

Academy of Breastfeeding Medicine

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ABM ADVOCACY COMMITTEE RESPONSE TO NPR BROADCAST

The broadcasting of *Study Puts Breastfeeding Benefits in Question* on NPR (April 1, 2008) has resulted in the dissemination of faulty information that ill suits the health care interests of its listening audience.

The broadcast is based upon a study from Belarus, the results of which failed to demonstrate a favorable long-term beneficial effect of a hospital-based breastfeeding promotional initiative on childhood behavior or the quality of maternal feelings toward child and family. On the basis of this study, Dr. Sydney Spiesel suggests that it is “hard to find the powerful benefit (from breastfeeding) that people are claiming.” A hard look at the data, however, fails to justify such a conclusion.

Although the breastfeeding rates among the “breastfeeding promotion” (experimental) group in the Belarus study were significantly higher than those of the “non-promotion” (control) group, the rates in both groups were extremely low. The World Health Organization recommends exclusive breastfeeding for the first six months of life, and continued breastfeeding with the addition of complementary foods for at least the first two years; the American Academy of Pediatrics makes a similar recommendation, but calls for continued breastfeeding for at least one year rather than two.

Yet in the Belarus study, not even half of the infants in the breastfeeding promotion group were being breastfed *at all* by *six months* of age. Of those who were, we are not told how many were being primarily breastfed and how many were receiving only a minimal amount of breast milk. The distinction is important, since the benefits of breastfeeding are well known to be dose-dependent.

The rates of exclusive breastfeeding were even more dismal. According to health authorities, all infants should be exclusively breastfed until six months of age. Yet in the Belarus study, only eight percent of the infants in the *breastfeeding promotion* group were being exclusively breastfed, a proportion that falls painfully short of the ideal.

Dr. Spiesel looks at this data and concludes that the practice of breastfeeding cannot be proven to make a difference. But taking into consideration the many known benefits of breastfeeding, it would be wiser to conclude that the promotional efforts under investigation simply *may not have been effective enough* to demonstrate such a difference.

Our response to the Belarus study should not be to minimize the importance of breastfeeding, as Dr. Spiesel appears to do, but to redouble our efforts to support breastfeeding initiatives in order to more fully elucidate its health-enhancing effects.

A fact of paramount importance that Dr. Spiesel apparently overlooked is that this study did not include formula-fed infants as a control group. Had this been done, perhaps a significant difference in outcome would have been identified.