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Breast-Feeding Requires Consideration

Pregnancy is a busy, stressful time for everyone in a household, not just for new moms-to-be.

In addition to the normal preoccupation with name-picking, nursery-decorating, and worrying about the unknown, parents must consider whether to breast-or bottle-feed the future family member. From a pediatrician's perspective, the choice should be an easy one to make. Breast feeding is the "gold standard" against which other choices should be measured.

The Benefits of Breast-feeding

There are so many advantages to breast-feeding it is hard to list them all.

This natural "product" contains the perfect, easily digestible blend of protein, sugar, fat and minerals to promote optimal infant growth. Breast milk is so saturated with antibodies that protect the infant from infection, that some pediatricians tell moms that breast-feeding is really the infant's first immunization.

In addition to a reduced incidence of asthma, allergies and childhood ear infections, other recognized benefits to the babe include a possible decrease in sudden infant death syndrome, reduction the incidence of diabetes, and higher performance on tests of development.

From a practical standpoint, breast milk has many benefits as well. It is "ready to serve," free and is good for the environment. It is also good for mom! The uterus shrinks more quickly in breast-feeding mothers, and they experience less postpartum blood loss and return to their pre-pregnancy weight sooner. In addition, lactating moms are less inclined to develop breast and ovarian cancer in later years.

This is not to say that the process is always convenient. Breast-feeding often requires planning, especially when other caregivers are involved. Mothers are

required to provide bottled breast milk for those times when others will be feeding their infant.

Although 70 percent of women initiate breast-feeding at birth fewer than half do so exclusively and, by six months after the baby is born, less than a third of women are still breast-feeding. This is a far cry from the goal of the American Academy of Pediatrics and the recommendations of U.S. Healthy People 2010 that infants should breast-feed exclusively for the first four to six months of life and continue to breast-feed with supplemented solids through the first year and beyond, if acceptable to infant and mom. Barriers to extended breast-feeding appear related to insufficient lactation education, misinformation, lack of family or job-site support, and the food industry's promotion of formula products.

When Not to Breast-Feed

While breast-feeding is the best option for most moms, there are a few who should not choose it. These include mothers who have HIV, tuberculosis or need chemotherapy. Also, babies who have infantile galactosemia- a rare genetic disease that prevents the body from breaking down dairy products into expected nutritional components- should not breast-feed.

Other Precautions

Mothers with certain hepatitis conditions or infection with cytomegalovirus (CMV) may, in many cases, breast-feed. Moms with these and other conditions that raise concerns should discuss these issues with their doctor before making a decision about breast-feeding. Moms who smoke but do so only outside the house and away from the baby, may breast-feed as well. Alcohol tends to become concentrated in breast milk and to slow milk production, so alcohol consumption should be limited and breast-feeding avoided for two hours after taking a drink.

Many parents may not be aware of newly published American Academy of Pediatrics recommendations regarding breast-feeding. Beginning when they are two months old, breast-fed infants should receive 200 I.U. of oral vitamin D drops daily. The AAP also recommends that infants sleep close to mom, but not in her bed. Sleeping in a bassinet close to their mother's bed increases the chance of hearing a hungry or fussy baby which leads to a more successful feeding routine. Sleeping in the mother's bed, however, increases the risk of sudden infant death, because tired moms tend to fall asleep and may roll over onto the baby. In addition, soft adult bedding may interfere with breathing in the very young.

Although for many new mom/baby teams, initiation of breast-feeding happens with ease, for many others it is a new and overwhelming task that requires

patience, assistance and encouragement. Help is available from your physician and lactation specialist. Obtaining information during pregnancy as you prepare for the baby's arrival reduces stress and helps to ensure a successful start.

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