebih

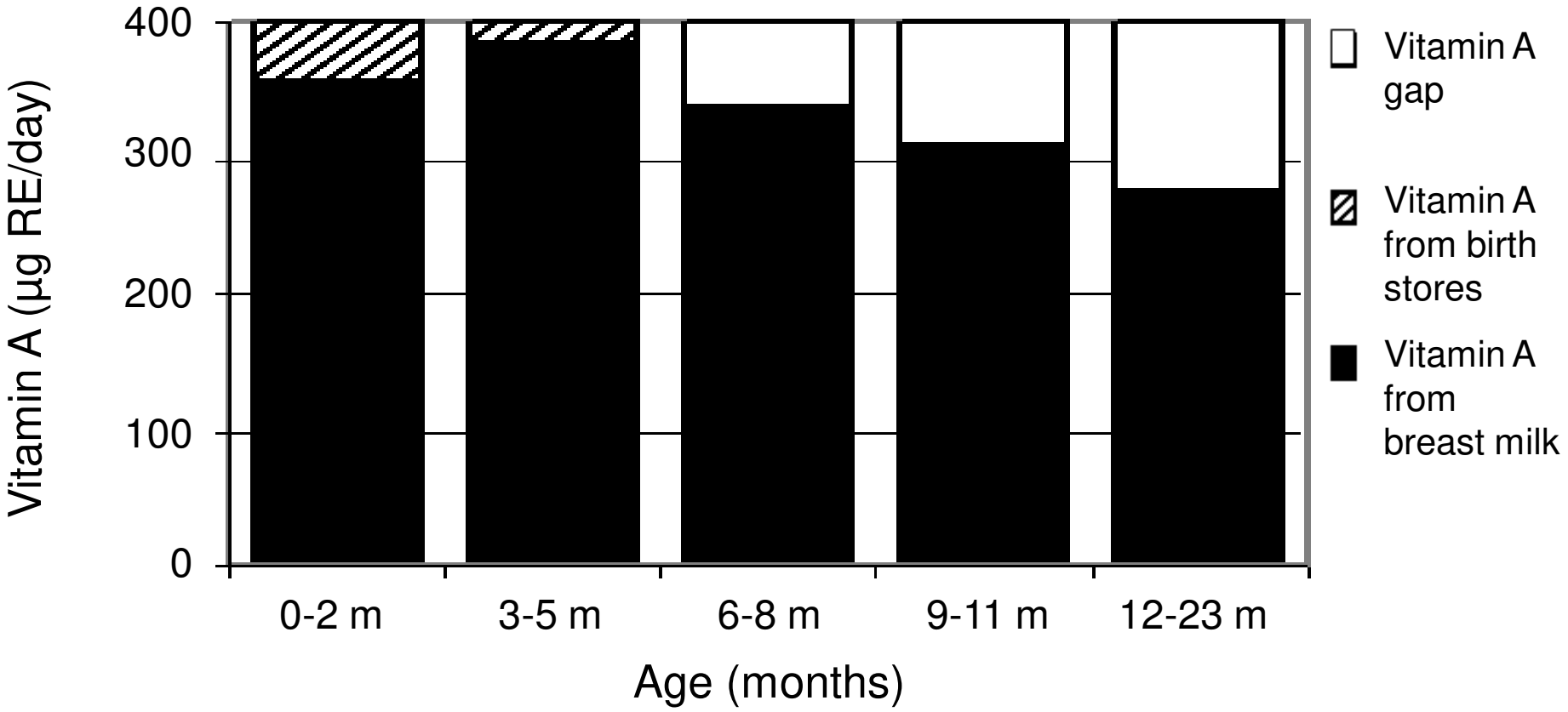
MP ASI makanan keluarga berkualitas mulai 6 bln

WHO documents

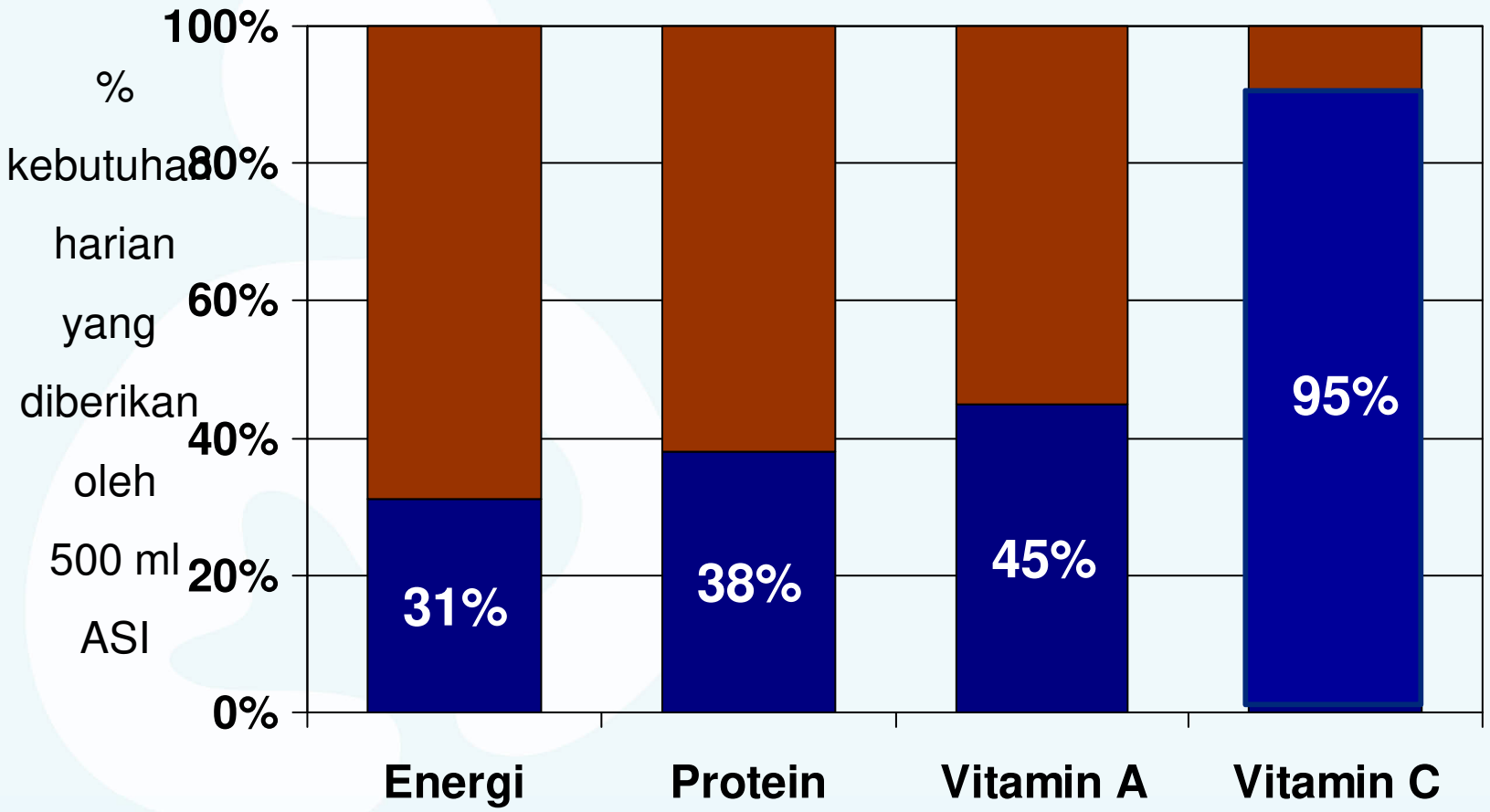
Energy required by age and the amount supplied from breast milk



Gap kebutuhan vitamin A

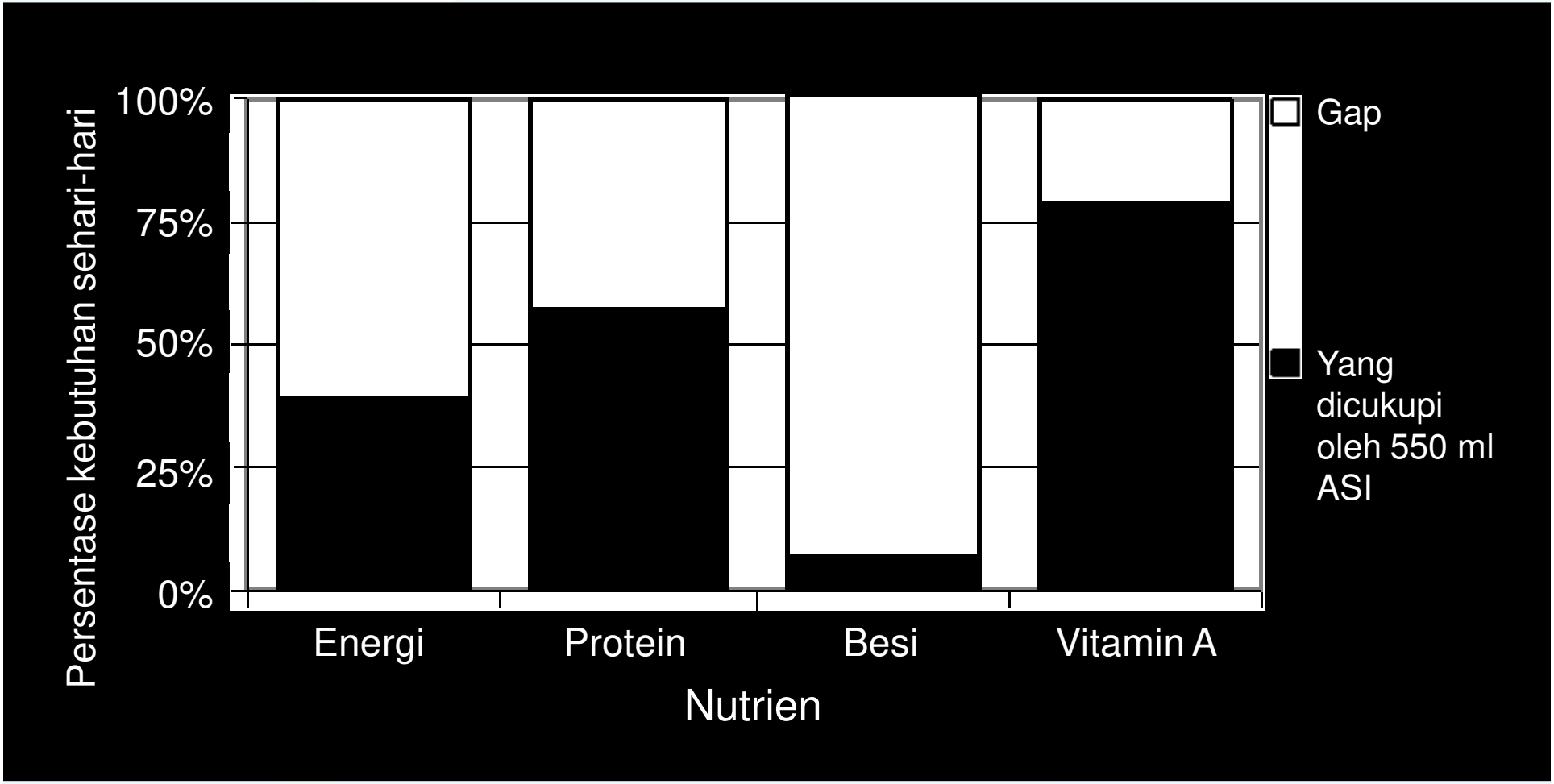


ASI pada tahun Kedua Kehidupan



Dari: Breastfeeding counseling: A training course. Geneva, World Health Organization, 1993 (WHO/CDR/93.6).

Gap yang harus diisi oleh MP-ASI pada anak 2 thn



Perbedaan komposisi ASI (dinamika)

- Umur kehamilan pada saat persalinan (preterm dan full term)
- Tahap laktasi (kolostrum dan ASI matang)
- Selama menyusui (susu awal/foremilk dan susu akhir/hindmilk)

Breastmilk offers lifelong health benefits. Let's promote it better

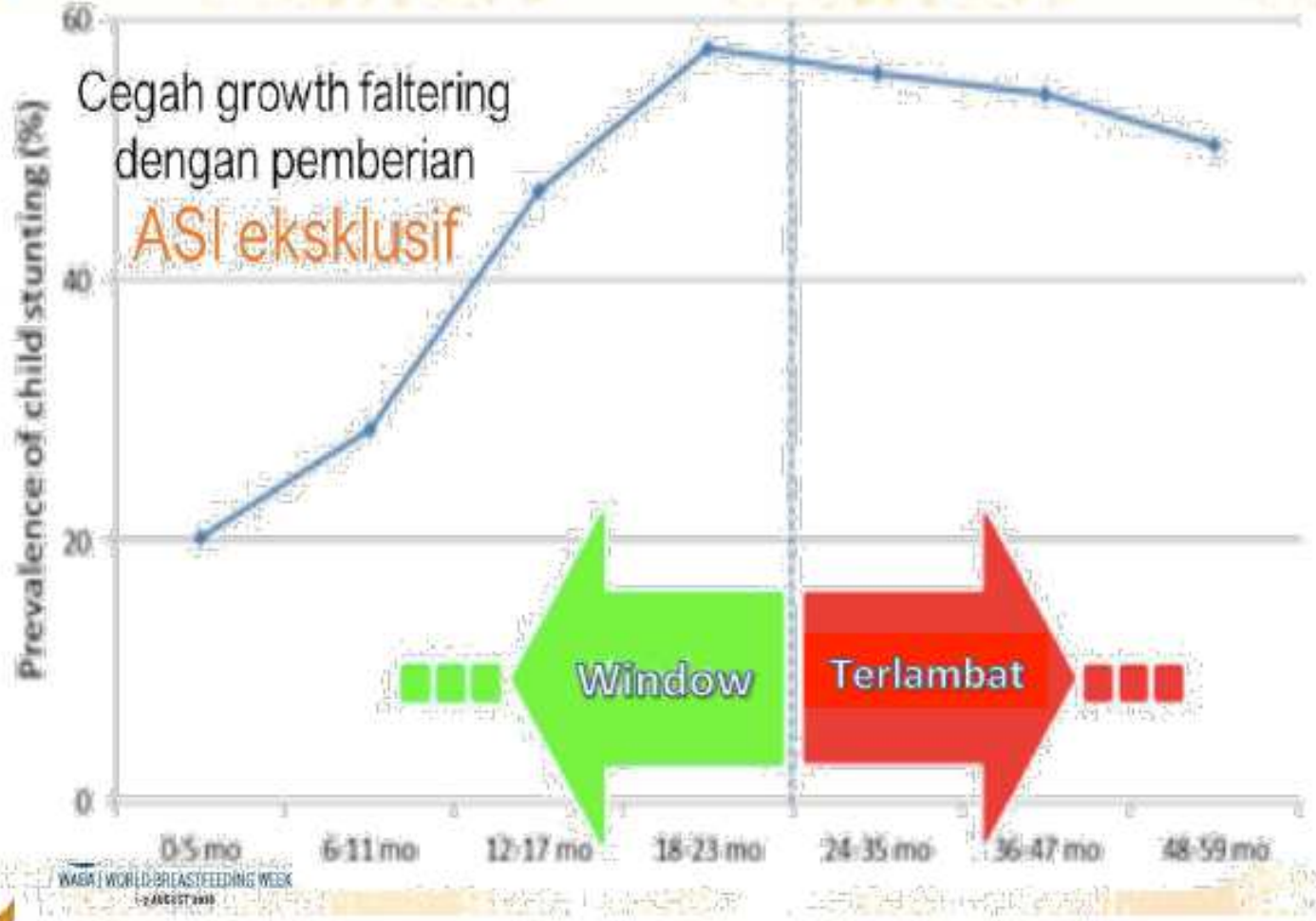
Kristin Lawless

Mother's milk has many well-established advantages over infant formula but it also boosts the immune system and may prepare babies to prefer a healthy diet

Sat 21 Jul 2018 11.00 BST

What's more, when a baby is not breastfed, she is less likely to be accepting of the wide array of flavors found in natural, whole foods. Flavors in a mother's diet come through in her breast milk, teaching the baby what to expect with solid foods. In contrast, formula's flavor never changes. Researchers believe the baby could be less likely to eat a diverse and healthy whole foods diet later in life.

Stunting harus diantisipasi sejak 1000 hari pertama kehidupan



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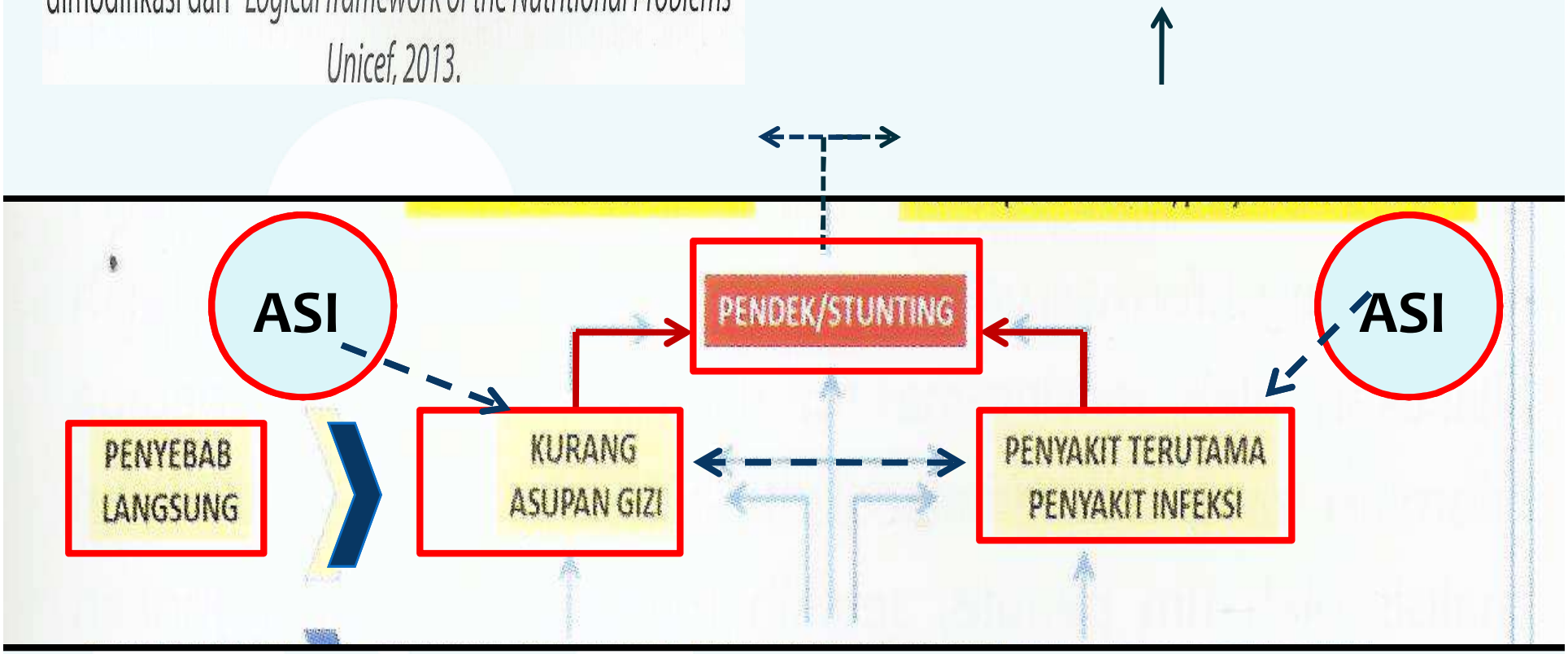
Unicef, 2013.



The Guardian

Breastmilk offers lifelong health benefits. Let's promote it better

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Sat 21 Jul 2018 11.00 BST

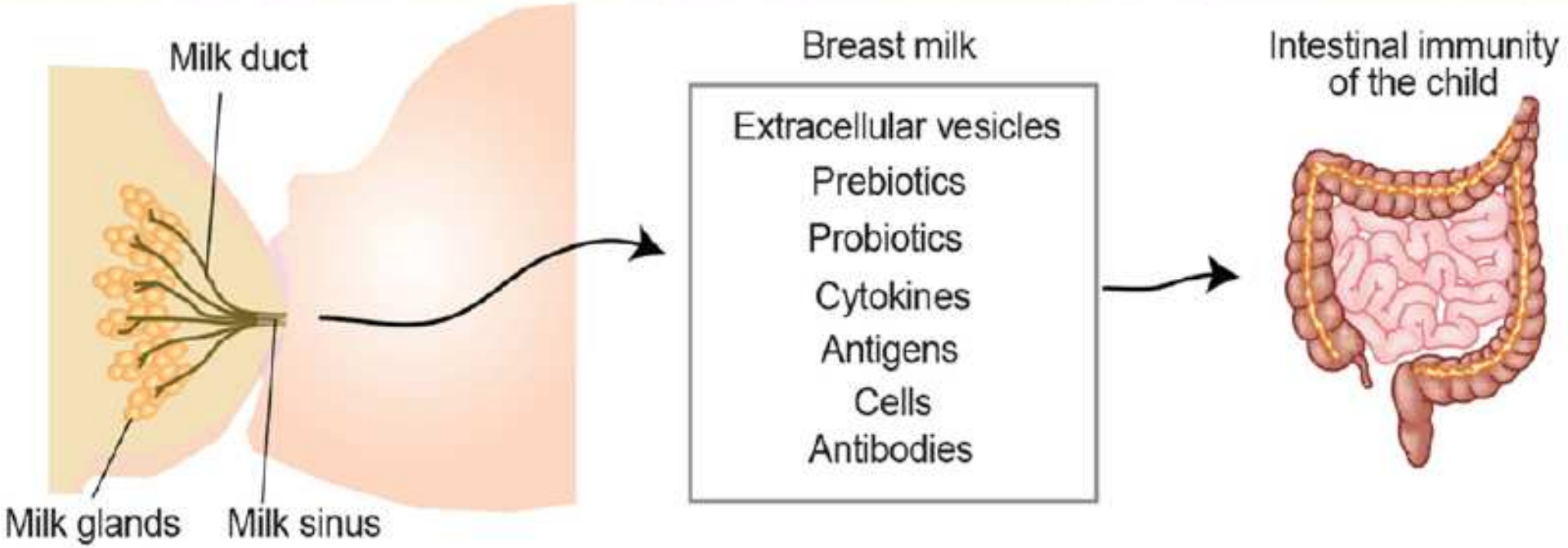
With the discovery of the microbiota - the trillions of bacterial cells that live in and on us, and without which we could not survive - researchers are learning about the critical role breast milk plays in establishing a healthy microbiota. Breast milk, as well as the closeness to a mother's body that breastfeeding allows, provides the transfer of important beneficial bacteria to the baby. Then, a mother's milk provides a complex array of carbohydrates that the bacteria need to live and reproduce - something infant formula does not have.

A healthy infant microbiota educates the immune system, which protects the baby immediately from acute illness, but it also programs the immune system for life during this important developmental window. What researchers are beginning to understand is that the disruption to the natural processes of forming a protective microbiota through breastfeeding seems to have disastrous consequences leading to the development of autoimmune diseases and conditions, ranging from increased risk for allergies to certain cancers.

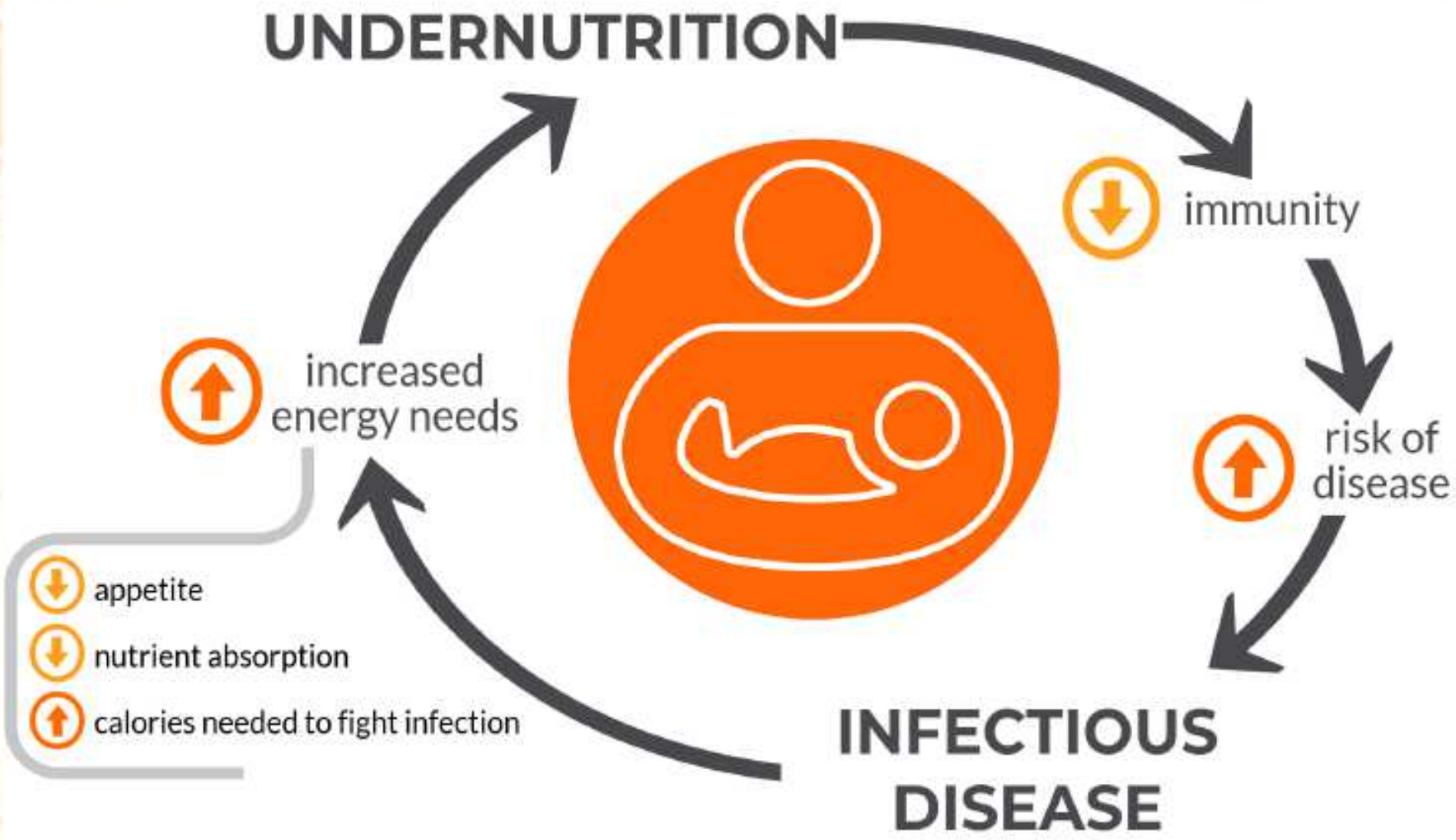
Bagaimana ASI mencegah infeksi?

>8% kalori ASI tersaji dalam bentuk HMO yang tidak dapat dicerna, berfungsi sebagai prebiotik untuk pertumbuhan flora normal usus *Bifidobacterium longum biovar infantis*

≈ daya tahan tubuh bayi ASI eksklusif lebih baik

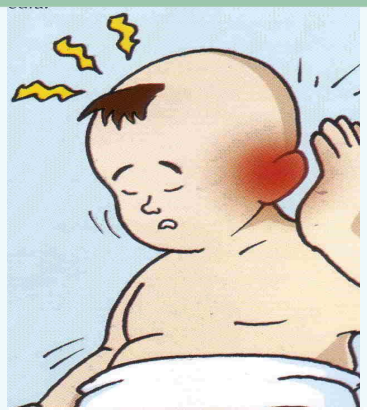


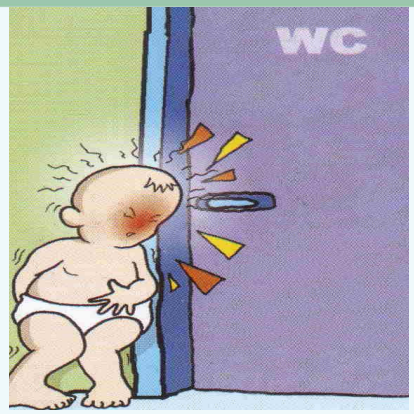
ASI eksklusif menurunkan risiko kematian akibat pneumonia 15.1x dan risiko kematian akibat diare 10.5x

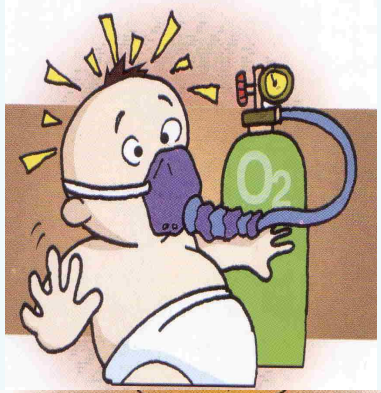


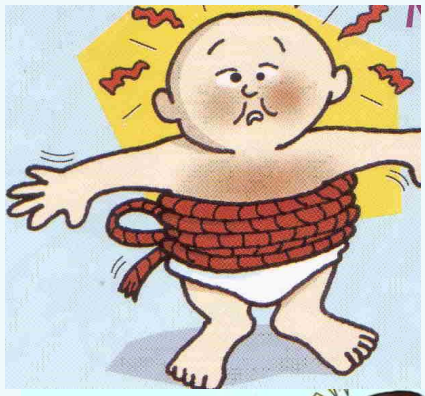
Risks of NOT Breastfeeding for

Outcome	Excess Risk (%)
Among full-term infants	
Acute ear infection (otitis media)	100
Eczema (atopic dermatitis)	47
Diarrhea and vomiting (gastrointestinal infection)	178
Hospitalization for lower respiratory tract diseases in the first year	257
Asthma, with family history	67
Asthma, no family history	35
Childhood obesity	32
Type 2 diabetes mellitus	64
Acute lymphocytic leukemia	23
Acute myelogenous leukemia	18
Sudden infant death syndrome	56
Among preterm infants	
Necrotizing enterocolitis	138









Source: U.S. Department of Health and Human Services. *The Surgeon General's Call to Action to Support Breastfeeding*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2011.

	Pemberian ASI	↓ Resiko
Radang telinga tengah	>3 bulan	50%
Infeksi saluran napas atas	>6 bulan	63%
Infeksi saluran napas bawah	>4 bulan	72%
Asma	>3 bulan	40%
Bronkiolitis	>4 bulan	74%
NEC	~	77%
Dermatitis atopi	>3 bulan	42%
Infeksi saluran cerna (diare)	~	64%
Obesitas	~	24%
Diabetes tipe 1	>3 bulan	30%
Diabetes tipe 2	~	40%
Leukemia (ALL)	>6 bulan	20%

American Academy of Pediatrics and The American College of Obstetricians & Gynecologists
In Breastfeeding Handbook for Physicians 2014

Condition	Lower Risk*	Comment
Otitis media	50	EBF ≥ 6 versus 3 mo
Recurrent otitis media	49	EBF ≥ 6 versus 4–6 mo
Upper respiratory tract infection	70	EBF ≥ 6 versus < 6 mo
Lower respiratory tract infection	77	EBF 4–6 versus ≥ 6 mo
Asthma	40	EBF ≥ 3 mo, positive atopic family hx
Asthma	27	EBF ≥ 3 mo, negative atopic family hx
RSV bronchiolitis	74	EBF > 4 mo
Necrotizing enterocolitis	77	Exclusive human milk diet
Atopic dermatitis	27	EBF > 3 mo, negative family hx
Atopic dermatitis	42	EBF > 3 mo, positive family hx
Gastroenteritis	64	Any
Inflammatory bowel disease	31	Any
Obesity	24	Any
Celiac disease	52	>2 mo gluten exposure when BF
Type 1 diabetes	30	EBF > 3 mo
Type 2 diabetes	40	Any
Leukemia (ALL)	20	>6 mo
Leukemia (AML)	15	>6 mo
Sudden infant death syndrome	73	EBF

Exclusive breastfeeding duration during the first 6 months of life is positively associated with length-for-age among infants 6-12 months old, in Mangochi district Malawi

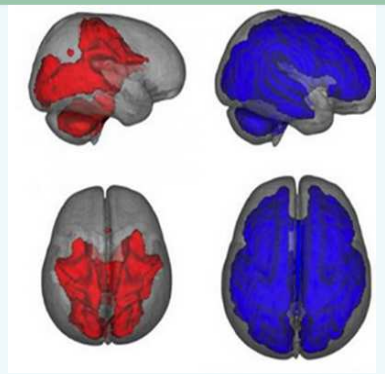
Kamudoni P, Maleta K, Shi Z, Holmboe-Ottesen G

Eur.J.Clin Nutr 96-101 2015

- *EBF in the first 6 months of life was associated with increased linear growth,* in later infancy . Promotion of EBF 6 months could reduced the prevalence of chronic child under nutrition in the study area

Association between breastfeeding and intelligence, educational attainment, and income at 30 years of age: a prospective birth cohort study from Brazil

Cesar G Victora, Bernardo Lessa Horta, Christian Loret de Mola, Luciana Quevedo, Ricardo Tavares Pinheiro, Denise P Gigante, Helen Gonçalves, Fernando C Barros 2015



Breastfeeding and early white matter development: A cross-sectional study ☆

2013

Sean C.L. Deoni [a,*], Douglas C. Dean III [a], Irene Piryatinsky [a,b], Jonathan O'Muircheartaigh [a,c], Nicole Waskiewicz [a], Katie Lehman [a], Michelle Han [a], Holly Dirks [a]

Human Movement Science
Volume 51, January 2017, Pages 9–16

Full Length Article

Breastfeeding and motor development: A longitudinal cohort

THE JOURNAL OF PEDIATRICS • www.jpeds.com

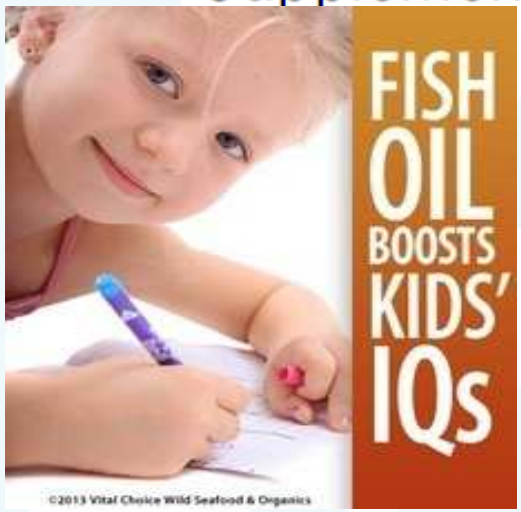
ORIGINAL ARTICLES

(J Pediatr 2016;177:133-9).

Breast Milk Feeding, Brain Development, and Neurocognitive Outcomes: A 7-Year Longitudinal Study in Infants Born at Less Than 30 Weeks' Gestation

Mandy B. Belfort, MD, MPH[1], Peter J. Anderson, PhD[2,3], Victoria A. Nowak, MBBS[4], Katherine J. Lee, PhD[2,3], Charlotte Molesworth, MBiostat[2,3], Deanne K. Thompson, PhD[2,3,5], Lex W. Doyle, MD[2,3,6], and Terrie E. Inder, MBChB, MD[1]

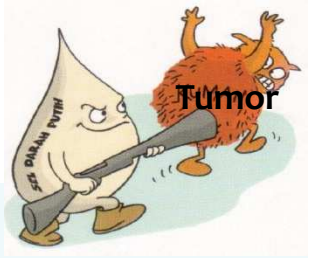
Meta-analysis of Long-Chain Polyunsaturated Fatty Acid Supplementation of Formula and Infant Cognition



AUTHORS: Ahmad Qawasmi, MD,[a,b] Angeli Landeros-Weisenberger, MD,[a,b] James F. Leckman, MD,[a,b] and Michael H. Bloch, MD, MS[a,b]

CONCLUSIONS: LCPUFA supplementation of infant formulas failed to show any significant effect on improving early infant cognition. Further research is needed to determine if LCPUFA supplementation of infant formula has benefits for later cognitive development or other measures of neurodevelopment. *Pediatrics* 2012;129:1141–1149

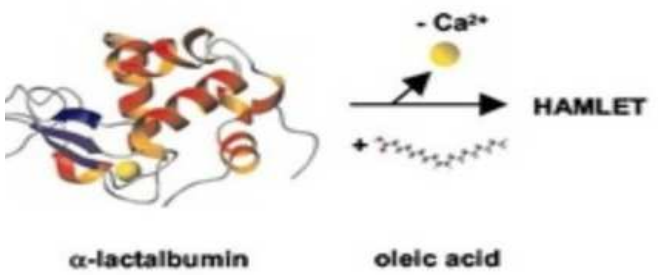
Zat Anti Kanker dalam ASI



HAMLET

Human Alpha-lactalbumin Made LEthal toTumor cells

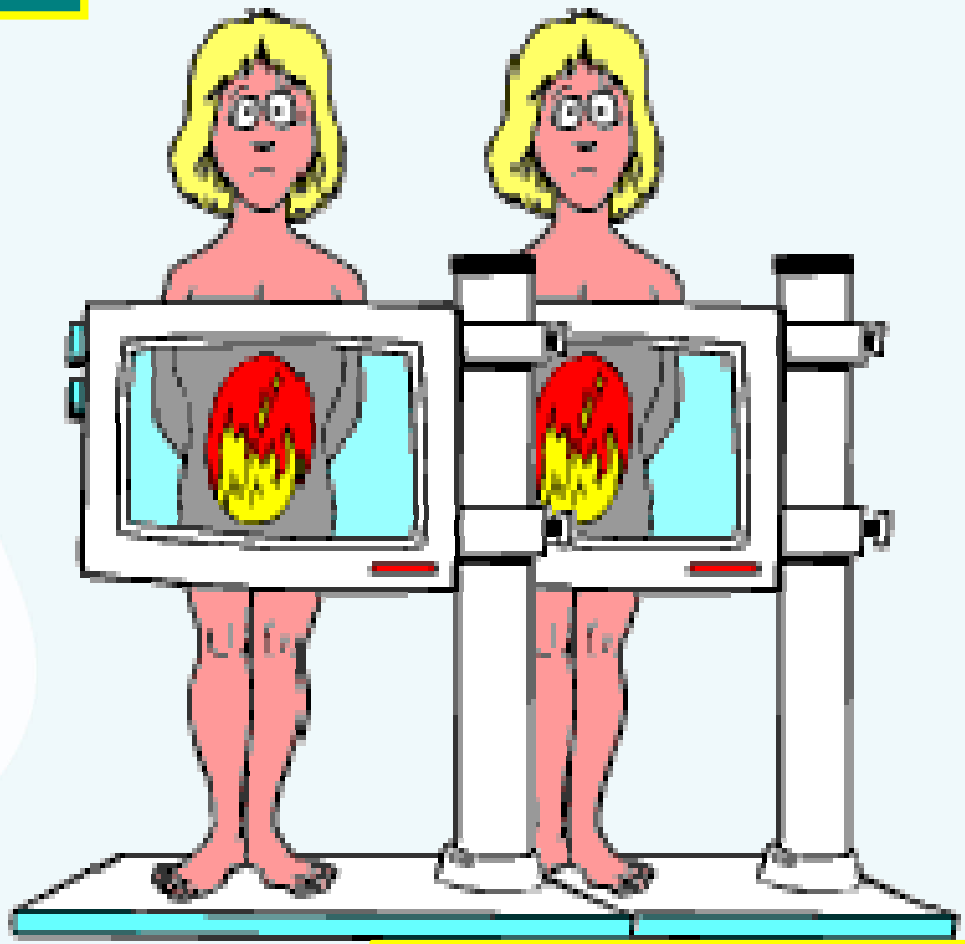
- Alpha-lactalbumin dapat membunuh sel tumor dg cara *apoptotic-like process* (*Catarina Svanborg*, Pettersson-Kastberg 2009)
- Terdapat secara natural dalam ASI (Proc. Natl. Acad. Sci, 1995 & 2000)
- Membunuh 40 jenis sel tumor berbeda (International Journal of Cancer, 2007)
- Mekanisme non-toksik (Cancer Research, 2004)
- Tanpa mengganggu sel sehat (New England Journal of Medicine, 2004)



Meningkatkan Resiko KANKER PAYUDARA

Tiap setahun menyusui resiko menderita kanker payudara yang invasive berkurang 6% (The Lancet Breastfeeding Series 2016).

Meningkatkan Resiko Kanker Indung Telur (Ovarium)

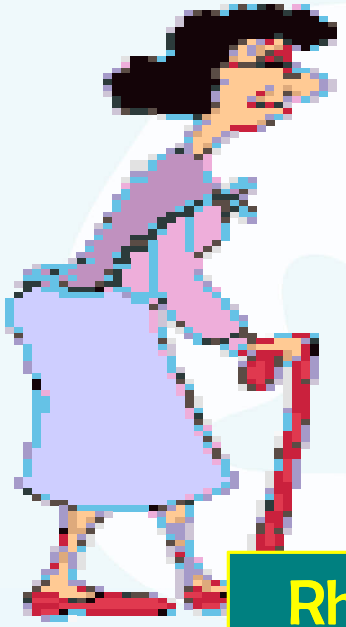


Meningkatkan Resiko Kanker Rahim

Diabetes 24%
Hypertensi 8,8%
Hyperlipidemia, 8,1%
Cardiovascular 9,1%

Obesitas 24%

Depresi post partum (13%)



Alzheimer / Pikun

Rheumatoid Arthritis 7,4%

Osteoporosis13%

Meningkatkan Resiko Menyiksa Menelantarkan Anak meningkat

Menyusui & Memberikan ASIP

MENYUSUI vs ASI PERAH

Menyusui berbeda dengan pemberian ASI perah, hormon dari *skin to skin contact* akan mempengaruhi perilaku pengasuhan ibu dan ikatan batin ibu-anak, membentuk empati maternal lebih kuat (Kim 2011)

3 keuntungan menyusui (Groer 2011)

1. *actual maternal-infant breastfeeding relationship* = ***BONDING***
2. *unique psychobiology of the lactation state* = ***HORMONAL***
3. *biology of human milk* = ***IMMUNE & NUTRISI***

- Walaupun ASI perah lebih baik dari formula , tapi memberikan ASI perah akan kehilangan ***the intimate skin to skin psychobiology of physical act*** saat menyusui yang dapat mengurangi keuntungan PNI

FERLYNDA/JAWA

Menyusui Lima Bayi, ASI Masih Sisa Sekulkas

Menyusui Anak Adopsi

Ny I (28) & Bpk A (33thn)

8-12-16 konsultasi I, diberi Domperidon 4x1 tab dan Jasmine (1 strip)

28-12-16 mulai keluar 1-2 tetes ASI

30-12-16 bayi laki2 lahir , air ketubannya dileletkan di dada ibu adopsi. Bayi dinilai stabil langung di letakkan didada ibu adopsinya

Skin to skin contact selama 2 jam dan menemukan puting saat usia 30menit

- 30-12-16;,saat bayi lahir , ASI 0,75 ml ,disusui sesering mungkin dg tehnik biologic nurturing
- 31-12-16 – usia bayi 2 hari , ASI perah 1ml ; bila disusui diberi suplementasi menggunakan NGT , ASI donor sekitar 10 – 20 cc tiap menyusu
- usia bayi 3 hari ASI perah 5 ml
- Usia 8 hari 30 ml

Usia **1 bln 250 cc dlm 24 jam**

Usia ***1 ½ bln 400 – 450 cc/24 jam***

Capaian ASI eksklusif dikaitkan dengan prevalens stunting di Indonesia

Peningkatan capaian ASI eksklusif dan IMD pada periode 2012-2017 seiring dengan **penurunan prevalens stunting**

BREASTFEEDING Foundation of Life
WABA | WORLD BREASTFEEDING WEEK
1-7 AUGUST 2018

Menyusui Mencegah Stunting dengan mencegah DUA Penyebab Langsung

Terima Kasih