

BREAST FEEDING; FACTORS CAUSING EARLY TERMINATION

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ABSTRACT... Objective: To identify the factors, causing the early termination of breast feeding i.e. from birth to six months of age. **Design:** A cross sectional study. **Setting:** Outpatient Department of Ziauddin Medical University, Kemari Campus, Karachi. **Period:** June 2008 to December, 2008. **Methods:** A structured questionnaire was put to mothers of children up to two years of age attending the outpatient department of pediatrics. **Results:** Significant associations existed between the early termination of breast feeding and family income, family structure (nuclear vs. extended), mode of delivery, delayed in initiation of breast feeding, early weaning and antenatal counseling with a p-value of <0.05. **Conclusions:** Provision of adequate prenatal counseling, early initiation, proper economical and environmental support, backup and encouragement are key factors associated with prolonged breast feeding among women.

Key words: Breast Feeding, Prenatal Counseling

INTRODUCTION

Appropriate nutrition plays a significant role in our life. This is specially so in early years. Exclusive breast feeding for first six months have beneficial effect on infant and mother¹. It protects the infant against some major causes of childhood mortality². Infants less than six months who are not breast fed are estimated to have greater than five fold increased risk of morbidity and mortality from diarrhea and pneumonia as compared to infants who are exclusively breast fed³.

Based on scientific evidence the World Health Organization (WHO) recommends the practice of exclusive breast feeding for six months in addition its continuation with supplementary food till two years or more⁴. Unfortunately infant and young child feeding practices world wide are not optimal. Global monitoring indicates that only 39% of all infants world wide are exclusively breast fed even when assessment is made in children less than four months of age. In Pakistan only 16% mothers exclusively breast feed for only three months⁵. In India and Bangladesh figures for exclusive breast feeding are 51% and 4% respectively⁶.

Promotion, protection and support of breast feeding is an exceptionally cost effective strategy for improving child survival and reducing burden of childhood disease particularly in developing countries. Increasing optimal breast feeding practices can save as many as 1.5 million

infant lives every year⁷. A number of studies have been done to determine the factors that lead to early termination of breast feeding⁸. The aim of this paper is to identify the main factors affecting the early termination of breast feeding from birth to six months of age. The results will help in development of public health interventions aimed at improving prevalence of exclusive breast feeding for the first four to six months of life.

SUBJECTS AND METHODS

A cross sectional study was carried out in the outpatient department of Ziauddin Medical University Kemari Campus Karachi from June 2008 to December 2008 to determine the effect of variables on duration of breast feeding. A total of 100 mothers were interviewed for causes of early termination of breast feeding i.e. before six months of the age.

A structured questionnaire was put to mothers of children up to two years of age. Newborn and infants with severe malformation and children with neurological problems were not included in the study. Questions involved enquired into education, employment, family composition, medical history, prenatal care, prenatal education and breast feeding knowledge. Breast feeding classification categories used in this study were those laid by World Health Organization (WHO) Exclusive Breast Feeding –when the children are given just breast milk while partial breast feeding is defined as when

children are given breast milk plus formula milk. We statistically analyzed all the factors thought to be responsible for early termination of breast feeding with total duration of lactation and duration of exclusive breast feeding. Results were analyzed using SPSS 11. All categorical variables were compared using Chi-square test. Frequency of variables was calculated. For all analysis cutoff for statistical significance was set at P Value <0.05 is considered significant at confidence level 95% and power of 80%.

RESULTS

We interviewed hundred mothers coming to Pediatric OPD regarding causes of early termination of breast feeding. Regarding the demographic characteristics, 94% of our study participants were housewives with 36% percent having no formal education, 29% had primary education while 30% received secondary education. 70% of the mothers belonged to the extended family system with 62% percent having less than three children. When asked about the monthly income, 20% had income below rupees five thousand, 57% ranged between rupees five to ten thousand while rest had income above rupees ten thousand. Twenty percent mothers denied breast feeding their previous child, 40% breast fed for more than one year, 30% from four to twelve months. Among mothers who breast fed their previous child 49% breast fed exclusively for four and more months.

Regarding details of last delivery, 87% of the females delivered at hospital and 77% of the total had spontaneous vaginal delivery. While observing common causes for early termination of breast feeding at four months of age, we found that 16 females delayed initiation of breast feeding for more than sixteen hours, 13 experienced problem of insufficient milk production while seven reported breast feeding inconvenient or embarrassing for them. Another three suffered from nipple problems while breast feeding. New pregnancy was the cause of termination of breast feeding in three mothers while two were working mothers (Table I).

Maternal age, level of education, occupation, number of children and place of delivery, maternal and infant illness were not significantly related to the duration of breast feeding. However, significant associations existed

Table-I.			
Factor	< 6 Months	> 6 Months	P-value
Occupation			
House wife	28	48	0.317
Employed	03	01	
Monthly income			
<5000	01	14	<0.05
5000-10000	15	31	
>10000	15	04	
Type of family			
Nuclear	17	06	<0.05
Extended	14	43	
Number of children			
<3	19	27	0.154
>3	12	22	
Age of the youngest child			
<6 months	11	17	0.096
6-12 months	16	16	
>12-24 months	04	16	
Maternal age			
<20 years	02	07	0.437
21-29	26	39	
>30 years	03	03	
Maternal illness			
Yes	03	04	0.862
No	28	45	
Place of delivery			
Home	02	09	0.240
Hospital	29	40	
Mode of delivery			
NVD	19	42	0.012
Caesarean section	12	07	
Delay in initiation			
Yes	16	08	<0.01
No	15	41	
Insufficient milk			
Yes	13	18	0.641
No	18	31	
Inconvenience			
Yes	07	01	<0.01
No	24	48	
Mothers education			
Illiterate	08	22	0.322
Primary	08	11	
Secondary	12	14	
More	03	02	

between the exclusive nature of breast feeding, family income and family structure (nuclear vs. extended), mode of delivery, delayed in initiation of breast feeding early weaning and antenatal counseling with a p-value of <0.05. (Table I).

DISCUSSION

In this study we tried to identify the causes of early termination of breast feeding. We founded that maternal age, level of education, occupation, number of children, place of delivery and maternal and infant illness were not significantly related to the duration of breast feeding.

However it was observed that mothers belonging to economic group between Rs. 5,000 – Rs10, 000 breasts fed for more than four months and P-value was found to be significant. Socio-economic factors are found to influence length of breast feeding. Studies from Multan also show that mothers with low family income were more likely to breast feed¹⁰. The reason could be the lack of means to acquire substitute for breast feeding. This factor gains singular importance to the extent that it is exactly these children who are exposed to factors that increase morbidity and mortality.

Significant associations also existed between the exclusive nature of breast feeding and family structure (nuclear vs. extended). Mothers living in extended family breast fed for more than four months. Other studies also found living conditions affect duration of breast feeding¹¹. It is clear that mothers need support to initiate and sustain optimal breast feeding.

In our study we founded that mothers who delivered vaginally differed significantly from those who had a caesarean section in terms of breast feeding exclusively, for a longer period of time.

Children delivered by normal vaginal delivery were fed for more than four months as compared to children delivered by caesarian section probably due to separation from mother due medical causes. WHO recommends that baby is given to mother to hold immediately after delivery for skin to skin contact and for baby to start suckling as half to one hour after birth¹².

Inconvenience and embarrassment was also found to be factor affecting duration of breast feeding. Other local studies also support our result¹³.

Another thing that was observed in this study was the role of antenatal counseling¹⁴. It was found that the proportion of mothers receiving antenatal counseling regarding breastfeeding had breastfed exclusively for four or more months in significantly higher numbers. Another interesting fact observed, was the significant association between duration of exclusive breastfeeding and formula milk prescribed for the newborn on discharge from hospital.

Also we observed that mothers who started weaning before four months of age, had lesser duration of breast feeding which was statistically significant.

CONCLUSIONS

We conclude from our study that there is a need for dissemination of information and education regarding optimal breast feeding practices in order to protect and promote this healthy traditional practice. Women should be made aware of advantages of breast feeding. Efforts should be made for promoting institutional deliveries so that better opportunities for health education are available to the mothers.

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PREVIOUS RELATED STUDIES

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