

Pattern of Breastfeeding Practice During the First 6 Months of Life in Mafraq

Yaseen Al-Nawafleh*¹

Abstract

Aim: To assess the breastfeeding practice in the first 6 months of the infant's age at the public Gynobstetric-pediatric hospital (GOPH) in Mafraq, Jordan.

Methods: A cross-sectional study was carried out at (GOPH) in 2009 (Jan. 1, 2009-Dec. 31, 2009). Infants attended the primary care centers and well-baby clinic of (GOPH) for the first 6 months. Mothers were interviewed to collect the information on the mothers, the infants and their breastfeeding practices in which definitions were used for classification of the infants' nutrition patterns.

Results: There were 300 infants included in this study. Breastfeeding was initiated among 94% of the sample. Most mothers supplemented breastfeeding with milk formula (72%) or fluids (95%) during the first 6 months. The percent of exclusive breastfeeding was 4.2% and partial breastfeeding (formula + breastfeeding) was the most common type of feeding at 82.4%. Lactation duration dropped to 55% after 6 months. The factors that caused mothers to favor the milk formula use were the introduction of the formula in the first of life, maternal reasons of inadequate milk lactation, formula introduction associated with mother parity, working status and combined contraceptive pill use.

Conclusion: Prevalence of exclusive breastfeeding was low in the sample. Partial breastfeeding was the trend for feeding in the first 6 months of life which was accompanied with a rapid decline in lactation duration.

Keywords: Breast Feeding Pattern, Mafraq, 6-Month Breastfeeding.

(*J Med J 2011; Vol. 45 (3):240- 244*)

Received

Accepted

July 11, 2010

January 13, 2011

Introduction

Breastfeeding has innumerable benefits that are not only reflected on infants and mothers but on society as a whole. International health agencies such as the World Health Organization (WHO), the United Nation Children's Fund (UNICEF), and the American Academy of Pediatrics recommend exclusive breastfeeding during the first 6 months of infant life, and introduction of complementary food at approximately 6 months. The prevalence of breastfeeding in developed countries such as the United States of America

and United Kingdom is increasing. In spite of the great advances in health services in Mafraq, recent studies have reported a downward trend in breastfeeding practice.

Breastfeeding is associated with a reduction in the risk of otitis media, gastroenteritis, respiratory tract infection, atopic dermatitis, asthma (young children), obesity, type 1 and type 2 diabetes, childhood leukemia, sudden infant death syndrome, and necrotizing enterocolitis. Lactation also has favorable maternal outcomes such as a reduction in type 2 diabetes, breast

1. Pediatric Department, Jordan University of Science and Technology. Faculty of Medicine and Ministry of Health (GOPH), Mafraq, Jordan.

* Correspondence should be addressed to:
Yaseen Al-Nawafleh

cancer and ovarian cancer. Early cessation of breastfeeding was associated with an increased risk of maternal postpartum depression.

Methods

A cross-sectional study was carried out at three primary care centers and a hospital well-baby clinic at GOPH between Jan. 1, 2009 and Dec. 31, 2009. A questionnaire was developed for the purpose of data collection, which was pilot-tested and modified accordingly. Information related to mothers, infants, and breastfeeding practice were included in the questionnaire. The WHO definitions for breastfeeding were adopted for classification of infant feeding patterns. Infants currently attending these clinics for their 6-month vaccination were included.

Discussion

A total of 300 infants were included in the study. The majority of the participants were from the primary care setting 78%. The infants' and mothers' characteristics are presented in Table (1). The mean age of the mothers was found to be 30.2 years. In the sample, 72.3% were housewives, and 25% were illiterate. Moreover, estrogen-containing pills (30.2%) were the most commonly used method of contraception. The majority of the infants (89.6%) were 6 to 7 months old, most of whom were born at term (95.2%) and by vaginal mode (89.5%). The nutrition patterns in the first 6 months of the infants' lives are summarized in Table (2).

The frequency of breastfeeding was 94% regardless of the duration of lactation. However, most of the study sample (82.2%) introduced milk formula to their infants during the first 6 months. The most common period for introduction of the formula was the neonatal period (75.7%). Furthermore, the first day of life represented the most common instant to introduce the formula (46%). Most of the infants in this survey (94.3%) were supplemented with liquid within the first 6 months.

Water, baby tea, herbs, and dates with water and sugar were the most frequently used liquids. The majority of the mothers (92.2%) had already started complementary feeding to their infants at the time of the interviews, mostly by the age of 4-6 months.

Mothers were asked an open-ended question on their own reasons for giving their babies the milk formula and answers were grouped and presented in Table (3). "Insufficient milk" was the most common maternal reason for adding formula (54%) which was derived from answers such as: "no milk in the early days after birth", "milk was not enough", "baby crying a lot", "baby looking hungry", and "breast milk alone is not enough for general health of the infant". The second set of reasons for adding formula was breastfeeding problems (11%), which were derived from answers such as: "refusal of the breast", "improper lactation", "sore nipple", "pain" and "infection".

Table (1)

<u>Characteristics</u>		
<i>Mothers' characteristics</i>		%
<i>Age (years)</i>	<20	6.2
	21-25	25.7
	26-30	27.7
	31-35	22.3
	36-40	15
	>40	3.2
<i>Education</i>	Illiterate	20.8
	<High school	56.1
	> High school	23.1
<i>Working status</i>	Housewife	60.4
	Working	39.6

Table (2)

		<u>Type of feeding (%)</u>	
Breast milk		Ever	94%
		Never	6.1%
Milk	Milk Formula	Yes	82.2%
		No	17.8%
مغذيات الثدي الطبيعية	Whole milk	yes	1.7%
		No	98.8%
مغذيات الثدي الطبيعية	Liquid	yes	96%
		No	4%
Other	Solid	Yes	90%
		No	9.9%

Table (3)

Reasons	(%)
Inadequate milk	54.1%
Breast feeding problems	11%
Neonatal hospitalization\baby sickness	6%
Mother sickness	7%
As helper	5%
Contraceptive issues	4.2%
Teaching the baby to get used to the bottle	5.8%
Working mother	6.3%
Doctor advise\ hospital gave it	2.2%
Others	6.6%

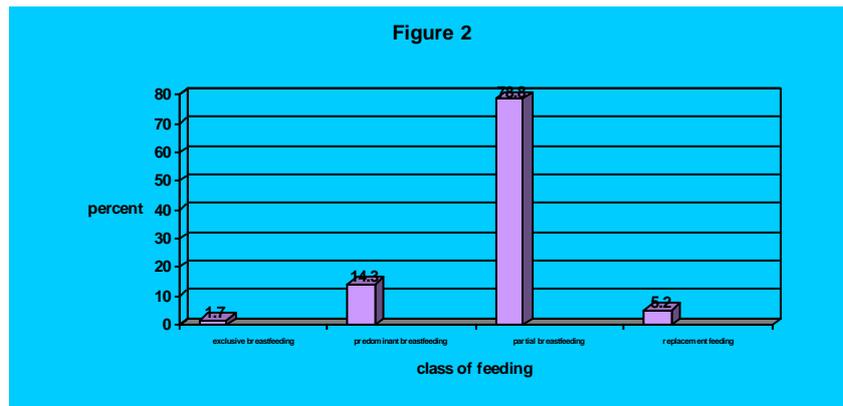
Results

The adjusted analyses for the association between lactation duration and milk formula introduction with maternal and infant factors using logistic regression shows that primiparous mothers, work status, and oral “combined pill” use were the main factors associated with shortened lactation duration and formula introduction.

On the other hand, maternal age, education, gender, mode of delivery, and maturity were not found to be significantly associated with the feeding patterns.

The frequency of breastfeeding was different for healthy babies (97%) as compared to those with chronic diseases (85.7%). Similarly, ever breastfeeding in the healthy mothers was found to be 95.7% compared to 89.3% for those who had chronic diseases (such as asthma, diabetes and hypothyroidism).

Based on the WHO definition for breastfeeding, the survey shows very low percentage of exclusive breastfeeding (1.7%) in the first 6 months among the sample, whereas the partial feeding was the most common mode of feeding (78.8%) (Figure 2).



References

1. American Academy of Pediatric Policy Statement. Breast milk and the use of human milk. *Pediatrics* 2005; 115:496-506.
2. World Health Organization. The optimal duration of exclusive breastfeeding: report of an expert consultation, Geneva, Switzerland 28-30 March 2001. *Who/NHD/O1.09*. Geneva: World Health Organization; 2002.
3. Kramer MS, Kakumar R. Optimal duration of exclusive breastfeeding. *Cochrane Database of Syst Rev* 2007, issue 4. John Wiley & Sons DOI;10.1002/1465/858. CD 003517.
4. Li R, Zhao Z, Mokdad A, Barker L, Grummer-Strawn L. Prevalence of breastfeeding in the United States: the 2001 National Immunization Survey. *Pediatrics* 2003; 111: 1198-1201.
5. United Nations Children's Fund (UNICEF). Available from: URL: <http://www.babyfriendly.org.uk/ukstats.asp>
6. Ogbeide DO, Siddiqui S, Al-Khalifa IM, Karim A. Breastfeeding in Saudi Arabian community. Profile of parents & influencing factors. *Saudi Med J* 2004; 25: 580-584.
7. Shawky S, Abalkhail BA. Maternal factors associated with the duration of breastfeeding in Jeddah, Saudi Arabia. *Pediatr Perinat Epidemiol* 2003; 17: 91-96.
8. Pechlivani F, Vassilakou T, Sarafidou J, Zachou T, Anastasiou CA, Sidossis LS. Prevalence & determinants of exclusive breastfeeding during hospital stay in the area of Athens, Greece. *Acta Paediatr* 2005; 94: 928-934.
9. Philipp BL, Malone KL, Cimo S, Merewood A. Sustained breastfeeding rates at US baby friendly hospital. *Pediatrics* 2008; 112: 234-236.
10. Lanting CI, Van Wouwe JP, Reijneveld SA. Infant milk feeding practices in the Netherlands & associated factors. *Acta Paediatr* 2005; 94: 935-942.
11. Al-Jassir MS, El-Bashir BM, Moizuddin SK. Surveillance of infant feeding practices in Riyadh City. *Ann Saudi Med* 2004; 24: 136-140.
12. Gagnon AJ, Leduc G, Waghorn K, Yang H, Platt RW. In-hospital formula supplementation of healthy breastfeeding newborns. *J Hum Lact* 2005; 21: 397-405.
13. Grjibovski AM, Yngve A, Bygren LO, Sjostrom M. Socio-demographic determinants of initiation & duration of breastfeeding in northwest Russia. *Acta Paediatr* 2005; 94: 585-594.
14. Ong G, Yap M, Li FL, Choo TB. Impact of working status on breastfeeding in Singapore: evidence from the National Breastfeeding Survey 2001. *Eur J Public Health* 2005; 15: 424- 430.
15. Musaiger AO, Abdulkhalek N. Breastfeeding & weaning practices in Bahrain: the role of mother's education. *Nutr Health* 2000; 14: 237-263.

نمط ممارسة الرضاعة الطبيعية خلال الـ 6 أشهر الأولى من الحياة في مدينة المفرق

ياسين النوافله¹

1- كلية الطب، جامعة العلوم والتكنولوجيا، اربد، الأردن

الملخص

الهدف: تقييم ممارسة الرضاعة الطبيعية في أول 6 أشهر من عمر الرضيع في المستشفى العام للنسائية والتوليد والأطفال في مدينة المفرق، الأردن.

الطرق: أجريت دراسة في هذا المستشفى في عام 2009 (1 يناير 2009 - 31 ديسمبر 2009). عينة الدراسة هم الرضع في مراكز الرعاية الصحية الأولية وكذلك من عيادة الأطفال لأول 6 أشهر من العمر. وأجريت مقابلات مع الأمهات لجمع معلومات عن الأمهات والرضع وممارسات الرضاعة الطبيعية التي كانت تستخدم لتصنيف أنماط التغذية والرضع.

النتائج: شملت عينة الدراسة 300 رضيع. وكانت نسبة الرضاعة الطبيعية 94% من العينة. استكملت معظم الأمهات الرضاعة الطبيعية مع الحليب (72%) أو سوائل (95%) خلال الـ 6 أشهر الأولى. 4.2% كانت الرضاعة الطبيعية الحصرية والرضاعة الطبيعية الجزئية (رضاعة تكميلية+ الرضاعة الطبيعية) هي النوع الأكثر شيوعاً بنسبة 82.4% في التغذية. انخفضت مدة الرضاعة إلى 55% بعد 6 أشهر. من العوامل التي جعلت الأمهات يرغبن في استخدام الحليب المكمل عدم كفاية حليب الأم من الرضاعة، وانشغال الأم في العمل واستخدام حبوب منع الحمل.

الخلاصة: كان انتشار الرضاعة الطبيعية الخالصة منخفضاً في العينة. كانت الرضاعة الطبيعية والاتجاه التكميلي للتغذية خلال الـ 6 أشهر الأولى من الحياة يترافقان مع انخفاض سريع في فترة الرضاعة.

الكلمات الدالة: نمط الرضاعة الطبيعية، المفرق، 6 أشهر للرضاعة الطبيعية.