

Press Release - February 23, 2001

**NEW AND CONCLUSIVE EVIDENCE THAT BREASTFEEDING
REDUCES BREAST CANCER RISK**

Women who breastfed their babies for two years or longer reduced their risk of breast cancer by 50 percent, was reported in a study of women in rural China.

The study, published in the American Journal of Epidemiology, looked at the medical history of 808 Chinese women in rural Shandong province from 1997 to 1999. Half of the women, who ranged in age from 30 to 80 had breast cancer, half did not.

Researcher Tongzhang Zheng said that women have no control on many risk factors for breast cancer, such as family history and environmental factors. “It is one factor people may be able to change”, said Zheng, an associate professor of epidemiology and public health at the Yale School of Medicine.

The number of babies a woman breastfed and her age at her first breastfeeding did appear to be factors in breast cancer risk, Zheng said.

The study did not explore reasons why breastfeeding lowers the risk of breast cancer. “There could be many, many reasons. There’s no one that every one agrees on”, Zheng said. One theory is that breastfeeding reduces exposure to estrogen and the regular female hormone cycles. Another theory is that fat-soluble carcinogens and pollutants are not stored as much in lactating breasts.

The study bolsters other studies in China and in the United States, and finds that the benefits are similar whether the cancer strikes before or after menopause.

Research has long shown that breastfeeding is good for babies, providing nutrition, strengthened immune systems and fewer illnesses than a formula diet

It is hoped that the study will change cultural attitudes and encourage more women to breastfeed for longer periods of time.

BPNI recommends Exclusive breastfeeding for 6 months and continued breastfeeding for two years and beyond along with complementary feeding similar recommendations have been issued by the Association for Consumer Action on Safety and Health (ACASH), Indian Academy of Pediatrics (IAP), The Federation of Obstetric & Gynaecological Societies of India (FOGSI), United Nations Children's Fund (UNICEF), International Baby Food Action Network (IBFAN), World Alliance for Breastfeeding Action (WABA), Department of Women and Child Development (DWCD) and Department of Family Welfare (MOHFW), Government of India and American Academy of Pediatrics as well recommendations of the experts that met during the Global Technical Consultation called by the WHO and UNICEF on Infant and Young Child Feeding in March 2000.

La Leche League, a breastfeeding advocacy group in the USA, encourages mothers to breastfeed for as long as the mother and baby want.

BPNI's recommended feeding practices for infant and young children

Breastfeeding is the optimal way to feed an infant. It greatly improves quality of life by providing unique nutritional, immunological, economic, ecological, psychological and child spacing benefits. Breastfeeding also enhances maternal health. Breastfeeding saves lives.

Breastfeeding Promotion Network of India (BPNI) is working on issues related to breastfeeding and complementary feeding in India. To provide accurate and updated information on breastfeeding and complementary feeding at the local, state, national and

regional levels is our major objective. As a part of BPNI's ongoing crusade to provide accurate information to people, this document aims to provide health & nutrition workers, pregnant & breastfeeding mothers, NGOs, doctors and all concerned, the information on sound infant feeding practices to ensure proper dietary intake and good state of nutrition in infants and young children. Policy makers and programme managers could make use of this document to suit the needs of their audience.

This document takes into consideration, the recommendations of the Association for Consumer Action on Safety and Health (ACASH), Indian Academy of Pediatrics (IAP), The Federation of Obstetric & Gynaecological Societies of India (FOGSI), United Nations Children's Fund (UNICEF), International Baby Food Action Network (IBFAN), World Alliance for Breastfeeding Action (WABA), Department of Women and Child Development (DWCD) and Department of Family Welfare (MOHFW), Government of India and American Academy of Pediatrics as well recommendations of the experts that met during the Global Technical Consultation called by the WHO and UNICEF on Infant and Young Child Feeding in March 2000.

1. Initiate breastfeeding within half an hour of birth because,

- babies are most active during first 30-60 minutes
- suckling reflex is most active at birth and it increases success for exclusive breastfeeding
- it ensures intake of colostrum, the first feed and the first immunization of the baby
- it will promote emotional development between the mother and the child.
- it helps in developing a loving relationship between the mother and the baby
- it prevents the problem of breast engorgement, postpartum bleeding and uterine involution in mothers

(After the baby is dried, he/she should be with the mother for having skin to skin contact; bath may be given later as this may bring down baby's temperature)

2. Exclusively breastfeed babies for first six months (not even water) because:

- babies exclusively breastfed for six months grow normally
- breastmilk quantity gets reduced if breastfeeding is not exclusive
- water supplementation to exclusively breastfed babies is unnecessary and can be a dangerous source of infection
- babies have lesser infections, allergies and eczema
- it helps in birth spacing (The Lactational Amenorrhea Method (LAM) provides 98% protection for a woman who meets three criteria: baby is exclusively breastfed, baby is less than six months old, woman's menstrual periods have not resumed).
- it contributes to better intelligence development
- it reduces the risk of breast and ovarian cancer and anemia in mothers.
- under-nourished and anemic mothers can also successfully exclusively breastfed their babies.

3. Avoid use of prelacteal feeds and pacifiers because

- giving prelacteal feeds such as sugar water, honey, water, butter or concoctions lead to infections and interfere with breastfeeding success.
- pacifiers interfere with success of breastfeeding.

4. Breastfeed in correct sucking position because

- correct sucking position will reduce incidence of sore nipples and engorgement.
- ensures adequate supply of breastmilk to the baby.

- Signs of correct/good suckling position at the breast include: baby's chin is close to the breast, baby's mouth is wide open and the lower lip turned outwards, much of areola is inside baby's mouth and there is no pain at nipple site while breastfeeding.

5. Practice frequent and demand feeding including night feeds because

- frequent breastfeeding increases breastmilk production and maintains adequate milk supply.
- breastfeeding on demand promotes more frequent feeding, which prevents breast engorgement.
- uninterrupted feeding helps avoid 'not enough milk' problem.
- breastfeeding at night is particularly helpful as milk producing hormone, prolactin is secreted more during night and it provides relaxing effect on mothers
- Baby should be fed many times a day (8 – 10 times or more in 24 hours more). Sometimes the baby may want to return to the breast soon after finishing a breastfeed and there is no need to restrict this. Feeding on demand means whenever baby is hungry, which is shown by the baby as increased alertness. Some babies may like to feed less or more, those reluctant should be encouraged more frequently but not pushed.

6. Introduce complementary (additional) foods when a baby is six months old because:

- nutritional requirements often can not be met with breastmilk alone after the age of 6 months;
- complementary foods given before six months do not result in improved growth, but replace breastmilk intake.
- appropriately introduced complementary food reduces the risk of diarrhoeal disease which is 3 to 13 times higher in those babies who are introduced these foods early.

- Home-made complementary foods which are part of the family diet should be given as follows: 6–9 months old are given 2-3 times a day; 12 months old are given 4-5 times a day.
- Mixing home made food with expressed milk in the beginning will help in increasing nutrient value and baby will also accept taste.

7. Provide appropriate and adequate home-made additional/complementary foods to infants (six months and above) and young children because

- children adopt better to home made foods which they any way have to eat later.
- too thin complementary feeds made of cereals and pulses in watery forms are inadequate source of nutrition and calories.
- Introduce variety and increase the amount and thickness of food gradually e.g. cereals with added oil, pulses, meat , eggs and fish and cereals with added milk, have greater caloric value than milk alone, whereas vegetables and fruits have an energy value similar to or lower than that of milk.
- Practice active feeding, baby should be offered and allowed to participate in the act of feeding.
- Spoon can be introduced for baby’s use at the age of 10-12 months .
- Food should not be pushed into babies as some babies may like to feed less or more.

8. Continue frequent breastfeeding up to 2 years and beyond along with appropriate complementary feeding because it:

- increases energy intake
- lessens the risk of under-nutrition and infection.
- helps in emotional bonding

In conclusion, BPNI recommends exclusive breastfeeding for first six months, continued breastfeeding up to two years & beyond and addition of complementary foods after six months of age as optimum infant feeding practices.

During the International Baby Food Action Network (IBFAN) South Asia's Regional Training Seminar, "Healthy Futures: Challenges for the 3rd Millennium", 14-17th November, 2000 in Parwanoo, India, 40 participants including nutrition and health professionals, governments and NGOs and researchers from seven countries discussed and adopted these guidelines.

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The Breastfeeding Promotion Network of India (BPNI) is a national network of individuals and organisations working for protection, promotion and support of breastfeeding in India. BPNI believes that breastfeeding is the right of all mothers and children. BPNI works through advocacy, social mobilization, information sharing, education and training of health workers and monitoring the compliance of International Code/The IMS Act to protect breastfeeding. BPNI works as the Regional Focal Point for South Asia for the World Alliance for Breastfeeding Action (WABA) & International Baby Food Action Network (IBFAN). BPNI does not accept funds or sponsorship of any kind from the companies producing infant milk substitutes, feeding bottles, related

equipments, or infant foods (cereal foods) or those have been ever found to violate the IMS Act or The International Code.