JORDAN’S FIRST INTERNATIONAL BREASTFEEDING,
Maternal and Child Health Conference in
COLLABORATION WITH THE BREASTFEEDING SUPPORT ASSOCIATION
& THE JORDANIAN SOCIETY OF OBSTETRICIANS AND GYNECOLOGISTS
A STEP TO A BABY FRIENDLY COMMUNITY

Date 6th to 8th October, 2016
Le Royal Hotel
His Majesty King Abdullah II Ibn Al Hussein
His Royal Highness Crown Prince Hussein Bin Abdullah
Welcome

On behalf of the organizing committee we would like to welcome you to this important scientific event to be held in Amman- Jordan, during the dates of 6th to 7th October, 2016 at Le Royal Hotel.

The conference is indispensable for professionals working in the area of breastfeeding and human lactation. A true meeting of the minds that will convey new knowledge, teach crucial skills, and connect you to a supportive caring community.

Participants come from a wide range of backgrounds would include; physicians, nurses, nutritionists, research experts, public health providers, students, educators, midwives, and lactation professionals.

You would also have the opportunity to enjoy all that Jordan has to offer in hospitality, good weather and touristic attractions.

We look forward to see you in Amman.
President of the Conference:

Prof. Raeda Al Qutob, MD, MPH, Drph
Senator, Jordan House of Parliament

Honorary President

Prof. Zaid Kilani - President of Farah Hospital

Scientific Committee:
Dr. Hiyam Shamoon - Chairman
Dr. Asil Jallad - Co-Chairman

Prof. Alan Lucas
Dr. Amjad Jumaiaan
Dr. Fatin Tamim
Dr. Feda’a Al-Asali
Dr. Hamida Shahin
Dr. Hana’a Damrah
Dr. Hanan Najmi
Dr. Hani Ababneh
Dr. Hind Dawani
Dr. Islam Al-Awamleh
Dr. Jamila Abu Dhail
Dr. Julia Abu Asbeh
Dr. Kamil Fram
Dr. Khaldoun Khamaisheh
Dr. Maher Maaita
Dr. Maisa Jallad
Dr. Majeda Al-Jallad
Dr. Mazen Zibdeh
Dr. Osama Abu Salah
Dr. Ramzi Kilani
Dr. Ruwaida Hijazeen
Dr. Rula Qutami
Dr. Vera Amarin
Ms. Suzan Akijian

Organizing Committee:

Dr. Abeer Annab
Dr. Asil Jallad
Dr. Dalia Younes
Dr. Fatin Tamim
Dr. Hana’a Damrah
Dr. Hind Dawani
Dr. Reem Wadi
Dr. Thuraya Al Awwa
Dr. Zeid Rawhi Kilani
Mr. Karam Kilani
Ms. Mary Nazzal
Ms. Tamara Awali
Who Should Attend:

Any health professional or breastfeeding supporter working with breastfeeding families - lactation consultants, gynecologist, immunologists, neonatologists, child health nurses, midwives, paediatric nurses, dietitians, speech therapists, medical doctors, breastfeeding counsellors and community educators and allied health professionals.

Advisory Panel:

Prof. Alan Lucas
Dr. Abdel Elah Sumrein
Dr. Abdullah Bashir
Dr. Abir Ennab
Dr. Amal Al-Daqqaq
Dr. Ehsan Mobaideen
Dr. Fawzi Hamouri
Dr. Hamida Shahin
Dr. Hani Ababneh
Dr. Hashem Al-Momani
Dr. Hind Dawani
Dr. Khaldoun Al-Shareef
Dr. Lamia Alhaj Hasan
Dr. Maha Al-Muhtaseb
Dr. Mahmoud Dabbas
Dr. Mahmoud Jaber
Dr. Mahmoud Kaabneh
Dr. Mahmoud R. Taher
Dr. Majeda Al-Jallad
Dr. Marlin Nino
Dr. Mohammed Tarawneh
Dr. Mousa Al-salah
Dr. Muin Habashneh
Dr. Sulaiman Thabeet
Dr. Zaid Kilani
Dr. Zuhair Kilani
Dr. Falah Abdallah Khalifa
Eng. Walid Al-Khaledi

Main Topics:

1- Breastfeeding, the gold standard of optimal nutrition
2- Situation in Jordan: success stories and challenges
3- Research in Jordan on breastfeeding
4- New legislations on the code of marketing of breast milk substitutes
5- Issues related to breastfeeding practices in Jordan including cultural barriers to breastfeeding
6- Birthing practices in relation to breastfeeding
7- Difficulties in breast feeding: mother and baby complications and management
8- Baby medical conditions in relation to breastfeeding
9- Nutrition of lactating mother
10- Maternal health while breastfeeding
11- Baby Friendly Hospital Initiation, policies, strategies and obstacles
12- Role of healthcare system in supporting breastfeeding mothers
Speakers Names

Prof. Alan Lucas
Dr. Abeer Annab
Dr. Amjad Jmai’an
Dr. Asil Jallad
Dr. Ayed Halaweh
Dr. Basem Al-Zo’ubi
Dr. Faten Tamim
Dr. Fida Al Asali
Dr. Hamida Shaheen
Dr. Hanadi Rimawi
Dr. Hanan Najmi
Dr. Hani Ababneh
Dr. Hind Dawani

Dr. Hiyam Shamoun
Dr. Julia Abu Asbeh
Dr. Maisa Jallad
Dr. Majeda Jallad
Dr. Naheel Jallad
Dr. Mazen Zibdeh
Dr. Ramzi Kilani
Dr. Ruwaida Hijazeen
Dr. Rula Qatami Abujaiber
Dr. Salma Musa Burayzat
Ms. Heba Ebbini
Breastmilk provides the best foundation for a baby’s long term health
Setting the stage for healthy futures

Our infant feeding solutions help provide the best start in life

Insight
Moms know that breastmilk is best for baby, but it’s not always easy to breastfeed.

Benefit
We support moms to make the best feeding choice for mom and baby.

We enable you to achieve your breastfeeding goal from establishing breastfeeding to breastfeeding for longer. Give breastmilk to your baby whatever the circumstances and whoever is looking after your baby.

We provide a range of complementary feeding solutions, with bottle ranges specifically adapted to the unique development needs of babies and moms.

We offer a holistic range of solutions to support you to make and maintain the ideal feeding choice for you and your baby from Day 1. Supported and endorsed by clinical expertise.
Prof. Alan Lucas

Professor Alan Lucas Founded the Child Nutrition research Centre at the Institute of Child Health in London, where he is now professor of Paediatric nutrition. This is the largest centre of its type in Europe devoted to the impact of infant and child nutrition on health. Professor Lucas’ work on nutrition spans the period from fetal life to adolescence though he has a particular interest in the concept of “programming” (a term he coined); he initiated the first intervention trials to test the programming effects of early nutrition on long term health and development. He has over 400 publications in the field of paediatric nutrition and has received a number of awards for his work, including the James Spence medal awarded in recognition of life-time achievement in British paediatrics. He is currently Chair of Paediatric Nutrition at University College London, Fellow of Clare College, Cambridge where he was Director of Medical studies and Fellow of the Academy of Medical Sciences

Dr. Abeer Annab

Experience
- (1985-1987) Senior House Officer at Queen Alia Hospital.
- Since 2013 she is a board member at the Jordanian Society of Obstetrician and Gynecologist.

Scientific Activities
- Member of Jordanian Association of Obstetrics and Gynecology.
- Member of Middle East Fertility Society (MEFS).
- Member of American Society of fertility (ASRM).
- Member of European Society of Human Reproduction and Embryology (ESHRE).
- Vice-president of Jordanian Menopause Society which was established and registered at the Ministry of Interior since 1999 till now.
- Joined Medical Mission at Darfur Sudan for 3 months on 1988 with Ministry of Health.
- Member of Ian Donald School of Radiology for detection of fetal abnormalities.
- Workshops in Hysteroscopy and Laparoscopy.
- Workshops in colposcopy.
- Workshops in fetal and maternal medicine.
- Jordan Representative of Middle East Fertility Society (MEFS) from 2002-2006.
- Newsletter editor for the Middle East fertility society (MEFS) from 2006 till now.
- Active member in King Hussein Cancer foundation of early detection of Breast Cancer
Adlah Hamlan

- Master Degree: Maternity and Newborn Nursing/ Jordan University of Science and Technology.
- Doctoral of Nursing Philosophy (PhD) Maternal and Child Health / Jordan University.
- Certificate of Clinical Nursing Specialist (Maternity and Newborn Nursing / Jordan Nursing Council
- 2010-2014 Coordinator of Family Planning Services at Royal Medical Services and Liaison Officer of National Reproductive Health Strategy in Royal Medical Services with collaboration of Higher Population Council.
- Now: Lecturer/ Princess Muna Collage of Nursing and joined the Development and Research Directorate at Jordanian Nursing Council.

Dr. Amjad Jumai’an

Brigadier General Dr. Amjad Adnan Khalil Jumai’an MD, JBPsysch,(MRCPsysch), DCPsysch, DCAPsysch, Post-Graduate Certificate in Child & Family Mental Health
Senior Consultant Psychiatrist
Clinical Doctorate in Child and Adolescent Psychiatry
Advisor for the General Secretary of the ministry of social development
The Royal Medical Services of Jordan

Dr. Asil Jallad

Obstetrician and Gynecologist
Arab and Jordanian board in Ob/ Gyn – 2014
Private Practice- Amman/ Jordan

Asil has finished her training at the Specialty Hospital in Amman and has been practicing general obstetrics and gynecology since then has been a dedicated volunteer in many international medical organizations throughout the years including Operation Smile, Save the Children, Salam Cutlural Museum, American Heart Association and USAID raising awareness regarding health in general and women and children in specific in Jordan and abroad.
Has a special interest in raising awareness and providing community support in breastfeeding locally and regionally through organizing public events and talks for mothers in general
Dr. Ayed Halaweh

Dr Ayed Halawa is an American Board Certified obstetrician & Gynecologist. Received board degree in 2002.

Dr Ayed graduated from University of Damascus, School of Medicine where he obtained degree in Medicine in 1992.

Dr Ayed started his training in Obstetrics & Gynecology at the University of Nevada School of Medicine. After finishing his training, he started working with Dr Amir Nasseri in his clinic in Las Vegas Nevada in 2000, at the same time, he worked as Clinical Assistant Professor at the University of Nevada School Of Medicine.

At the end of 2002, Dr Ayed moved to his home country, Jordan, where he started private practice and served as Residency Director at one of the largest private hospitals / Jordan Hospital for 5 years and continued to be a teaching staff member til September of 2015.

As part of his training and daily practice, Dr Ayed manages high risk pregnancies along with normal pregnancies, routine & complicated gynecological surgeries including vaginal surgeries and advanced laparoscopic surgeries.

Dr Ayed has joined his friend, Dr Amir Nasseri, in his practice in Dubai / N9NE MEDICAL INSTITUTE in October 2015 where he enjoys taking care of patients from Dubai and the region.

Dr. Basem Al-Zo’ubi

President of Union of Arab Pediatric Societies
President of Jordan Pediatric Society
Member of the stand committee of the International Pediatric Association
Consultant pediatric endocrinologist, Prince Hamzah Hospital, Amman, Jordan
Lecturer and clinical teacher, faculty of Medicine at the Hashemite University, Jordan

Pediatric Board, Jordan 1996
Pediatric Endocrinology Fellowship, KHMC, Amman, 2004-2006
Clinical fellowship, UCLA, Los Angeles, USA, 2007-2008
Fellowship, UCL, London, UK, 2010
Dr. Faten Tamim

Co-Founder and President of The Breastfeeding Support Association, Maternal and Child Health Specialist, and Lactation Consultant

Born: 1969
Birth Place: Kuwait

Faten Tamim is co-founder and president of The Breastfeeding Support Association, the first of its kind in Jordan. As well she is the founder of the first private breastfeeding support clinic in Amman, Jordan. Her interest to get the IBLCE rose from her background as a breastfeeding trainer of trainers for 7 of 18 years at Ministry of Health (1990 – 2008). She worked on training of health care professionals in 26 MCH centers and one Maternity and Pediatric Hospital (2000 – 2007) and got the accreditation of Al-Mafraq Maternity and Pediatric Hospital as a Baby Friendly Hospital on November 2007. Tamim got her BSc in Midwifery and MSc in public health/ maternal and child health from Jordan University of Science and Technology and did her PhD in Nutrition and dietetics from The University of Jordan. Tamim main core of interest is infant and young child nutrition and specifically breastfeeding. She has multiple community involvement in supporting and educating the community in several areas like parenting, nutrition, school health, and breastfeeding via cultural centers, associations, public and private schools.

She is a wife and a mother of 3 precious children, who were all born premature, but never ever given neither formula nor bottles at all and they were exclusively breastfed for their first 6 months of life, extended breastfeeding up to 2 years and had a healthy growth and development.

Dr. Fida Al Asali

• Membership of the Royal College of Obstetricians and Gynaecologists
• Member of faculty planning and sexual health ( DFSHR)
• Jordanian Board in Obstetrics and Gynaecology
• Higher Specialisation in Obstetrics and Gynaecology

I graduated from The university of Jordan, following that I completed an academic postgraduate training program from The University of Jordan. Afterward I passed the Jordanian Medical Council Board examination. Then I moved to the United Kingdom and joined the National Health Service. I am a member of the Royal College of Obstetricians and Gynaecologists (MRCOG). Currently I am an assistant professor and consultant in Obstetrics and Gynaecology, Faculty of Medicine, The Hashemite University.

My main areas of interest are family planning and sexual reproductive health.
Dr. Hamida Shaheen

Consultant, Pediatrician & Neonatologist

Dr. Hamidah Shaheen is a pediatric consultant with over 30 years of experience in Pediatrics and Neonatology.

Qualifications:
Fellow of the Royal College of Pediatrics-Edinburgh (FRCP-UK), Member of the Royal College of Pediatrics-Edinburgh (MRCP-UK)
Jordan Board of Pediatrics
Board Examiner for the Jordan Medical Counsel.
External Examiner for Jordan University.
Member at the Jordanian Pediatrics Society
Member of Jordanian Neonatology Society
Operates a private clinic in Al-Khaldi Street for outpatient care as well as inpatient care in Farah Hospital, Al Khalidi Hospital, Jordan Hospital and Arab Medical Center and others.
Formerly Head of Pediatric Department in Islamic Hospital for 8 years and founded the hospital’s Neonatal Care Unit.
Worked in several reputable hospitals in the United Kingdom, Qatar and Saudi Arabia.

Continuous Education:
Attending and participating in international and local pediatric and neonatal conferences related to the latest developments in the field.

Dr. Hanadi Rimawi

Consultant Paediatrician, initially a general pediatrician with interest in pediatric clinical nutrition and for the past few years, has dedicated her work to serve and establish this sub speciality at the Queen Rania Children’s Hospital. an active and integral part of the metabolic and works closely with the gastroenterology department and other disciplines to provide clinical and evidence based nutritional management.

Dr. Hanan Najmi, MD, IBLCE

Clinical specialty: community Medicine-Maternal and Child health/Breastfeeding consultant
Clinical specialty: International Board of Certified Lactation Consultant, (IBCLC)
Medical school: University of Jordan, Amman, Jordan
Membership: BF committee in Jordan, IBFAN, CEAN
Experience: Program Management, MCH doctor and MCH supervisor, Training Consultant in (Reproductive health, Breastfeeding, Lactational Amenorrhea Method, Family planning, Counseling, Infant and young child feeding, child and woman abuse)
Conference speaker
Working now as:
Head of woman’s health department and BF program/MOH
Dr. Hani Ababneh

Education & Certification: Post doctoral work at Reverse Western Case University Hospital of Cleveland Ohio USA. Fellowship in clinical immunology & Allergy. Jordanian Board in clinical immunology - Jordan Medical Council. Greek board in clinical immunology and Allergy. University of Athens - Greece. MD - University of Athens - Greece.

Senior Consultant of immunology, allergy & infection control at royal medical services Jordan medical association.

Current post: Head of allergy & immunology Clinic at Al Istiklal Hospital. President of the Jordanian society of allergy & immunology - Jordan medical association.

Senior Consultant of immunology, clinical pathology and Allergy at Al Istiklal Hospital.

Head of the infection control committee at Al Istiklal Hospital.

Infectious disease and Antibiotics consultant at Al Istiklal Hospital.

Editor in chief of Al Istiklal Medical journal

Previous posts:
President of the Jordanian Greek physician's society - JMA.
Vice president of the society of clinical pathology and Diagnostic Medicine.
Major General Doctor, Head of the immunology specialty at Princess Iman Research Center - King Hussein medical center - RMS.
Head of the infection control committee at Queen Alia hospital.
Director of the Jordanian hospital in Fallojeh - Irak.
Head of the infection control committee at Prince Rashed hospital.
Vice president of the national committee of olive allergy.

General congress Secretary of the first Greek Jordanian medical congress.
President of the first international congress of allergy & immunology.
President of the second international congress of allergy & immunology.

PROFESSIONAL SOCIETIES:
1- Member of Jordan Medical Association.
2- Member of Jordan Society of Pathology and Diagnostic Medicine.
3- Member of Jordan Greek physician's society.
4- Member of the Jordan society for allergy & immunology.
5- Member of EAACI and ACCAI.

PUBLISHED PAPERS: many papers and congress participation found on line in the internet or upon request.
Ms. Heba Ebbini

Heba has more than 5 years of experience in programme coordination. Heba has joined Save the Children Jordan in December 2012 as a nutrition Counselor before assuming responsibilities as a an officer , to be responsible for the coordination of Infant and Young child program technical functions and activities that implementing in Jordan. Heba has started her career with Education sector and occupied many positions related to community health and psychological counseling , she’s also a certified trainer on employability and soft skills and a facilitator on negotiations and capacity building.

Heba has received many courses related to the Humanitarian Core Skills , and Health in Complex Humanitarian Emergencies, to gain the Knowledge and understanding of the humanitarian System and Standards, all of this enable her to Provide effective, innovative and strategic leadership to the staff & partners at community level, and Take the lead in building the capacity for staff and community’s members in health interventions through training and awareness.

Heba has received her education Jordan from Jordan University of science and technology, studied Biotechnology and Genetics Engineering Subject.

Dr Hind Dawani

Currently consultant pediatrician in the private sector in Amman, with focus on well-baby clinic and helping mothers to breastfeed.

Worked for 4 years as Resident Advisor for the LAM (Lactational Amenorrhea Method) Project in Jordan. Project was implemented in cooperation between Ministry of Health and Academy for Educational Development, and focused on providing training courses on breastfeeding and LAM to primary health care specialists at MCH centers all over Jordan.

Also worked for 9 years as the Director of the Institute of Child Health and Development /Noor al-Hussein Foundation. Emphasis of work was to provide a model MCH center for the country.

Islam Ali Al-Awamleh

- Obstetrics and Gynecology Consultant
- Private Obs. & Gyn. Clinic
- Fellow of the American College of Surgeons (FACS).
- Associate member of the Royal College of Obstetricians & Gynaecologists.
- Jordanian Board in Obstetrics & Gynaecology.
- Member of the European Society of Human Reproductive and Embryology (ESHRE).
- Member of the American College of Surgeons.
- Member of the Jordanian Society of Obstetricians & Gynaecologist.
- Member of the Jordanian Society for Fertility and Genetics.
- Member of the Jordanian Medical Society.
Dr. Hiyam Shamoun

- Neonatal ICU Training at St Joseph’s Hospital. New Jersey. USA 2002
- Courses & Training in Quality improvement in 2006

Senior Consultant in General Pediatrics
Head of all Pediatric Department at Royal Medical Services, Formerly
- Member at Jordanian Medical Association
- Member at Pediatrics Association Committee
Clinical teacher at medical college in both Jordanian & Hashemite university
Had lot of Publications in pediatrics field

Dr. Julia Abu Asbeh

Dr Julia Abu Asbeh obtained medical degree from the University of Jordan. She did her pediatric residency at Jordan University Hospital, and obtained a Master Science degree in pediatrics followed by MRCP from UK. She is a certified Neonatal resuscitation program regional trainer, and also has a great interest in supporting and promoting breastfeeding thus obtained her IBCLC in 2007. Dr Abu Asbeh has extensive experience in both pediatrics and neonatology in Jordan, UK and the United Arab Emirates.

Dr. Maisa Jallad

Dr. Maisa Jallad is an American board certified pediatrician and neonatologist
Dr. Maisa finished her medical school from the University of Jordan and 4 years of pediatric residency at the Jordan university hospital, she moved to the United States of America where she did pediatric residency and fellowship in neonatology at the Children Hospital of New Jersey. Currently she is practicing in her private clinic in Amman.
Dr. Majeda Jallad

Majeda Jallad
MD, Jordanian and Arab board
Senior Consultant Obstetrics and Gynecology
Private Practice, Amman- Jordan

Majeda Jallad is a senior consultant in Obstetrics and Gynecology at her private clinic in Amman- Jordan and director of the Infertility unit and teaching department at The Specialty Hospital/ Obs & Gyne training program (Arab and Jordanian boards in addition to MRCOG). She’s also currently head of Ob/ Gyne department at Istishari Hospital.

Dr. Jallad previously held the position of head of obstetrics and gynecology department at the Specialty Hospital for several years in addition to being a member of the examining board of the Jordan Medical Council. She also regularly participates in medical student graduation exams in Jordan.

Dr. Jallad’s practice mainly covers high- risk obstetric care in addition to a special interest in adolescent- related gynecological issues, Urogynecology and Vaginal Surgery. Being a highly busy private practitioner, she deals with a large number of cases of atypical Endomeriosis presenting with disturbing adolescent complaints and infertility.

She frequently serves in local medical meetings and conferences as a speaker and a tutor in several residency teaching programs in Jordan.
Mary Nazzal-Batayneh

Barrister (English Bar), human rights activist, Founder of Landmark Hotels Company.
Mary has been chosen as one of Forbes Most Powerful Arab women for consecutive years running. Her work was featured as a Forbes cover story.

Mary was also chosen as a Young Global Leader of the World Economic Forum as the only Jordanian in the class of 2013. Young Global Leaders are chosen based on their commitment of their time and talent towards making the world a better place.

She is the founder of Landmark Hotels which owns and manages Landmark Amman.

She has been a political activist for Palestinian rights for over 15 years in Europe and the US and is a founding member of the boycott, sanctions, and divestment movement (BDS) in Jordan. She was the chair of the Palestine Legal Aid Fund which seeks to support legal action to hold Israel accountable for crimes against the Palestinian people.

Mary completed a BA in political science from Columbia University and law degrees from SOAS, University of London, the College of Law London and the Inns of Court School of Law London.
Mary serves on several Boards including the Palestine Children’s Relief Fund (PCRF), the Royal Film Commission of Jordan, and Al Shabaka, the Palestinian Policy Network.

She is also a volunteer brand ambassador for the Social Enterprise Project (SEP) which produces high-end fashion accessories by female artists living in the Gaza refugee camp in Jordan.

Dr. Naheel Jallad

Paediatrician
Jordanian board/ Arab board eligible

Naheel has just completed her training at the Royal Medical services in general paediatrics. Has a special interest in neonatology and seeking to complete her higher training.
She is a certified PALS and NRP provider and has participated in several workshops and will participate in training our current and future mothers in proper first aid practices.
Dr. Mazen Zibdeh

Senior consultant Obstetrician and Gynecologist, Gardens Hospital, Amman.
Obtained Diploma from the Royal College of Physicians of Ireland 1979, and MRCOG (Membership of the Royal College of Obstetricians and Gynecologists) London 1980, and FRCOG (Fellowship of the Royal College of Obstetricians And Gynecologists) London 1994 and has obtained certificate on Educational Planning and Evaluation and a certificate of Research Methodology from King Faisal University and Harvard University. Was an assistant professor and a chairman of the Obstetrics and Gynecology Department at the Jordan university of science and technology (JUST) during 1987-1989. Dr Mazen was a senior consultant and chairman of the Obstetrics and Gynecology Department and chairman of the Assisted Reproductive Unit at the Islamic Hospital Amman between 1989-2006. Currently he is the medical director and senior consultant in OB.GYN at the Gardens Hospital in Amman. Dr. El-Zibdeh is a member of many scientific and professional societies in Jordan and outside. And was a member of the scientific committee of the Jordan medical council, and Jordan board examiner from 1994-2008. President of the Jordanian Society of Obstetricians and Gynecologists, during 2001-2003. A Member of FIGO (International Federation of Obstetricians and Gynecologists) advisory panel on Maternal and Perinatal Health and obstetrics since October 2001 – April 2006 and a Member of the scientific and education Committee of the international Federation of fertility societies (IFFS) 2007-2010. And a Member of the higher consultatory committee of the Jordan medical council 2012.
Dr. Ramzi Kilani

Dr. Kilani is currently the director of Neonatology at Memorial Hospitals in Illinois (Greater Saint Louis region). He completed his residency in Pediatrics at Jordan University Hospital in 1987 and had his Master degree in Pediatrics as well as the Jordanian Board of Pediatrics. He joined Christ hospital and medical center in Oaklawn, Illinois-Rush University to complete residency in Pediatrics. He was awarded the senior resident award in 1992. He had his American Board of Pediatrics in 1992-current. He then had his training fellowship in neonatal Perinatal Medicine and developmental Biology at Washington University school of Medicine Saint Louis Childrens Hospital in Saint Louis Missouri in 1992-1995 and had his American Board of Neonatology in 1995-current. He worked as an Assistant professor of Pediatrics at King Saud University in Riyadh 1996-2000 and at Washington University School of Medicine 2000-2006 and was an Attending Neonatologist at Saint Louis Childrens Hospital in the BJC system Hospitals.
He then joined the UMKC at Childrens Mercy Hospital in Kansas City as and Associate professor of Pediatrics till the end of 2009. A Fellow of the American Academy of Pediatrics. He served as a member of the Board of directors of the Missouri chapter of the AAP and was the medical director of the breast feeding support project in Missouri in 2004-2009. In 2010, he decided to return to Jordan to upgrade the NICU at Istishari and Farah Hospitals and improve the outcomes of neonates. He conducted over 20 courses in the NRP program and awarded the NRP certificate to over 300 candidates nurses and physicians. He also started a breast feeding support program and established a position for a lactation specialist at Istishari hospital. He started the well start international lactation management courses in Jordan. He practiced as a senior consultant pediatrician and Neonatologist at Farah and Istishari Hospitals in Amman 2010-2015. Dr. Kilani moved back to USA in 2016 and currently is the Director of Neonatology at Memorial Hospitals in Illinois. He had been invited to present in many national and international medical conferences. He has over 30 scientific publications including publications on breast feeding. He also served as a reviewer to several scientific journals. He also seerved as a medicolegal consultant in USA.

Dr. Osama Abu Salah

MRCPCH, ARAB BOARD OF NEONATOLOGY, BOAED OF PEDIATRICS
Is a consultant neonatologist at King Hussein Medical Centre. After graduating from the UK in 1991, he pursued a career in pediatrics where he had trained in Jordan, the UK and New Zealand. Main interest are neonatal respiratory disorders, neonatal encephalopathy as well as infant nutrition.
Dr. Rula Qatami Abujaber

Rula is the mother of 3 kids; a girl and a twin boy and girl. Her birth and parenting experience with her first born in Canada led her to work on a certification as a birth and postpartum doula through DONA (Doulas of North America) international, and she has been working with pregnant and birthing women since then.

Upon relocating back to Amman in June 2010, Rula has been providing birth and parenting courses to expecting families and Breastfeeding consultations to new mothers, as well as early childhood First Aid & CPR workshops for parents and preschool caretakers.

Her medical background as a Pharmacist allows her to educate women about their birthing options and provides them with information about the medical interventions.

Since May 2011, she has been preparing and presenting a weekly pregnancy and early childhood segment as the parenting consultant for Roya TV in Jordan and she just started preparing and presenting a new show about motherhood and baby health on Alaan TV from Dubai.

In October 2012 Rula gave birth to boy and a girl twins, her knowledge and experience helped her to have a smooth and normal delivery and supported her motherhood techniques to take the challenge of raising 3 kids.

Rula’s motherhood experience has enriched her knowledge and qualifies her further to understand women’s needs during pregnancy, birth & beyond.

Dr Salma Burayzat

Pediatric gastroenterologist hepatologist and nutritionist French board in pediatric gastroenterology hepatology and nutrition D.I.U Assistant professor in Al-Hashmiet University /Department of pediatrics
Ms. Suzan Akijian

Suzan Akijian graduated from Surrey University, United Kingdom with an honours degree in Nutrition in 2004. She went on to complete a masters degree in Clinical Nutrition from University of Glasgow in 2005, where she was awarded distinction in her final project entitled “Nutrition in Inflammatory Bowel Disease”. As part of her degree, she collaborated with University of Westminster and was awarded an honours degree in her work experience project studying the difference in nutritional status of primary school children in public schools as compared to private schools in Jordan. She moved to Jordan in 2005 to join the World Health Organisation in a project to increase exercise and eliminate smoking in Jordan. Following that in 2006, she was appointed as a clinical nutritionist in the National Center for Diabetes Endocrinology and Genetics where she worked hands-on for four years with patients with special interest in Diabetes, kidney disease and gestational diabetes amongst other diagnoses. In 2010, she opened her private practice where she continued to treat patients with different illnesses including obesity, kidney disease, cardiovascular disease, dyslipidaemia, inflammatory bowel disease and nutritional support in patients with swallow impairment like motor neuron disease. Being a mother of two and with extensive research and studying, pre-natal and post-partum nutrition became the new avenue to challenge. Currently, as part of her work as a clinical nutritionist, she raises awareness in post-partum health, working closely with pregnant and nursing mothers and children’s health.
painless

take a break from your loan payments during maternity

Terms and conditions apply
Drinking independently is a **key step in a child’s development**
Setting the stage for healthy futures

Our toddler drinking solutions support the path to **independent drinking**

*Insight*  
Moms want their children to learn to drink independently, easily and without mess.

*Benefit*  
We support moms with convenient solutions that follow the development pace of their child and enable independent drinking anytime, anywhere.

We help children make key steps towards independent drinking, enabling an easier transition from breast or bottle to an open cup. Different solutions with teats, soft and hard spouts, straw and 360° drinking rims help develop new drinking skills alongside motor and swallowing skills.

Our premium quality solutions are developed with ergonomic designs that are convenient for you and support toddlers’ development to independent drinking, learning from health care professionals.
Scientific Program
الرائدة في صناعة التأمين في السوق الأردني
عشرون عاماً. تروي قصة نجاح

نشكر تقبلكم ونعدكم بتقديم الأفضل لمستقبلكم.
Registration: 8:00- 9:00 am

Day One: October 6th, 2016 (Thursday)
Session One 1:00 pm - 3:00 pm

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Target</th>
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<tbody>
<tr>
<td>01:00 - 01:15</td>
<td>Community support of breastfeeding/ success stories by Save the Children representative. Ms. Heba Ebbini</td>
<td>View the current situation and legislations in Jordan compared to international situation and the accomplishments achieved in the community</td>
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<td>01:15 - 01:30</td>
<td>Medical and cultural barriers/ challenges to successful breastfeeding Dr. Faten Tamim</td>
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<td>01:45 - 02:00</td>
<td>Legislations on the code of marketing of breast milk substitutes, Dr. Basem Al-Zo'ubi</td>
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<td>02:00 - 02:15</td>
<td>Social influences on breastfeeding Dr. Hamida Shaheen</td>
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<tr>
<td>02:15 - 02:45</td>
<td>Case studies &amp; Abstract presentations Dr. Adlah Hamlan</td>
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<tr>
<td>2:45 - 3:00</td>
<td>Break</td>
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</table>

Day One: October 6th, 2016 (Thursday)
Session Two 3:00 pm - 4:15 pm

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Target</th>
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</thead>
<tbody>
<tr>
<td>03:00 - 03:15</td>
<td>Breast problems: Inverted nipples, Cracked and sore nipples, Engorgement, Obstructed ducts, Mastitis, Abscess, Candida Dr. Hanan Najmi</td>
<td>Introducing the obstacles faced by mothers during breastfeeding and how to approach them- Mainly directed to nurses and staff in direct contact with a nursing mother</td>
</tr>
<tr>
<td>03:15 - 03:30</td>
<td>Supply problems: Low or high milk supply, Dr. Faten Tamim</td>
<td></td>
</tr>
<tr>
<td>03:30- 03:45</td>
<td>Chronic maternal diseases: thyroid problems, diabetes, problems, herpes simplex, TB, hepatitis B/C, HIV, Dr. Asil Jallad</td>
<td></td>
</tr>
<tr>
<td>03:45 - 04:00</td>
<td>Baby Friendly Hospitals, Are they of value? Dr. Julia Abu Asbeh</td>
<td></td>
</tr>
<tr>
<td>04:00 - 04:15</td>
<td>how to implement a breastfeeding and baby-friendly community, baby - friendly hospital initiative (international and Jordan perspective) Dr. Hanan Najmi and Dr. Ramzi Kilani</td>
<td></td>
</tr>
<tr>
<td>04:15-05:00</td>
<td>Reception</td>
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</tbody>
</table>
Day One: October 6th, 2016 (Thursday)
Opening ceremony

<table>
<thead>
<tr>
<th>5:00-6:00</th>
<th>Opening ceremony</th>
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</thead>
<tbody>
<tr>
<td>05:00 - 05:02</td>
<td>Jordanian royal anthem</td>
</tr>
<tr>
<td>05:02 - 05:05</td>
<td>Quran Kareem آية الرضاع سورة البقرة</td>
</tr>
<tr>
<td>05:05-05:10</td>
<td>Welcome for the patronage, International speaker, local Speakers and guests</td>
</tr>
<tr>
<td>05:10-05:15</td>
<td>President of the conference speech</td>
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<tr>
<td>05:15-05:30</td>
<td>International speaker Dr. Alan Lucas speech</td>
</tr>
<tr>
<td>05:30-05:40</td>
<td>Inspirational video (Featuring Breastfeeding Mothers Talking about their experience) Brief about the conference Thank you notes for the breastfeeding association, main Sponsors and supporters</td>
</tr>
<tr>
<td>05:40-05:55</td>
<td>Jordanian kids show</td>
</tr>
<tr>
<td>05:55</td>
<td>Exhibition Opening</td>
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Day Two: October 7th, 2016 (Friday)
Session One 9:00 am - 11:25 am

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Target</th>
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</thead>
<tbody>
<tr>
<td>09:00-9:20</td>
<td>Benefits of breast-feeding for infant and mother Dr. Hind Dawani</td>
<td></td>
</tr>
<tr>
<td>09:20-10:00</td>
<td>new perspectives in breastfeeding , Prof. Alan Lucas</td>
<td>Identifying the magnitude of breastfeeding for mother and baby</td>
</tr>
<tr>
<td>10:00-10:30</td>
<td>comparison between human milk and formula milk and its effects on babies and moms, Dr. Ramzi Kilani</td>
<td></td>
</tr>
<tr>
<td>10:30-10:55</td>
<td>Infant nutritional needs during first 2 years of life Dr. Hanadi Rimawi</td>
<td></td>
</tr>
<tr>
<td>10:55-11:15</td>
<td>Breast feeding in prevention of diseases Dr. Ruwaida Hijazeen</td>
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</tr>
<tr>
<td>11:15-11:25</td>
<td>Discussion</td>
<td></td>
</tr>
<tr>
<td>11:25-12:00</td>
<td>Coffee break &amp; Friday prayer</td>
<td></td>
</tr>
</tbody>
</table>
### Day Two: October 7th, 2016 (Friday)
#### Session Two 12:00 pm - 2:15 pm

**Pediatric issues related to breastfeeding**  
**Moderators:** Dr. Sameer Faouri, Dr. Jareer Halazon

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Presenter(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:00-12:45</td>
<td>novel adventure into breastmilk feeding in preterm infants</td>
<td>Prof. Alan Lucas</td>
</tr>
<tr>
<td>12:45-01:00</td>
<td>Jaundice and hypoglycemia in regards to breastfeeding</td>
<td>Dr. Osama Abu Salah</td>
</tr>
<tr>
<td>01:00-01:15</td>
<td>Sucking difficulties</td>
<td>Dr. Maisa Jallad</td>
</tr>
<tr>
<td>01:15-01:30</td>
<td>Weight gain and growth charts of a breastfed baby</td>
<td>Dr. Hiyam Shamoon</td>
</tr>
<tr>
<td>01:30-01:45</td>
<td>Breast milk and immunity</td>
<td>Dr. Hani Ababneh</td>
</tr>
<tr>
<td>01:45-02:05</td>
<td>Debate: How Long Should Breastfeeding Last</td>
<td>Dr. Fida Al Asali, Islam Awamleh, and Dr. Salma Burayzat</td>
</tr>
<tr>
<td>02:05 - 02:15</td>
<td>Discussion</td>
<td></td>
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<tr>
<td>02:15-03:00</td>
<td>lunch break</td>
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</table>

### Day Two: October 7th, 2016 (Friday)
#### Session Three 3:00 pm - 4:30 pm

**Obstetric issues related to breastfeeding**  
**Moderators:** Dr. Fawaz Khazaleh, Dr. Islam Awamleh

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<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Presenter(s)</th>
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</thead>
<tbody>
<tr>
<td>03:00-03:15</td>
<td>Role of antenatal classes and maternal education</td>
<td>Rula Qatami/ Birth and Beyond</td>
</tr>
<tr>
<td>03:15-03:30</td>
<td>Breastfeeding in relation to mode of delivery</td>
<td>Dr. Majeda Jallad</td>
</tr>
<tr>
<td>03:30 -03:45</td>
<td>benefits of immediate skin- skin contact</td>
<td>Dr. Abeer Annab</td>
</tr>
<tr>
<td>03:45- 04:00</td>
<td>Tandem Breastfeeding</td>
<td>Dr. Asil Jallad</td>
</tr>
<tr>
<td>04:00- 04:15</td>
<td>Impact of postpartum psychological conditions and psychotropic medications on breastfeeding</td>
<td>Dr. Amjad Jumaiaan</td>
</tr>
<tr>
<td>04:15- 04:30</td>
<td>surgical procedures during lactation</td>
<td>Dr. Ayed Halaweheit</td>
</tr>
<tr>
<td>04:30 -05:00</td>
<td>Coffee Break</td>
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</tbody>
</table>
Day Two: October 7th, 2016 (Friday)
Session Four 5:00 pm - 6:00 pm

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
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<tbody>
<tr>
<td>05:00-05:15</td>
<td>Optimal maternal nutrition during lactation and supplementation</td>
</tr>
<tr>
<td>05:15-05:30</td>
<td>Role of galactagogues in augmenting milk supply by Dr. Majeda Jallad</td>
</tr>
<tr>
<td>05:30-06:00</td>
<td>Closing ceremony</td>
</tr>
</tbody>
</table>

Day Three: October 8th, 2016 (Saturday)

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
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<tbody>
<tr>
<td>09:00 - 09:15</td>
<td>Introduction for the workshops and presenters</td>
</tr>
<tr>
<td>09:15 - 09:45</td>
<td>Comparison between human milk and formula milk and its effect on</td>
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<tr>
<td></td>
<td>babies and moms by Prof. Alan Lucas</td>
</tr>
<tr>
<td>09:45 - 10:45</td>
<td>Breastfeeding education (Breastfeeding Support Association)</td>
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<tr>
<td></td>
<td>Dr. Faten Tamim/ Dr. Hanan Najmi/</td>
</tr>
<tr>
<td></td>
<td>- Early Initiation of Breastfeeding</td>
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<td></td>
<td>- Breastfeeding challenges and management</td>
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<tr>
<td></td>
<td>- Maternal nutrition during lactation</td>
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<tr>
<td></td>
<td>Appropriate latch/positioning in breastfeeding by Dr. Thuraya Al Awwa</td>
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<tr>
<td></td>
<td>Coffee break and snacks 10:45 - 11:00</td>
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<tr>
<td>11:00 - 11:45</td>
<td>Newborn sleep (The happiest baby on the block) by Dr. Rula Qatami;</td>
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<tr>
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<td>a certified instructor from the happiest baby on the block institute,</td>
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<td></td>
<td>- 5 steps to put your baby to sleep (5 Ss)</td>
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<tr>
<td>11:45 - 12:00</td>
<td>Mother Diet during Breastfeeding, Ms. Suzan Akijian</td>
</tr>
<tr>
<td>12:00 - 12:30</td>
<td>Introduction of solids to babies by Prof. Alan Lucas</td>
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<td></td>
<td>Lunch 12:30 - 01:30</td>
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<tr>
<td>01:30 - 02:30</td>
<td>Infant/Child first aid and CPR, Rula Qatami/Dr. Naheel Jallad</td>
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<td></td>
<td>- Infant and child choking first aid and CPR with hands on practice.</td>
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<td></td>
<td>- First aid for bleeding and wounds, fractures, burns, animal and</td>
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<td></td>
<td>insect bites, fever, mouth, and dental injuries, poisoning and</td>
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<td></td>
<td>electrical shock.</td>
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<tr>
<td>02:30 - 02:45</td>
<td>Take-home messages from the conference By Rula Qatami/Asil Jallad</td>
</tr>
<tr>
<td>02:45 - 03:00</td>
<td>Bank Al Etihad Sponser Presentation</td>
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<tr>
<td></td>
<td>Coffee break 03:00 - 03:15</td>
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<tr>
<td>03:15 - 04:00</td>
<td>Mother and baby bonding and Attachment, Dr. Amjad Jumaiaan</td>
</tr>
<tr>
<td>04:00 - 04:20</td>
<td>Going back to work and breastfeeding by Rula Qatami (Support of</td>
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<td>working mother in the community, Ms. Mary Nazzal-Batayneh</td>
</tr>
<tr>
<td>04:15 - 04:45</td>
<td>Supplementary products to support you in your motherhood journey</td>
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<tr>
<td>04:45 - 05:00</td>
<td>GIG Sponser Presentation</td>
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<tr>
<td>05:00 - 05:15</td>
<td>Questions and Evaluation Closing and certificates</td>
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</tbody>
</table>
Day two 7 October 2016
From 3-5 pm
Parallel Workshop for health care professionals

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<tr>
<th>Time</th>
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<th>Target</th>
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<tbody>
<tr>
<td>3:00 - 3:15</td>
<td>Risks of not breastfeeding by Dr. Faten Tamim</td>
<td>Residents, Nurses, Midwives, Medical students</td>
</tr>
<tr>
<td>3:15 - 3:30</td>
<td>Positioning and attachment by Dr. Faten Tamim</td>
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<tr>
<td>3:45 - 4:00</td>
<td>Evaluation of a breastfeed by Dr. Hanaa Damra</td>
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<tr>
<td>4:00 - 4:15</td>
<td>Early hospital routines by Dr. Thurayya Awwa</td>
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<tr>
<td>4:15 - 4:45</td>
<td>Common breastfeeding problems, case studies Dr. Hanan Najmi</td>
<td></td>
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<tr>
<td>4:45 - 5:00</td>
<td>Breast milk expression and storage by Dr. Thurayya Awwa</td>
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</table>
Help mothers to give their babies the best start in life during World Breastfeeding Week 2016 and beyond

Feeding our future #feedingourfuture
Abstract
Breast problems: Inverted nipples, Cracked and sore nipples, Engorgement, Obstructed ducts, Mastitis, Abscess, Candida
Dr. Hanan Najmi

Mastitis is an inflammatory condition of the breast which may or may not be accompanied by infection. It is mostly caused by poor positioning and attachment, inadequate drainage of the breast, sore nipples, blocked ducts and sudden changes in the baby’s feeding pattern. Symptoms may start very suddenly without warning.
Non- infectious mastitis requires additional expression of milk after a feed, infectious mastitis should be treated with systemic antibiotics, analgesia and removal of milk and continued breastfeeding, without effective removal of milk non-infectious mastitis progresses to infective mastitis and then to formation of an abscess. Candida thrush «yeast» should be diagnosed correctly, and the latch on of the baby should be evaluated. If the mother is not in pain and the baby is not bothered there is no need for treatment.
The drug of choice for treating candida thrush is nipple ointment gentian violet, if gentian violet hasn’t worked completely after 7 days, it won’t work.

Community support of breastfeeding/ success stories by Save the Children representative. Ms. Heba Ebbini

SCJ Abstract on the Jordan First’s International Breastfeeding, Maternal and Child Health Conference
Presenter’s Name: Heba Ebbini
Presenter’s Job Title/ Agency: Infant and Young Child Feeding Program Officer /Save the children Jordan

Although breastfeeding is relatively common in Jordan, only a third of babies and toddlers are breastfed for the length of time prescribed by international regulations. Hospitals routines have to encourage and support the initiation and sustaining of exclusive breastfeeding based on WHO infant and young child feeding practices recommendations, and to apply the “Ten Steps to Successful Breastfeeding” WHO/UNICEF. Paediatricians, nurses and midwives play a critical role in their practices and communities as advocates of breastfeeding and to Introduce «Kangaroo Mother Care» (KMC) to improve care for preterm infants, thus should be knowledgeable about the health risks of not breastfeeding, the economic benefits to society of breastfeeding, and the techniques for managing and supporting the breastfeeding dyad, and to address the importance of detailing how mothers can maintain lactation in the workplace and the benefits to employers who facilitate this practice.
Session Objectives:
1. Introduce the audience and give them a general idea on the Challenges faced in Supporting breastfeeding in Private hospitals.
2. Brain Storm on possible solutions to improve the type of support providers
Session Overview:
Save the children Jordan, funded by UNICEF, and in coordination with MoH has been working on protecting, promoting and supporting breastfeeding in Jordan for the past 3 years, and through this session, we would like to share key challenges, opportunities and recommendations we have touched upon during our work with a number of private hospitals.
Legislations on the code of marketing of breast milk substitutes
by Dr. Basem Al-Zo’ubi

Breast milk is the ideal food for newborns and infants. It gives infants all the nutrients they need for healthy development. Breast milk is ready to use and it is free. It is safe and contains antibodies that help protect infants from many diseases such as gastroenteritis and pneumonia.

Infants who were given breast milk are also less likely to have obesity or diabetes in adulthood.

A WHO pooled analysis indicates that breastfeeding could prevent:
Over three fourths of deaths in early infancy
37% of deaths during the second year of life.

A cohort study revealed that non-breastfed children, compared to those exclusively breastfed, have
14 times the risk of dying from diarrhea,
3.6 times the risk of dying from pneumonia,
2.5 times the risk of dying from other infections.

For the previous considerations the Health Assembly of WHO adopted in May 1981 the International Code of Marketing of Breast-Milk Substitutes to contribute to the provision of safe and adequate nutrition for infants, by the protection and promotion of breast-feeding, and by ensuring the proper use of breast-milk substitutes, when these are necessary, on the basis of adequate information and through appropriate marketing and distribution.

Transferring this code to legislation is very important to give it the power of law, the step we did in Jordan in July 2015.
In this presentation I will review the main articles in this legislation.

Supply problems: Low or high milk supply
Dr. Faten Tamim

Low or high milk supply
Increased or decreased milk production is common in a lactation consultant’s daily practice. Whereas underproduction is widely discussed in the lactation literature, overproduction of breast milk is not. Symptoms of hyperlactation can occur in both mother and child and may lead to pathology in both. Full drainage and block feeding offers an adequate way to normalize milk production and treat symptoms in both mother and child. However, every mother’s greatest fear “is my baby getting enough?” especially in the early stages of breastfeeding. In fact, women who have stopped breastfeeding will most commonly say it was because they “didn’t have enough milk”. The concern beyond sufficient milk supply is infant’s weight gain, growth and development. Proper assessment of maternal supply will help identifying the magnitude of the issue and can lead to proper management and support sufficient supply. But nearly all mothers do produce enough milk for their babies. Low milk production has several causes and treatments. More research is needed to be done to understand why some women will easily produce much more milk than needed and why for some it is so hard to regulate milk production to meet the needs of their children.
Medical and cultural barriers/ challenges to successful breastfeeding
Dr. Faten Tamim

Challenges and barriers to successful breastfeeding
Although the value of breastfeeding is well understood, there are many barriers that can make it difficult for mothers to start and continue breastfeeding successfully. We need to keep providing educational, medical, technical and moral support to mothers who are struggling with breastfeeding. However, to truly facilitate breastfeeding, we need to break down these barriers so that all families and all babies can benefit from the health benefits as well as economic benefits of breastfeeding. The societal barriers to breastfeeding have a much more significant impact on breastfeeding rates than the medical or technical issues. Research shows that many mothers select their feeding choice early in pregnancy or some time before conception. This means breastfeeding promotion should occur before women become pregnant and early in the antenatal period.

Chronic maternal diseases: thyroid problems, diabetes, problems, herpes simplex, TB, hepatitis B/C, HIV
Dr. Asil Jallad

Social influences on breastfeeding
Dr. Hamida Shaheen

Breastfeeding is a gift from God to mothers, but there are several influences that interfere with a mothers decision to complete breastfeeding.

As we all know, the rate of breastfeeding in Jordan is still below expectations. Many mothers are really willing to breastfeed their babies, especially their first born. But they face alot of obstacles that hinder their decision, so they end up giving up breastfeeding and rapidly introduce formula.

The aim of my presentation is to address these issues and highlight the social and psychological factors influencing a mothers' decision to breastfeed.
Case studies & Abstract presentations
Dr. Adlah Hamlan

Perceived Barriers of Breastfeeding among Jordanian Mothers
Adlah M. Hamlan RN. Ph.D. CNS (Maternal and child health)

Background: Breastfeeding is a health behavior that is considered an ideal method of feeding and nurturing infants. However, there is a reduction in the rate of breastfeeding despite the multiple breastfeeding initiatives.
Purpose: The purpose of the study was to identify the perceived barriers of breastfeeding among Jordanian mothers.
Methods: A cross sectional descriptive design was used. The study recruited a convenient sample of 500 Jordanian mothers who gave birth to a healthy full-term infant, and who did not initiate breastfeeding post-delivery or discontinued the process before six months of infant's age. Mothers of infants with serious illnesses were excluded from the study. The data were collected by a self-reported measure, the Breastfeeding Perceived Barrier Scale. The measure consists of 22 items covering maternal factors, infant factors, and socio-environmental factors. The measure has internal consistency reliability (alpha coefficient = 0.73).
Results: The study participants reported total mean of breastfeeding barrier (84.0 ± 8.3) out of 110- as the total score of the barriers- the results indicated high level of breastfeeding barriers. Also, the results showed high level of barriers in the maternal factor (3.6 ± .51), infant factor (4.0 ± .42), and socio-environment (4.0 ± .52). Breast physical problems, mothers’ lack of knowledge, infant refusal of breast milk, and working environment are the most perceived barriers.
Conclusion: The study revealed that Jordanian mothers have relatively high level of breastfeeding perceived barriers.
Keywords: Breastfeeding, Perceived barriers, Jordanian mothers.

Baby Friendly Hospitals, Are they of value?
Dr. Julia Abu Asbeh

Lecture Title: Baby Friendly Hospitals, Are they of value?

Objectives:
- Talk about some historical aspects of breastfeeding.
- Describe breastfeeding prevalence.
- List some of the benefits of breastfeeding.
- Define the baby friendly hospital initiative.
- Look at the evidence - Do baby friendly Hospitals increase the duration and/or exclusiveness of breastfeeding?

how to implement a breastfeeding and baby- friendly community, baby - friendly hospital initiative (international and Jordan perspective) by Dr. Hanan Najmi/ Dr. Ramzi Kilani
Benefits of breastfeeding for infant and mother

Dr. Hind Dawani

Human milk is the biologic norm for infant nutrition; it also contains distinct non-nutritive bioactive components that promote survival and healthy development. Thus breastfeeding is more than just feeding and ingestion of milk; it offers an irreplaceable health advantage for both baby and mother.

A bulk of research on components of breast milk has been conducted; however, it has to be pointed out that the effect of breastfeeding on health outcomes is mainly based on observational studies and PROBIT study.

Benefits of breastfeeding for child and mother will be discussed. Highlighting the short-term benefits for babies (the reduction in infant mortality, protection from infectious diseases - such as gastroenteritis, otitis) to the long-term benefits (higher performance in intelligence tests, reduced risk of being overweight and being less likely to develop type 2 diabetes).

As for the benefits for the mother – the short-term benefits (better postpartum uterine contraction and decrease of blood loss, the lactational amenorrhea and delay of pregnancy, beside early returning to pre-pregnancy weight). The long term benefits (reduction in both breast and ovarian cancer, decrease incidence of type 2 diabetes). Also not to forget the equally important positive psychological impact on both mother and baby.

The bulk of scientific evidence on benefits of breastfeeding puts us health providers under the obligation of working hard to support and promote breastfeeding

New perspectives in breastfeeding by Prof. Alan Lucas
Comparison between human milk and formula milk and its effects on babies and moms

Dr. Ramzi Kilani

Director of Neonatology at Memorial Hospitals in Illinois, USA

Extensive research using improved epidemiologic methods and modern laboratory techniques documents diverse and compelling advantages for infants, mothers, families, and society from breastfeeding and use of human milk for infant feeding. These advantages include health, nutritional, immunologic, developmental, psychologic, social, economic, and environmental benefits.

Human milk is species-specific, and all substitute feeding preparations differ markedly from it, making human milk uniquely superior for infant feeding. Exclusive breastfeeding is the reference or normative model against which all alternative feeding methods must be measured with regard to growth, health, development, and all other short- and long-term outcomes. In addition, human milk-fed premature infants receive significant benefits with respect to host protection and improved developmental outcomes compared with formula-fed premature infants.

Breast milk may provide longer-term benefits than previously thought, extending even into adulthood. A study found that in mice, stem cells received during infancy from a mother’s breast milk were present in several tissues all around the body, including in the brain, blood, kidneys, and pancreas, throughout life.

Infant nutritional needs during first 2 years of life by
Dr. Hanadi Rimawi

Nutrition in the First 2 years of Life.

Globally, 171 million children do not have the opportunity to reach their full potential due to the physical and mental effects of poor nutrition in the earliest months of life. In the first 2 years of life, there is a Rapid body growth and brain development. and Inadequate intake of nutrients might cause irreversible changes. In this talk, there is a discussion of the nutritional requirement adequate for optimal growth and development in the first 2 years of life.

Breast feeding in prevention of diseases by Dr. Ruwaida Hijazeen

Novel adventure into breastmilk feeding in preterm infants by Prof. Alan Lucas

Jaundice and hypoglycemia in regards to breastfeeding by
Dr. Osama Abu Salah

Jaundice is a normal phenomena in most newborn infants. Breast fed infants, even when breast feeding is well managed, are at higher chance of becoming jaundiced in the early days of life. the duration of this jaundice in breast fed babies is often prolonged and benign. the challenges are to identify those at risk and to examine the adequacy and the proper establishment of breast feeding. herein, is a discussion of the epidemiology, pathogenesis, presentation and clinical approach to this very common presentation.
Sucking difficulties
Dr. Maisa Jallad

Sucking difficulties in neonates are a common medical problem that may impact breastfeeding success.
Oral feeding requires coordination of sucking, swallowing, and breathing; it is the most complex sensorimotor process a newborn infant has to undertake. Disruption of these coordinated functions can result in oral feeding difficulties which leads to increased risk of apnea, bradycardia, failure to thrive, oxygen desaturation, or aspiration. Sucking disorders in neonates and infants are complex and can have multiple causes.

Weight gain and growth charts of a breastfed baby by
Dr. Hiyam Shamoon

Breast Feeding & Growth Charts:
Breastfeeding is the biological normal & baby's weight should be evaluated based on that, rather than comparison to formula fed babies.

Babies are genetically 'programmed' to be on the thin or the heavy side, according to family history. Exclusive breastfeeding is recommended up to 6 months of age, with continued breastfeeding along with appropriate complementary foods up to two years of age or beyond. Healthy breastfed infants tend to grow more rapidly than their formula-fed peers in the first 2-3 months of life and less rapidly from 3 to 12 months.

There are differences in growth patterns between breastfed and formula fed babies after the first 3 months as well: From the 4th to the 12th month, breastfed babies tend to gain weight more slowly (even after solids) and are leaner at one year – breastfed babies consume 20% less milk than formula fed babies during this time, and their growth is perfectly normal.

The World Health Organization (WHO) released a new international growth standard statistical distribution in 2006, which describes the growth of children ages 0 to 59 months. The CDC recommends that health care providers:

• Use the WHO growth standards (revised in 2006) to monitor growth for infants and children ages 0 to 2 years of age in the U.S.
• Use the CDC growth charts to monitor growth for children age 2 years and older in the U.S.

Not all doctors are aware of the updated charts & the Z-scores (standard deviation) (SD) scores. Because many doctors are not aware of this difference in growth, they see the baby dropping in percentiles on the growth chart and often come to the faulty conclusion that the baby is not growing adequately. At this point they often recommend that the mother (unnecessarily) supplement with formula or solids, and sometimes recommend that they stop breastfeeding altogether. The new standards establish breastfed infants as the model for normal growth and development. In February 2012, the American Academy of Pediatrics & The US Centers for Disease Control also, in their policy stated that “Infant growth should be monitored with the World Health Organization (WHO) Growth Curve Standards from 0-2 y, to avoid mislabeling infants as underweight or failing to thrive.
Breast milk and immunity
Dr. Hani Ababneh

Hani Ababneh MD,JB,FEAACI
Breastmilk contains many factors that help to support a baby’s immune system. Breastfed babies are less likely to get infections than are formula-fed babies. A mother passes on lots of proteins, fats, sugars and cells that work against infections when she breastfeeds her baby (antibodies, white blood cells, lactoferrin, lysozyme, oligosaccharides). Human breast milk contains a variety of immunologically active substances, including immunoglobulins, antimicrobial enzymes, and various leukocytes. It contains anti-inflammatory and tolerance-promoting compounds, such as polyunsaturated long-chain fatty acids, platelet-activating factor (PAF) acetyl hydrolase, and interleukin-10 (IL-10). A variety of agonists and antagonists of the innate immune responses, including CD-14 and factors that modulate toll-like receptor (TLR) signaling, have been identified.

All classes of immunoglobulins can be detected in milk, over 90% are IgA (10–100-fold higher than in serum); IgM and IgG are less abundant IgD and IgE can also be detected. Human colostrum contains more than 1 g/l IgA, and during the first year of lactation, concentrations are maintained at approximately 0.5 g/day.

By contrast, less than 20% of maternal serum immunoglobulin is IgA; most are IgG.

Debate: How Long Should Breastfeeding Last
Dr. Hind Dawani

How long should breast feeding last?
(Maternal)
The benefits of breast feeding to the general health of the mother and child are well established. Immediately after the delivery, breast feeding reduces the risk of post-partum haemorrhage. In the short term, it delays the return to fertility and in the long term, it reduces type-2 diabetes and breast, 4, uterine5 and ovarian cancer. Studies have also found an association between early cessation of breastfeeding and post-natal depression in mothers. Furthermore, the risk of osteoporosis and rheumatoid arthritis are also reduced, in addition to its importance in postnatal weight loss.

Islam strongly recommends breastfeeding. Allah Almighty says in the holly Quran: “Mothers shall breastfeed their children for two whole years, for those who wish to complete the term (2:233)”. In reminding people to treat their parents with kindness, the Quran says: “His mother carried him, in weakness upon weakness, and his period of weaning is two years” (31:14). In a similar verse, Allah Almighty says: “His mother carried him with hardship, and gave birth to him in hardship. And the carrying of the child to his weaning is a period of thirty months” (46:15).

Whilst breast feeding is strongly recommended in Islam, it also recognizes that for various reasons, parents may not be able or unwilling to complete the recommended two years. The decision about breastfeeding and the time of weaning is expected to be a mutual decision by both parents, in consideration of what is best for their family. The Holly Quran says: “If they both (parents) decide on weaning, by mutual consent, and after due consultation, there is no blame on them” (2:233).
The duration of breastfeeding is a personal decision for each family. The World Health Organization, the National Health and Medical Research Council in Australia, the American Academy of Pediatrics (AAP) and UNICEF recommend exclusive breastfeeding (i.e. no other fluids or solids) for six months and then continued breastfeeding combined with solid foods for 12-24 months or as long as mother and baby desire.

References
6. AJCN. Breastfeeding and ovarian cancer risk: a meta-analysis of epidemiologic studies. Luan, Qi-Jun Wu, Ting-Ting Gong, Emily Vogtmann, Yong-Lai Wang, and Bei Lin
Dr. Hind Dawani

WHO and UNICEF recommend exclusive breastfeeding up to six months of age, with continued breastfeeding along with appropriate complementary foods up to two years of age and beyond.

Many studies concluded that the risk of all-cause mortality was higher in the predominantly, partially or non-breastfeeding than the exclusively breastfeed babies in the first six months of life. Also studies show that children 6-11months and 12-23 months of life had 1.8- and 2.0 fold higher risk of mortality respectively when compared to those who were breastfed. The findings underscore the importance of optimal breastfeeding practices during infancy and early childhood.

During the debate the following question will be addressed since it always comes up: “Is breast milk beneficial to baby after the first six months of life?”. Besides, the benefits of breastfeeding for each stage of early childhood will be discussed.

Role of antenatal classes and maternal education by
Rula Qatami/ Birth and Beyond

The role of antenatal classes and maternal education

Women who receive prenatal education on breastfeeding, by enrolling in childbirth education classes, showed higher breastfeeding success, exclusive breastfeeding and better maternal perception of the infant.
Postive feedback and better control by mothers who received the prenatal education due to preparation on what to expect during breastfeeding and better perception on the newborn behavior.
Less postpartum depression due to peer support and continuous help by instructor in addition to postpartum services, classes, and reunion gatherings.
Breastfeeding education classes strengthen the evidence of breastfeeding benefits for the mom and baby, hence prolonged exclusive breastfeeding.

Appropriate latch / positioning in breastfeeding

To assess the correct position, attachment and effective suckling in the breastfeeding of infants as practiced by mothers.
Breastfeeding mothers with correct latch and positioning reported less nipple pain and higher breastfeeding success.

Infant / child first aid and CPR
Commitment to improving maternal / infant, early childhood health and wellbeing through First aid and CPR workshop.
Breastfeeding in relation to mode of delivery
Dr. Majeda Jallad

The mode of delivery has a statistically significant impact on infant feeding practices. There is a proportionally increasing trend of bottle feeding with the increasing rates of caesarean section.

It is currently recommended that starting breastfeeding within the first hour of birth, and exclusively for the first six months of life; continuing for up to two years of age or beyond. The concerns with caesarean section are delayed initiation, less skin-skin contact, less opportunities to room-in with baby, more supplementation with formula and more pain needing more medication. Some might also apply to difficult instrumental deliveries and prolonged labours.

Benefits of immediate skin-skin contact by Dr. Abeer Annab

Breastfeeding during pregnancy and tandem nursing
Dr. Asil Jallad

The American Academy of pediatrics recommends exclusive breastfeeding for the first 6 months of life and continuing breastfeeding until 2 years of age.

What if pregnancy occurs during that time?
Studies have shown that breastfeeding in a normal, low risk pregnancy has no adverse outcome on pregnancy, mother and baby and so is NOT contraindicated as long as the woman is counseled to maintain a balanced diet. The hormonal changes produced by breastfeeding in pregnancy resemble those associated with sexual intercourse and are considered physiological.

Tandem nursing is defined as nursing siblings who are NOT twins
Some toddlers would want to continue nursing regardless of the changes of the taste and quantity of mother’s milk post-delivery.

Women are advised to maintain a balanced diet and hydration to keep up with the demands of supplying both.

Main benefit of tandem breastfeeding is psychological to support older child into accepting new member of the family.

Effect of medications and anesthetic drugs on early initiation of breastfeeding by Dr. Basem Halaseh
Impact of postpartum psychological conditions and psychotropic medications on breastfeeding
Dr. Amjad Jumaiaan

Psychiatric disorders are usually common in the first and third trimesters. Unwanted pregnancy is associated with anxiety and depression. Mental health disorders are more common in those with a previous history of psychiatric disorder and with women who has major medical problems.

Pharmacokinetics is usually altered during pregnancy. Added to that, information on safety of psychotropics during pregnancy and breast feeding are mainly derived from small studies.

In this presentation I will discuss the impact of mental health disorders during pregnancy on the relation between the infant and his mother. Also I will present updated guidelines on the principles of prescribing in breast feeding.

Surgical procedures during lactation Dr. Ayed Halaweh

Surgeries are not rare during pregnancy and breastfeeding, however the safety of surgical procedures, anesthesia, and different medication used around the surgeries, is of a great concern to patients and health care providers, consulting with an experienced obstetrician to council the patient and her family regarding those risk is of paramount importance, and to decide on the timing of the surgery, choice of anesthesia and medications used to minimize the risk of fetal exposure.

Optimal maternal nutrition during lactation and supplementation by Dr. Mazen Zibdeh

Role of galactogogues in augmenting milk supply
Dr. Majeda Jallad

Lactation is initiated with parturition, expulsion of placenta and falling Progesterone levels in the presence of very high Prolactin levels.

Galactogogues are medications or other natural substances believed to assist the initiation, maintenance or augmentation of the rate of milk synthesis.

Evaluation of the evidence-based studies and emerging information regarding effectiveness and potential serious side effects of some galactogogues have resulted in a recent shift of recommendations regarding these drugs and herbs.

Pharmaceutical galactogogues are all Dopamine Antagonists and will increase Prolactin levels, Metoclopramide and Domperidone (Motilium) are examples. Herbals, foods and beverages have been used throughout history in many cultures but most of them have not been scientifically evaluated but traditional use suggests safety and efficacy.

Some worldwide practiced recommendations based upon current evidence will be presented.

Comparison between human milk and formula milk and its effect on babies and moms by Prof. Alan Lucas
Breastfeeding education (Breastfeeding Support Association)
Dr. Faten Tamim/Dr. Hanan Najmi

- Introduction to breastmilk vs. formula
- Early days after birth
- Breastfeeding challenges and management
- Maternal nutrition during lactation

Appropriate latch/positioning in breastfeeding by Rula Qatami

- Newborn sleep (The happiest baby on the block) Rula Qatami; a certified instructor from the happiest baby on the block institute
- 5 steps to put your baby to sleep (5 Ss)

Motherhood is a precious experience and a long living feeling of joy. Parents, society and doctors, as well as friends, rarely share with us the hardship and challenges of having a crying infant during the first months. A challenge, that grows beyond distress, sympathy and lack of confidence about being a good mom. It impacts the life of mothers as well as the rest of the family. Sleep deprivation and self-doubt, premature breastfeeding cessation as well as other marital discord, child abuse, postpartum depression, SIDS, overtreatment for GERD; all are results of the challenges infants impose on mothers.

The Happiest Baby is a novel approach based on “calming reflex” (a relative off-switch for crying) activated by imitating the sensory environment of the womb (via the “5S’s” - swaddling, side stomach, shushing, swinging, sucking. It is believed that teaching baby calming skills prenatally would increase parents’ level of confidence in child rearing ability. The technique followed focuses on boosting mothers’ confidence by providing them with applicable techniques, myths and actions that actually work, and help calm your infant but also enhance the mother’s power and proactive role in making the motherhood experience a smoother one for herself, her infant as well as the rest of her family.

Happiest Baby classes are taught by over 2000 certified professionals in hospitals, clinics and departments of health across the United States, including programs specifically designed to increase breastfeeding continuation rates.

Mother Diet during Breastfeeding
Ms. Suzan Akijian

Breast-feeding is well known in its advantages to the infant as well as the nursing mother. Its role is vital in protection against childhood infections and its long-term association with increased intelligence and reduction in illnesses like obesity and Diabetes. It is also imperative to recognise its benefits to the nursing mother, not only psychologically in promoting a bond with her child but also medically in decreasing the risk of breast cancer and possibly ovarian cancer.

In my lecture, I will be discussing the nutrients required by the mother to optimise her breast-feeding journey. I will also highlight the food groups necessary to ensure adequate nutrition for nursing mothers as well as ensuring babies meet their need for healthy development.
Introduction of solids to babies by Prof. Alan Lucas

Infant / Child first aid and CPR by Rula Qatami / Dr. Naheel Jallad
- Infant and child choking first aid and CPR with hands on practice.
- First aid for bleeding and wounds, fractures, burns, animal and insect bites, fever, mouth
And dental injuries, poisoning and electrical shock.

Take- home messages from the conference By Rula Qatami/ Asil Jallad

Mom and Baby bonding
Dr. Amjad Jumaiaan

Attachment occurs when infants remains close to certain people such as mother, father
or a substitute. On the other hand, bonding refers to the mother’s feeling for her infant.
Both can occur immediately after birth. Attachment process takes about six months to be
fully recognized. Bonding is stronger if there is skin to skin contact as soon as possible after
delivery. However, this concept is much undecided.

In this presentation I will discuss different theories of attachments and I will talk about
how humans develop a representational model of their babies while in utero and how this
thinking may be as important as tactile contact.

Going back to work and breastfeeding by Rula Qatami (Support of working mother in the
community by Ms. Mary Nazzal)
برنامج أمان ليدي

البرنامج التأميني الأشمل في الأردن لتغطية سرطان الثدي بـ 3 دنانير شهرياً فقط

إنتي بأمان

لأنك ذكيه... لا تحتار!

توجي حياتك بالقرار الأفضل والخيار الأفضل، وتميزي برنامج "أمان ليدي" الذي يقدم لك التغطيات والمنافع التالية:

- خدمة العلاج السنوي... 3 دنانير.
- إمكانيات دائرة أولي في المستشفى المعتمدة لدى الشبكة الطبية لشركة جي جي جي الشرق العربي التأمين.
- تغطية جميع العمليات الجراحية الإيجابية والموضوعية للثدي بعد استكمال العلاج.
- تغطية كاملة للعلاج الشامل للرعاية النفسية المتعلقة بالدراية.
- تغطية كاملة للزائرات التشخيصية المنزلية.
- تغطية كل ما يلزم من العلاجات المخبرية والتشخيصية، التصوير الطبي، الرنين المغناطيسي، العناية الحيوية، الأدوية،...
- تغطية العلاج الشامل للعلاج الشامل للرعاية النفسية، العلاج الشامل للرعاية النفسية، العلاج الشامل للرعاية النفسية، العلاج الشامل للرعاية النفسية، العلاج الشامل للرعاية النفسية،...
- تغطية تكاليف المرافق في المستشفى وسيارة الإسعاف.
- تغطية استبدال الطبيب العام وفي حال الحاجة من خلال مركز التأمين الطبي.
- مستشفىلاحق الطبي في بوسطن - الولايات المتحدة الأمريكية.
- في حالة الضرورة، يمكننا توفير العلاج في المملكة، سيتم تقديم العلاج في مستشفىلاحق الطبي في بوسطن - الولايات المتحدة الأمريكية.

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Nutrition and healthy eating are **key building blocks for future health**

Setting the stage for healthy futures

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**Our feeding preparation solutions help create effortless, nutritious feeds**

**Insight**
Parents want to be sure their baby gets the right nutrition for healthy growth, which means constant effort and extra steps, for which busy parents just don’t have time.

**Benefit**
Our feeding preparation solutions whether for infants or toddlers, support parents to confidently deliver the right nutrition to their growing babies.

We ensure that nutrients are retained, whether from precious breast milk, or in carefully selected fresh ingredients.

Being a parent can be hectic, so our innovative solutions are designed to deliver food in the most simple, convenient way.

From cooking and serving, to re-heating and cleaning, our sterilizers, bottle warmers and solid food solutions help you perfectly prepare feeds to support the whole feeding journey.

Supported by professional advice throughout, we guide you in developing healthy eating habits.
General Information

Conference venue
Le Royal Hotel Amman

Registration
Registration starts on 5th May, from 8:00 am to 17:00 pm and from 8:30 am to 16:00 pm daily thereafter.

Registration Fees Include
• Congress bag.
• Programme book
• Opening ceremony and reception
• Admission to the exhibition.
• Meals.
• Coffee breaks

Badges
• The participants name badges serve as an admission pass to all scientific sessions, the exhibition and the congress area.
• Participants are kindly requested to keep their name badges displayed at all times during the congress.

Mobile phones
Delegates are kindly requested to switch off their mobile phones during the sessions.

Weather
Weather average temperature in October

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Currency
One Jordanian Dinar is equivalent to 1.4 USD.

Wifi available free on site
Confident and relaxed parenting leads to a happier and healthier child
Setting the stage for healthy futures

Our monitoring solutions enable empowered, confident parenting

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Parents know that safe sleep is critical to baby’s development, but they cannot always be with their baby at all times.

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We allow parents to be sure that their baby is sleeping well, and safe and secure at all times.

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Our monitoring solutions provide you with a reliable connection to your baby, with the reassurance you need at all times, empowering you to be a confident parent. Our full range of monitors, caters to different parenting needs, enabling parents to always be connected to their child both at home and on the go.