



## THE PUBLIC HEALTH CASE FOR BREASTFEEDING SUPPORT

Breastfeeding promotes immune development and protects infants against infectious diseases, including those commonly encountered in child-care settings.<sup>1-2</sup> Research shows a 50 percent decrease in sick days for working mothers when babies are breastfed.<sup>2</sup> Protective effects appear to last long after breastfeeding ends. For example, breastfeeding for at least four months is associated with a reduced need for antibiotics well into the second year of life.<sup>2</sup> Breastfeeding has also been associated with lower rates of childhood abuse and neglect,<sup>3</sup> improved school performance,<sup>4</sup> and other positive developmental outcomes.<sup>5-7</sup>

Women who have breastfed are at reduced risk for type 2 diabetes and postpartum depression<sup>8</sup> and may be at reduced risk for cardiovascular disease.<sup>9-11</sup> Breastfeeding is associated with enhanced maternal-infant bonding, increased maternal responsiveness to the infant, and reduced maternal stress.<sup>12-15</sup>

Infants who are not breastfed and mothers who do not breastfeed are at significant excess risk for poor health outcomes. It is estimated that \$13 billion in pediatric health-care costs and 911 lives would be saved annually in the United States if 90 percent of women were able to breastfeed according to medical recommendations.<sup>16</sup> The Surgeon General's Call to Action to Support Breastfeeding reports the following excess health risks associated with not breastfeeding:<sup>17</sup>

<i>Outcome</i>	<i>Excess Risk of Too Little or No Breastfeeding</i>
<i>Among full-term infants</i>	
Acute ear infections (otitis media)	100%
Eczema (atopic dermatitis)	47%
Diarrhea and vomiting (gastrointestinal infection)	178%
Hospitalization for lower respiratory tract diseases in the first year of life	257%
Asthma, with family history	67%
Asthma, no family history	35%
Childhood obesity	32%
Type 2 diabetes	64%

Acute lymphocytic leukemia	23%
Acute myelogenous leukemia	18%
Sudden infant death syndrome	56%

#### *Among preterm infants*

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Necrotizing enterocolitis	138%
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#### *Among mothers*

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Breast cancer	4%
Ovarian cancer	27%

“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.”

—American Academy of Pediatrics, 2005

#### Notes:

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- 4 Kramer MS, Aboud F, Mironova E, et al. Breastfeeding and child cognitive development: New evidence from a large randomized trial. *Arch Gen Psychiatry*. 2008; 65(5): 578-84.
- 5 Khedr EM, Farghaly WM, Amry Sel-D, et al. Neural maturation of breastfed and formula-fed infants. *Acta Paediatr*. 2004; 93(6): 734-8.
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- 14 Levine A, Zagoory-Sharon O, Feldman R, Weller A. Oxytocin during pregnancy and early postpartum: Individual patterns and maternal-fetal attachment. *Peptides*. 2007; 28(6): 1162-9.
- 15 Mezzacappa ES, Katlin ES. Breast-feeding is associated with reduced perceived stress and negative mood in mothers. *Health Psychol*. 2002; 21(2): 187-93.
- 16 Bartick M, Reinhold A. The burden of suboptimal breastfeeding in the United States: A pediatric cost analysis. *Pediatrics*. 2010; 125:e1048-56.
- 17 US Department of Health and Human Services. The Surgeon General's Call to Action to Support Breastfeeding. Washington, DC: US Department of Health and Human Services, Office of the Surgeon General; 2011.