

## The Lactational Amenorrhea Method (LAM): An important option for mothers and infants

LAM can effectively protect a woman from pregnancy if she meets ALL of the following three criteria:

1. Her period has not returned since her baby was born
2. She is breastfeeding only
3. Her baby is less than six months old

She should begin using another method when she no longer meets ALL three criteria.

LAM is a highly effective family planning method for postpartum women and has significant health benefits for both mother and child. Based on breastfeeding, LAM provides natural protection against pregnancy for up to six months after birth and often facilitates the transition to other family planning methods during the postpartum period.

### LAM: A scientifically-proven effective family planning method

In the mid-1990s, multi-country efficacy trials established LAM as a modern family planning method. LAM has since been recognized by the World Health Organization in their international family planning guidance documents.<sup>ii</sup> The Institute for Reproductive Health (IRH) at Georgetown University, along with other partner organizations, have simplified LAM messages and program services to facilitate widespread scale-up of this important family planning option for breastfeeding women.

LAM is over 98% effective up to 6 months postpartum.<sup>i</sup>

### LAM addresses a critical postpartum need

Two-thirds of women have an unmet need for contraception within a year of their last delivery, and nearly 40% desire to avoid pregnancy but do not use a method.<sup>iii</sup> Many postpartum women are concerned about contraceptives affecting breastfeeding, while others believe that breastfeeding alone will provide protection against pregnancy, regardless of how long or how frequently the child is breastfed. It is essential to provide postpartum women with family planning options that will meet their needs and address their concerns.

LAM is appealing to many women because it is a natural method that promotes mother-child interaction and provides optimal infant nutrition and protection against illnesses such as diarrhea and respiratory infection. Including LAM in routine health services accessed by postpartum women also provides an entry point for introducing other family planning methods.

Evidence from Jordan shows that women who use LAM are twice as likely to use family planning at one year postpartum than women who are only breastfeeding.<sup>iv</sup> Experiences from six studies show the majority of LAM users had never previously used a modern method.<sup>v</sup> Widespread integration of LAM into programs can contribute to increased contraceptive prevalence as well as optimal breastfeeding.



## LAM in IRH Programs

IRH works in partnership with local organizations to strengthen LAM services.

### India

In India, a lack of birth spacing options means many women get pregnant again within months after giving birth. To expand spacing options for postpartum women, IRH provides technical assistance for LAM integration to both governmental and NGO family planning and maternal child health programs. IRH has also improved LAM awareness in rural, hard-to-reach areas through community-based programs. A unique training tool for community health workers was developed by using a comic book style job aid which is engaging and easy to understand. Community radio programs have also been launched which disseminate messages about LAM and birth spacing.

### Guatemala

In Guatemala, post-partum women living in rural areas are familiar with the nutritional benefits of breastfeeding but are not aware of its potential as a family planning method. Through training and technical assistance to local organizations and partners, including the Ministry of Health (MOH), IRH is emphasizing key messages such as LAM's three essential criteria (see page 1 side bar) and the importance of timely transition from LAM to other methods. To improve accurate reporting of LAM users, IRH is piloting an instructional brochure for LAM users in one department with the prospect of national scale-up.

### Mali

IRH supports the MOH and partner organizations working in family planning to improve awareness of LAM in Mali. The MOH is integrating the method at the health facility and community level through provider trainings. As a result of advocacy efforts, LAM will be included in the national health information system, and its use will be tracked at the national level. The MOH has led integration efforts at the community level through breastfeeding support groups which promote the importance of healthy timing and spacing of pregnancies and proper infant feeding practices. Female health volunteers visit households to raise awareness among soon-to-be and new mothers about the positive benefits of breastfeeding and the importance of LAM as an effective family planning method.

## Conclusion

To promote the health of mothers and babies, it is important for postpartum women to have access to a spacing method of their choice. In emphasizing timely transition to other family planning methods, LAM encourages the healthy timing and spacing of pregnancies and provides women with a natural way to prevent pregnancy at a critical time. As a global leader in LAM, IRH supports building the capacity of trained providers and community health workers to provide quality LAM services and strives to reposition LAM as a gateway to other modern methods of family planning.

**For more information, contact IRH at [irhinfo@georgetown.edu](mailto:irhinfo@georgetown.edu) or visit our website at [www.irh.org](http://www.irh.org).**

#### REFERENCES

- i Labbok, M. H., Hight-Laukaran, V., Peterson, A. E., Fletcher, V., von Hertzen, H., and Van Look, P. F. (1997.) Multicenter study of the Lactational Amenorrhea Method (LAM): I. Efficacy, duration, and implications for clinical application. *Contraception*, 55(6), 327–336.
- ii WHO family planning cornerstone documents which include LAM: Medical Eligibility Criteria for Contraceptive Use (2004), Decision-Making Tool for Family Planning Clients and Providers (2005), and Family Planning: A Global Handbook for Providers (2007).
- iii Ross, John A. and William L. Winfrey. 2001. "Contraceptive use, intention to use and unmet need during the extended postpartum period," *International Family Planning Perspectives* 27(1): 20-27.
- iv Bongiovanni A. et al. 2005. "Promoting the Lactational Amenorrhea Method (LAM) in Jordan Increases Modern Contraception Use in the Extended Postpartum Period" LINKAGES Project. Washington, DC: Academy for Educational Development.
- v Hight-Laukaran, V., Labbok, M. H., Peterson, A. E., Fletcher, V., von Hertzen, H., and Van Look, P. F. (1997.) Multicenter study of the Lactational Amenorrhea Method (LAM): II. Acceptability, utility, and policy implications. *Contraception*, 55(6), 337–346.

#### LAM Health Benefits

##### For Mothers:

- Supports healthy timing and spacing of pregnancies
- Suckling action immediately postpartum stimulates uterine contractions
- Increases iron level due to no menses
- Enhances mother–baby relationship

##### For Infants:

- Meets complete nutritional needs up to 6 months
- Improves growth and development
- Enhances immune system (less diarrhea and acute respiratory infections)
- Provides vitamin A, proteins, iron, minerals and essential fatty acids



LAM Resources available at  
[www.irh.org](http://www.irh.org):

Resource Package for Service Providers & Trainers

LAM Counseling Guide

LAM Client Card