Exclusive Breast feeding: a long way to go

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Introduction

Exclusive breast feeding for at least six months is required for optimal growth and development of child. It improves cognitive function in future life. These children have better academic grads in future life [1]. Although advantages of breast milk is well documented since last century [2]. WHO has recommended exclusive breastfeeding for 6 months is the optimal way of feeding infants. Thereafter infants should receive complementary foods with continued breastfeeding up to 2 years of age or beyond. To enable mothers to establish and sustain exclusive breastfeeding for 6 months, WHO and UNICEF recommend: [3]

- Initiation of breastfeeding within the first hour of life
- Exclusive breastfeeding – that is the infant only receives breast milk without any additional food or drink, not even water
- Breastfeeding on demand – that is as often as the child wants, day and night

- No use of bottles, teats or pacifier.

WHO and UNICEF launched the Baby-friendly Hospital Initiative in 1992, to strengthen maternity practices to support breastfeeding.

The foundation for the BFHI are involved in implementation of the Ten Steps to Successful Breastfeeding described in Protecting, Promoting and Supporting Breastfeeding: a Joint WHO/UNICEF Statement. It includes involvement of all staff members of hospital in care of newborn including Physician, Nursing staff & other supportive staff.

In spite of WHO & UNICEF efforts exclusive breast feeding is still a dream in both developed and developing countries. In India According to National Family Health survey- 3 only 58.3% infant receive exclusive breast feeding for 4 months & 46.4 % up to 6 months of the age [4]. About one fourth of these newborn receive feeding within half an hour & 57 % receive additional drinks other than breast milk [4].

Keywords: Exclusive breast feeding, Breast milk, WHO
Trends in other part of world are same. In most of the countries rate of exclusive breast feeding is low [5]. Exclusive breast feeding for six months have many long term advantages that include prevention of cardiovascular diseases and obesity [6, 7]. Children who are exclusively breastfed for the first six months of life are 14 times more likely to survive than non-breastfed children at the age of 5 years [8].

Some of the well known studies and review found that a history of breastfeeding was associated with a reduction in the risk of acute otitis media, non-specific gastroenteritis, severe lower respiratory tract infections, atopic dermatitis, asthma (young children), obesity, type 1 and 2 diabetes, childhood leukemia, sudden infant death syndrome (SIDS), and necrotizing enterocolitis [9]. For maternal outcomes, a history of lactation was associated with a reduced risk of type 2 diabetes, breast, and ovarian cancer [9]. Although effect of breast feeding on maternal pre pregnancy weight and osteoporosis is not clear [9].

Among postmenopausal women, increased duration of lactation was associated with a lower prevalence of hypertension, diabetes, hyperlipidemia and cardiovascular disease [10].

Sina OJ et al in his article of this issue has studied about breast feeding practices in two ethnic group of Nigeria. He found that mothers face significant challenges in a bid to exclusively breast feed their babies. Efforts should be made to involve other bodies such as government, religious and civil bodies in campaign programs on EBF [11].

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