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Search History

1. MEDLINE; *BREAST FEEDING/ [Limit to: Publication Year 2005-Current]; 3217 results.
3. AMED; exp BREAST FEEDING/ [Limit to: Publication Year 2005-2010]; 8 results.
4. CINAHL; *BREAST FEEDING/ [Limit to: Publication Year 2005-2010]; 2090 results.
5. HEALTH BUSINESS ELITE; (breast AND feeding).ti,ab [Limit to: Publication Year 2005-2010]; 96 results.
6. HMIC; exp BREAST FEEDING/; 441 results.

1. The effects of breast reduction on successful breastfeeding: a systematic review.

Citation: Journal of Plastic, Reconstructive & Aesthetic Surgery: JPRAS, October 2010, vol./is. 63/10(1688-93), 1748-6815;1878-0539 (2010 Oct)

Author(s): Thibaudeau S; Sinno H; Williams B

Institution: Division of Plastic and Reconstructive Surgery, Department of Surgery, McGill University, Montreal, Qc, Canada. stephanie.thibaudeau@mail.mcgill.ca

Language: English

Abstract: BACKGROUND: There is not yet a consensus in defining the ability to breastfeed up to the recommended duration of 6 months after reduction mammoplasty. We reviewed the literature to study the possibility for successful and exclusive breastfeeding for this duration. METHOD: A systematic review of literature was performed using the Ovid Medline Database and the PubMed database to retrieve all published original articles that studied the effects of reduction mammoplasty on breastfeeding from 1950 to December 2008. RESULTS: There appears to be no difference in breastfeeding capacity after reduction mammoplasty compared to women of the North American general population during the first month postpartum. Difficulties related to breastfeeding appear to be mostly explained by psychosocial issues related to advice and coaching received by healthcare workers during breastfeeding as well as other patient personal considerations. CONCLUSION: Women who have children after having had breast reduction surgery should be encouraged to breast feed. Consensus on the defining successful breastfeeding is required and we suggest using the definition of six months of exclusive breastfeeding as recommended by the WHO. Copyright 2009 British Association of Plastic, Reconstructive and Aesthetic Surgeons. Published by Elsevier Ltd. All rights reserved.

Country of Publication: Netherlands

Publication Type: Journal Article; Review

Subject Headings: [Breast Feeding/px \[Psychology\]](#)
[*Breast Feeding](#)
[Female](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[Mammoplasty/px \[Psychology\]](#)
[*Mammoplasty](#)
[Time Factors](#)

Source: MEDLINE

2. Breastfeeding and the risk of malaria in children born to HIV-infected and uninfected mothers in rural Uganda.

Citation: Journal of Acquired Immune Deficiency Syndromes: JAIDS, October 2010, vol./is. 55/2(253-61), 1525-4135;1944-7884 (2010 Oct 1)

Author(s): Vora N; Homsy J; Kakuru A; Arinaitwe E; Wanzira H; Sandison TG; Bigira V; Kamya MR; Tappero JW; Dorsey G

Institution: Department of Medicine, University of California, San Francisco, CA, USA.

Language: English

Abstract: BACKGROUND: Early cessation of breastfeeding increases morbidity and mortality of children born to HIV-infected mothers in resource-limited settings. However, data on whether breastfeeding reduces the risk of malaria in HIV-exposed and HIV-infected children is limited. METHODS: We prospectively followed 99 HIV-unexposed children, 202 HIV-exposed children, and 45 HIV-infected children in a high malaria transmission area in Uganda. All children were given insecticide-treated bednets. HIV-exposed and HIV-infected children were given trimethoprim-sulfamethoxazole prophylaxis. Malaria diagnosis was based on fever and a positive blood smear. Date of breastfeeding cessation was determined through monthly questionnaires. Associations between breastfeeding and

the risk of malaria were modeled through binomial generalized estimating equations using multivariate analysis adjusting for repeated measures, age, and location of residence. Analyses were stratified according to mothers' and children's HIV status. RESULTS: Breastfeeding was associated with a significantly lower risk of malaria in 6-15 months old HIV-exposed children (relative risk [RR] = 0.62; P = 0.008) and 6-15 months old HIV-infected children (RR = 0.31; P = 0.002). However, breastfeeding was not protective against malaria for >15-24 months old HIV-unexposed (RR = 1.14; P = 0.21) or >15-24 months old HIV-infected children (RR = 1.11; P = 0.75). CONCLUSIONS: HIV-infected mothers should be counseled about the importance of breastfeeding and trimethoprim-sulfamethoxazole prophylaxis to protect their young children and themselves against malaria.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't; Research Support, U.S. Gov't, P.H.S.

Subject Headings: [*Breast Feeding/ae \[Adverse Effects\]](#)
[Chi-Square Distribution](#)
[Female](#)
[*HIV Infections/co \[Complications\]](#)
[Humans](#)
[Incidence](#)
[Infant](#)
[Infectious Disease Transmission, Vertical](#)
[*Malaria/ep \[Epidemiology\]](#)
[Malaria/pc \[Prevention & Control\]](#)
[Prospective Studies](#)
[Risk Factors](#)
[Statistics, Nonparametric](#)
[Uganda/ep \[Epidemiology\]](#)

Source: MEDLINE

3. Thrush and breastfeeding.

Citation: Community Practitioner, 01 October 2010, vol./is. 83/10(42-43), 14622815

Author(s): Jones W; Breward S

Language: English

Publication Type: journal article

Subject Headings: [Candida Albicans](#)
[Breast Feeding](#)
[Candidiasis](#)
[Mastitis](#)
[Nipple Pain](#)
[Female](#)
[Infant](#)
[Pregnancy](#)
[Pain](#)
[Community Health Nursing](#)
[Adult](#)

Source: CINAHL

Full Text: Available in *fulltext* at [ProQuest](#)
 Available in *fulltext* at [in fulltext](#); Note: This is a donated journal

4. Influence of peers on breastfeeding discontinuation among new parents: the Melbourne InFANT Program.

Citation: Pediatrics, September 2010, vol./is. 126/3(e601-7), 0031-4005;1098-4275 (2010 Sep)

Author(s): Cameron AJ; Hesketh K; Ball K; Crawford D; Campbell KJ

Institution: Centre for Physical Activity and Nutrition Research, Deakin University, School of Exercise and Nutrition Sciences, 221 Burwood Highway, Burwood, Victoria 3125, Australia. adrian.cameron@deakin.edu.au

Language: English

Abstract: **OBJECTIVE:** We aimed to investigate whether the proportion of breastfeeding mothers in first-time parent groups influenced the likelihood of ceasing breastfeeding and whether this was independent of socioeconomic position. **METHODS:** Data were from 501 mothers (from 62 first-time parent groups initiated approximately 6 weeks after birth) who provided data at the baseline and mid-intervention assessments of the Melbourne Infant Feeding, Activity, and Nutrition Trial. Parent groups were divided into those in which $\leq 25\%$ of mothers had ceased breastfeeding by 6 weeks (low-cessation groups) and those in which $>25\%$ had ceased by 6 weeks (high-cessation groups). **RESULTS:** With the exclusion of mothers who had already ceased breastfeeding by 6 weeks, the proportion of mothers who ceased breastfeeding between the time of parent group initiation (6 weeks) and 6 months was higher in high-cessation groups than in low-cessation groups (37.4% vs 21.7%; $P=.001$). After adjustment for maternal age, BMI, employment, and education and area-level socioeconomic position, membership in a group in which a large proportion of mothers had ceased breastfeeding by 6 weeks was strongly related to cessation of breastfeeding before 6 months (odds ratio: 2.1 [95% confidence interval: 1.3-3.3]). **CONCLUSIONS:** Attendance at parent groups where peers are breastfeeding infants of a similar age may have an important influence on the continuation of breastfeeding to 6 months. First-time parent groups or other similar groups may be an important setting in which to promote the continuation of breastfeeding.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[Australia](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Female](#)
[Humans](#)
[*Peer Group](#)
[Socioeconomic Factors](#)

Source: MEDLINE

5. Delayed onset of lactogenesis among first-time mothers is related to maternal obesity and factors associated with ineffective breastfeeding.

Citation: American Journal of Clinical Nutrition, September 2010, vol./is. 92/3(574-84), 0002-9165;1938-3207 (2010 Sep)

Author(s): Nommsen-Rivers LA; Chantry CJ; Pearson JM; Cohen RJ; Dewey KG

Institution: Department of Pediatrics, Cincinnati Children's Hospital Medical Center, OH 45229-3039, USA. laurie.nommsen-rivers@cchmc.org

Language: English

Abstract: **BACKGROUND:** Delayed onset of lactogenesis (OL) is most common in primiparas and increases the risk of excess neonatal weight loss, formula supplementation, and early weaning. **OBJECTIVE:** We examined variables associated with delayed OL among first-time mothers who delivered at term and initiated breastfeeding ($n = 431$). **DESIGN:** We conducted in-person interviews during pregnancy and at days 0, 3, and 7 postpartum and extracted obstetric and newborn information from medical records. We defined OL as delayed if it occurred after 72 h and used chi-square analysis to examine its association with potential risk factors across 6 dimensions: 1) prenatal characteristics, 2) maternal anthropometric characteristics, 3) labor and delivery experience, 4) newborn characteristics, 5) maternal postpartum factors, and 6) infant feeding variables. We examined independent associations by using multivariable logistic regression analysis. **RESULTS:** Median OL was 68.9 h postpartum; 44% of mothers experienced delayed OL.

We observed significant bivariate associations between delayed OL and variables in all 6 dimensions ($P < 0.05$). In a multivariate model adjusted for prenatal feeding intentions, independent risk factors for delayed OL were maternal age ≥ 30 y, body mass index in the overweight or obese range, birth weight > 3600 g, absence of nipple discomfort between 0-3 d postpartum, and infant failing to "breastfeed well" ≥ 2 times in the first 24 h. Postpartum edema was significant in an alternate model excluding body mass index ($P < 0.05$). CONCLUSIONS: The risk factors for delayed OL are multidimensional. Public health and obstetric and maternity care interventions are needed to address what has become an alarmingly common problem among primiparas.

Country of Publication: United States

Publication Type: Journal Article; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: [Birth Weight](#)
[Body Mass Index](#)
[*Breast Feeding](#)
[Chi-Square Distribution](#)
[Edema/pp \[Physiopathology\]](#)
[Female](#)
[Humans](#)
[Infant, Newborn](#)
[Interviews as Topic](#)
[*Lactation/ph \[Physiology\]](#)
[Logistic Models](#)
[Maternal Age](#)
[Models, Biological](#)
[*Obesity/pp \[Physiopathology\]](#)
[*Parity](#)
[Pregnancy](#)
[Puerperal Disorders/pp \[Physiopathology\]](#)
[Risk Factors](#)
[Time Factors](#)

Source: MEDLINE

6. Breastfeeding success.

Citation: American Baby, 01 September 2010, vol./is. 72/9(80-83), 00447544

Author(s): Fox I

Language: English

Abstract: Not getting the hang of nursing? We'll help you figure out why and what you can do about it.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Breast Feeding](#)
[Infant Care](#)
[Adult](#)
[Depression, Postpartum](#)
[Female](#)
[Human](#)
[Infant](#)
[Infant, Newborn](#)
[Pain](#)
[Support, Psychosocial](#)

Source: CINAHL

7. Breastfeeding after Earthquakes.

Citation: Birth: Issues in Perinatal Care, 01 September 2010, vol./is. 37/3(264-265), 07307659

Author(s): Bengin HG; Scherbaum V; Hormann E; Wang Q
Language: English
Publication Type: journal article
Subject Headings: [Breast Feeding](#)
[Natural Disasters](#)
[China](#)
Source: CINAHL

8. PROFESSIONAL. Practice improvement, breastfeeding duration and health visitors.

Citation: Community Practitioner, 01 September 2010, vol./is. 83/9(19-22), 14622815
Author(s): Spencer RL; Greatrex-White S; Fraser DM
Language: English
Abstract: The primary purpose of practice improvement is to improve clinical practice through changing the behaviour of healthcare professionals. Breastfeeding is a key public health issue, conferring benefits associated with both infant and maternal health, yet breastfeeding rates in the UK and Ireland are among the lowest in Western Europe. In this paper, the ways in which practice improvement can be utilised to enhance both efficiency and effectiveness are described, using a case study of the potential contribution of health visitors to increasing breastfeeding duration in primary care in order to illustrate this in clinical practice.
Publication Type: journal article
Subject Headings: [Breast Feeding](#)
[Clinical Governance](#)
[Community Health Nursing](#)
[Nursing Role](#)
[Mothers](#)
[United Kingdom](#)
[Nursing Knowledge](#)
[Health Knowledge](#)
[Breast Feeding](#)
Source: CINAHL
Full Text: Available in *fulltext* at [ProQuest](#)
Available in *fulltext* at [in fulltext](#); Note: This is a donated journal

9. CLINICAL UPDATE. Drugs and breastfeeding.

Citation: Community Practitioner, 01 September 2010, vol./is. 83/9(41-42), 14622815
Author(s): Jones W; Breward S
Language: English
Publication Type: journal article
Subject Headings: [Depression, Postpartum](#)
[Citalopram](#)
[Breast Feeding](#)
[Community Health Nursing](#)
[Nurse-Physician Relations](#)
[Patient Advocacy](#)
[Female](#)
[Pregnancy](#)
[Infant, Newborn](#)
[Mothers](#)
Source: CINAHL
Full Text: Available in *fulltext* at [ProQuest](#)

Available in *fulltext* at [in fulltext](#); Note: This is a donated journal

10. Ultrasound imaging of infant swallowing during breast-feeding.

Citation:	Dysphagia (0179051X), 01 September 2010, vol./is. 25/3(183-191), 0179051X
Author(s):	Geddes DT; Chadwick LM; Kent JC; Garbin CP; Hartmann PE
Language:	English
Abstract:	Coordination of infants' suck-swallow-breathing patterns is integral to safe and efficient feeding. However, assessment of these patterns is difficult and often invasive, particularly in breast-fed infants less than 4 months of age. The aims of this study were to develop an ultrasound approach to visualize swallowing in term breast-feeding infants and to determine the accuracy of ultrasound imaging of swallowing compared to respiratory inductive plethysmography (RIP). On ultrasound, the breast milk bolus was observed as a predominantly echogenic area moving inferiorly. Of the 388 swallows detected with ultrasound, 379 correlated with the swallow apneas detected by RIP ($R(2) = 0.98$). The mean duration of the swallow was 0.63 ± 0.06 s. Ultrasound imaging is a noninvasive accurate method for detection of swallowing by visualization of movement of the milk bolus through the pharyngeal area of a breast-feeding infant. These techniques may potentially provide useful information for infants experiencing breast-feeding difficulties.
Publication Type:	journal article
Subject Headings:	Breast Feeding Deglutition Ultrasonography Deglutition Disorders Funding Source Human Infant Lactation Research Methodology Respiration
Source:	CINAHL

11. What's new in: World health & population. The determinants of early cessation of breastfeeding in Bangladesh.

Citation:	Healthcare Quarterly, 01 September 2010, vol./is. 13/3(98-98), 17102774
Author(s):	Akter S; Rahman M
Language:	English
Publication Type:	journal article
Subject Headings:	Breast Feeding Age Factors Bangladesh Contraception Cox Proportional Hazards Model Educational Status Employment Status Female Geographic Factors Human Life Table Method Mothers Parity Religion and Religions
Source:	CINAHL

12. The critical role of nurses in lactation support.

Citation: JOGNN: Journal of Obstetric, Gynecologic & Neonatal Nursing, 01 September 2010, vol./is. 39/5(499-500), 08842175

Author(s): Spatz DL

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Lactation](#)
[Nursing Role](#)
[Support, Psychosocial](#)

Source: CINAHL

13. On “current resources for evidence-based practice”... Jan/Feb 2010 issue (Jolivet, 2010),.

Citation: JOGNN: Journal of Obstetric, Gynecologic & Neonatal Nursing, 01 September 2010, vol./is. 39/5(501-502), 08842175

Author(s): Bovbjerg ML

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Obstetric Care](#)
[Professional Practice, Evidence-Based](#)
[Women's Health](#)

Source: CINAHL

14. Factors influencing the practice of exclusive breastfeeding among Hong Kong Chinese women: a questionnaire survey.

Citation: Journal of Clinical Nursing, 01 September 2010, vol./is. 19/17/18(2434-2445), 09621067

Author(s): Ku C; Chow SK

Language: English

Abstract: Aims and objectives. The purpose of this article is to explore the relationships between breastfeeding knowledge, self-efficacy and demographic factors on breastfeeding patterns among Hong Kong Chinese primiparous women. Background. There is substantial evidence showing that maternal education, social class, ethnic background and religion are related to the decision to initiate as well as continue breastfeeding. Nevertheless, not much is known about how the controllable factors are able to influence the practice with the Hong Kong Chinese population. Design. A cross-sectional and correlational design. Methods. A convenience sample of 82 subjects who had normal vaginal delivery in the maternity unit of a regional hospital in Hong Kong was recruited. Results. Linear regression analysis showed that subjects who lived with their mothers-in-law, had higher household income and higher gravida would be associated with a higher score in the Breastfeeding Self-Efficacy Scale. On the other hand, decisions to breastfeed made later in the pregnancy, father-in-law to ‘pei-yue’ (the Chinese practice whereby the new mother is expected to stay at home and to avoid all household chores and social activities during the first month after giving birth) and older in age would be associated with a lower score. Pei-yue is Chinese ritual of which the woman who has delivered should stay at home for one month and being taken care by others (this Chinese term is used throughout the article to indicate the time period described). Generalised estimating equations model revealed that women who had searched through the Internet for breastfeeding information, who had husbands to ‘pei yue’, lived in private housing, were married, had a domestic helper to ‘pei yue’ and who had attained higher education were more likely to practice exclusive breastfeeding. Conclusion. The social support from the family and breastfeeding self-efficacy have implications for continuing the practice of breastfeeding for primiparous women. Relevance to clinical practice. Future efforts aimed at promoting

exclusive breastfeeding could include the modifiable factors into consideration to better tailor interventions for successful, exclusive breastfeeding.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Self-Efficacy](#)
[Human](#)
[Questionnaires](#)
[Survey Research](#)
[Female](#)
[Attitude](#)
[Self-Efficacy](#)
[Primiparas](#)
[Cross Sectional Studies](#)
[Correlational Studies](#)
[Convenience Sample](#)
[Linear Regression](#)
[Nonexperimental Studies](#)
[Logistic Regression](#)
[Translations](#)
[Reliability and Validity](#)
[Descriptive Statistics](#)
[Descriptive Research](#)
[Demography](#)
[Multiple Regression](#)
[Pearson's Correlation Coefficient](#)
[Confidence Intervals](#)
[Odds Ratio](#)
[Socioeconomic Factors](#)
[Step-Wise Multiple Regression](#)
[Hong Kong](#)

Source: CINAHL

15. Breastfeeding Ambivalence Among Low-Income African American and Puerto Rican Women in North and Central Brooklyn.

Citation: Maternal & Child Health Journal, 01 September 2010, vol./is. 14/5(696-704), 10927875

Author(s): Kaufman L; Deenadayalan S; Karpati A

Language: English

Abstract: This study explores low-income African American and Puerto Rican women's conceptions and practices around breastfeeding. It examines the impact of such diverse factors as social constructions of the body, local mores around infant care, the practicalities of food availability, in the context of interactions with family members and friends, institutions, and others in women's neighborhoods. The study employed ethnographic methods, including interviews and participant observation, with 28 families in two low-income Brooklyn neighborhoods. While women in this study felt that breastfeeding was the best way to feed their infants, their commitment turned to ambivalence in the face of their perceptions about the dangers of breast milk, the virtues of formula, and the practical and sociocultural challenges of breastfeeding. Women's ambivalence resulted in a widespread complementary feeding pattern that included breast milk and formula, and resulted in short breastfeeding durations. Findings suggest the critical role of breastfeeding "ambivalence" in driving thought and action in women's lives. Ambivalence erodes the permanence of breastfeeding intention, and makes feeding practices provisional. Ambivalence challenges breastfeeding promotion strategies, resulting in weakened public health messages and a difficult-to-realize public health goal.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)

[Human](#)
[Blacks](#)
[New York](#)
[Poverty](#)
[Hispanics](#)
[Female](#)
[Attitude](#)
[Ethnographic Research](#)
[Interviews](#)
[Field Notes](#)
[Audiorecording](#)
[Content Analysis](#)
[Coding](#)
[Research Subject Recruitment](#)
[Sample Size](#)

Source: CINAHL

16. Breastfeeding Intention Among Pregnant Hong Kong Chinese Women.

Citation: Maternal & Child Health Journal, 01 September 2010, vol./is. 14/5(790-798), 10927875

Author(s): Lau Y

Language: English

Abstract: This study set out to (1) estimate the prevalence of three forms of feeding intention among 2,178 pregnant women in six of Hong Kong's regional hospitals and (2) identify the associated demographic, socioeconomic, obstetric and relational correlates. The research design was exploratory, cross-sectional, and quantitative. The Chinese version of a self-administered questionnaire was used to collect the demographic, socio-economic, and obstetric characteristics of the women. Couples' relationships were investigated using the Dyadic Adjustment Scale. All women in the second trimester of their pregnancies who attended the target antenatal clinics within the data collection period of December 2004 to December 2006 were recruited. The prevalence rates of breastfeeding, mixed feeding and artificial feeding were 53.9%, 14.8%, and 31.3%, respectively. Women who had been born in Hong Kong, lived in accommodation that was \approx 300 feet (\sim 30 m), had made an early antenatal booking, had a planned pregnancy, were experiencing their first pregnancy, and had a lower level of conflict with their partners were significantly more likely to opt for breastfeeding. Women who had been born in Hong Kong and already had children were significantly more likely to choose mixed feeding, compared with the artificial group in a multinomial logistic regression model. These findings suggest that effective promotion of breastfeeding during the prenatal period must target the correlates of feeding intention.

Publication Type: journal article

Subject Headings:
[Breast Feeding](#)
[Women](#)
[Female](#)
[Pregnancy](#)
[Exploratory Research](#)
[Prevalence](#)
[Hong Kong](#)
[Demography](#)
[Socioeconomic Factors](#)
[Cross Sectional Studies](#)
[Self Report](#)
[Scales](#)
[Pilot Studies](#)
[Reliability](#)
[Validity](#)
[Data Analysis Software](#)

Chi Square Test
 Logistic Regression
 Statistical Significance
 Questionnaires
 Dyadic Adjustment Scale

Source: CINAHL

17. Assessing mandated breastfeeding education in Istanbul.

Citation: MCN: The American Journal of Maternal Child Nursing, 01 September 2010, vol./is. 35/5(293-296), 0361929X

Author(s): Dolgun G; YÄ¼ksel A

Language: English

Publication Type: journal article

Subject Headings: Breast Feeding
 Female
 Pregnancy
 Adult
 Human
 Cross Sectional Studies
 Interviews
 Questionnaires
 Descriptive Research
 Descriptive Statistics
 Maternal Attitudes
 Infant
 Weaning
 Infant Formula
 Outcomes of Education
 Turkey

Source: CINAHL

18. Baby Friendly update. Obesity and breastfeeding -- a review of the evidence.

Citation: Practising Midwife, 01 September 2010, vol./is. 13/8(36-38), 14613123

Language: English

Publication Type: journal article

Subject Headings: Breast Feeding
 Breast Feeding Promotion
 Obesity
 Growth
 Human
 Infant Behavior
 Infant Nutrition
 Information Resources
 Meta Analysis
 Systematic Review
 United Kingdom
 World Wide Web

Source: CINAHL

19. In utero and lactational exposure to low doses of chlorinated and brominated dioxins induces deficits in the fear memory of male mice.

Citation: Neurotoxicology, August 2010, vol./is. 31/4(385-90), 0161-813X;1872-9711 (2010 Aug)

Author(s): Haijima A; Endo T; Zhang Y; Miyazaki W; Takeyama M; Tohyama C

Institution: Laboratory of Environmental Health Sciences, Center for Disease Biology and Integrative Medicine, Graduate School of Medicine, The University of Tokyo, 7-3-1 Bunkyo-ku, Tokyo 113-0033, Japan.

Language: English

Abstract: Environmental-level in utero and lactational exposures to dioxins have been considered to affect brain functions of offspring. Here, we determined whether in utero and lactational exposure to 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD) and 2,3,7,8-tetrabromodibenzo-p-dioxin (TBDD), at the dose that does not harm the dams, affects the acquisition and retention of fear memory in mouse offspring. Pregnant C57BL/6J mice were administered by gavages TCDD or TBDD at a dose of 0 or 3.0 microg/kg body weight on gestation day 12.5, and their male offspring were examined for their behavior in adulthood. In the fear conditioning, a paired presentation of tone and foot shock was repeated three times, and retention tests for contextual and auditory fear memory were carried out 1 and 24h after the fear conditioning. Groups of mice that were exposed to TCDD and TBDD in utero and via lactation showed deficits in the contextual and auditory retention tests at 1 and 24h retention intervals. The present results suggest that maternal exposure to a low dose of TCDD or TBDD disrupts the functions of memory and emotion in male mouse offspring, and that the developmental toxicities of these chemicals are similar to each other. (c) 2010 Elsevier Inc. All rights reserved.

Country of Publication: Netherlands

CAS Registry Number: 0 (Dioxins); 0 (Environmental Pollutants); 1746-01-6 (Tetrachlorodibenzodioxin); 50585-41-6 (2,3,7,8-tetrabromodibenzo-4-dioxin)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Animals](#)
[*Breast Feeding/ae \[Adverse Effects\]](#)
[Conditioning, Classical/de \[Drug Effects\]](#)
[Dioxins/ad \[Administration & Dosage\]](#)
[*Dioxins/to \[Toxicity\]](#)
[Environmental Pollutants/ad \[Administration & Dosage\]](#)
[*Environmental Pollutants/to \[Toxicity\]](#)
[*Fear/px \[Psychology\]](#)
[Female](#)
[Lactation](#)
[Male](#)
[*Memory/de \[Drug Effects\]](#)
[Mice](#)
[Mice, Inbred C57BL](#)
[Pregnancy](#)
[*Prenatal Exposure Delayed Effects/px \[Psychology\]](#)
[Tetrachlorodibenzodioxin/ad \[Administration & Dosage\]](#)
[*Tetrachlorodibenzodioxin/to \[Toxicity\]](#)

Source: MEDLINE

20. Breast-feeding, postpartum and prepregnancy disease activity in multiple sclerosis.

Citation: Neurology, August 2010, vol./is. 75/5(474-6), 0028-3878;1526-632X (2010 Aug 3)

Author(s): Airas L; Jalkanen A; Alanen A; Pirttila T; Marttila RJ

Institution: Department of Neurology, Turku University Central Hospital, PO Box 52, 20521 Turku, Finland. laura.airas@utu.fi

Language: English

Country of Publication: United States

CAS Registry Number: 77238-31-4 (Interferon-beta)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)

[*Breast Feeding/ep \[Epidemiology\]](#)
[Female](#)
[Finland](#)
[Follow-Up Studies](#)
[Humans](#)
[Interferon-beta/tu \[Therapeutic Use\]](#)
[Multiple Sclerosis/dt \[Drug Therapy\]](#)
[*Multiple Sclerosis/ep \[Epidemiology\]](#)
[*Postpartum Period](#)
[Pregnancy](#)
[Pregnancy Complications/ep \[Epidemiology\]](#)
[Prospective Studies](#)
[Recurrence](#)
[Time Factors](#)
[Young Adult](#)

Source: MEDLINE

Full Text: Available in *fulltext* at [Ovid](#)

21. Postpartum disease activity and breastfeeding in multiple sclerosis revisited.

Citation: Neurology, August 2010, vol./is. 75/5(392-3), 0028-3878;1526-632X (2010 Aug 3)

Author(s): Kieseier BC; Wiendl H

Language: English

Country of Publication: United States

CAS Registry Number: 0 (Immunologic Factors)

Publication Type: Comment; Editorial

Subject Headings: [Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding](#)
[Female](#)
[Humans](#)
[Immunologic Factors/tu \[Therapeutic Use\]](#)
[Multiple Sclerosis/dt \[Drug Therapy\]](#)
[Multiple Sclerosis/ep \[Epidemiology\]](#)
[*Multiple Sclerosis/pp \[Physiopathology\]](#)
[Postpartum Period/de \[Drug Effects\]](#)
[*Postpartum Period/ph \[Physiology\]](#)
[Recurrence/pc \[Prevention & Control\]](#)
[Risk Factors](#)

Source: MEDLINE

Full Text: Available in *fulltext* at [Ovid](#)

22. Are maternal depression or symptom severity associated with breastfeeding intention or outcomes?.

Citation: Journal of Clinical Psychiatry, August 2010, vol./is. 71/8(1069-78), 0160-6689;1555-2101 (2010 Aug)

Author(s): Bogen DL; Hanusa BH; Moses-Kolko E; Wisner KL

Institution: Department of Pediatrics, University of Pittsburgh School of Medicine, Children's Hospital of Pittsburgh, Division of General Academic Pediatrics, Pittsburgh, PA 15213, USA. bogendl@upmc.edu

Language: English

Abstract: OBJECTIVE: Breastfeeding confers many health benefits to mothers and infants, while depression negatively affects mothers and infants. The aims of this study were to determine relationships between (1) major depressive disorder (MDD) and depressive symptom severity during pregnancy and breastfeeding intention; (2) MDD and depressive

symptom severity during pregnancy and breastfeeding initiation and status at 2 and 12 weeks; and (3) serotonin reuptake inhibitor (SRI) use and breastfeeding intention, initiation, and status at 2 and 12 weeks. **METHOD:** Women were followed prospectively from pregnancy through 12 weeks postpartum for infant feeding intention (breast, breast and formula, formula, and uncertain), feeding practices and MDD (Structured Clinical Interview for DSM-IV Disorders), and depressive symptom severity (Hamilton Depression Rating Scale). Bivariate analyses and multivariable regression modeling were conducted. The study was conducted from July 2004 to September 2007. **RESULTS:** Study participants (intention $n = 168$, initiation $n = 151$, 2 weeks $n = 137$, 12 weeks $n = 103$) were well educated (63% college degrees), older (49% ≥ 31 years), and predominantly white (77%). At enrollment, 23% had MDD, 21% had significant depressive symptoms, and 16% were taking an SRI. Neither MDD nor depressive symptom severity in pregnancy was related to breastfeeding intention, initiation or duration at 2 and 12 weeks. Intention to exclusively breastfeed was the most significant predictor of breastfeeding initiation and duration. SRI use in pregnancy was negatively associated with breastfeeding intention. SRI use at 2 weeks was negatively associated with 12-week breastfeeding status. **CONCLUSION:** Pregnancy is the optimal time to intervene to increase breastfeeding rates. Future research should identify strategies to overcome breastfeeding barriers posed by SRI use. Copyright 2010 Physicians Postgraduate Press, Inc.

Country of Publication: United States

CAS Registry Number: 0 (Serotonin Uptake Inhibitors)

Publication Type: Comparative Study; Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adolescent](#)
[Adult](#)
[Bottle Feeding](#)
[Breast Feeding/ae \[Adverse Effects\]](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[Breast Feeding/px \[Psychology\]](#)
[*Depression/di \[Diagnosis\]](#)
[Depression/dt \[Drug Therapy\]](#)
[Depression/ep \[Epidemiology\]](#)
[Depression, Postpartum/di \[Diagnosis\]](#)
[Depression, Postpartum/dt \[Drug Therapy\]](#)
[Depression, Postpartum/ep \[Epidemiology\]](#)
[*Depressive Disorder, Major/di \[Diagnosis\]](#)
[Depressive Disorder, Major/dt \[Drug Therapy\]](#)
[Depressive Disorder, Major/ep \[Epidemiology\]](#)
[Diagnostic and Statistical Manual of Mental Disorders](#)
[Female](#)
[Follow-Up Studies](#)
[Humans](#)
[*Intention](#)
[Maternal Behavior](#)
[Middle Aged](#)
[Pregnancy](#)
[*Pregnancy Complications/di \[Diagnosis\]](#)
[Pregnancy Complications/dt \[Drug Therapy\]](#)
[Pregnancy Complications/ep \[Epidemiology\]](#)
[Prospective Studies](#)
[Psychiatric Status Rating Scales](#)
[Serotonin Uptake Inhibitors/ae \[Adverse Effects\]](#)
[Serotonin Uptake Inhibitors/tu \[Therapeutic Use\]](#)
[Severity of Illness Index](#)
[Treatment Outcome](#)

Source: MEDLINE

23. Knowledge and beliefs about exclusive breastfeeding among rural Nigerian men in Enugu, Southeast Nigeria.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, August 2010, vol./is. 5/(169-71), 1556-8253;1556-8342 (2010 Aug)

Author(s): Aniebue PN; Aniebue UU; Adimora GN

Institution: Department of Community Medicine, Univeristy of Nigeria Teaching Hospital, Enigu, Nigeria. naniebue@yahoo.com

Language: English

Abstract: AIM: This study evaluated the knowledge, beliefs, and attitude of rural Nigerian men to exclusive breastfeeding. SUBJECTS AND METHODS: A sample of 200 men drawn from a rural community in Enugu, Nigeria was studied. RESULTS: One hundred fifty-four (82.4%) respondents had heard of exclusive breastfeeding. Only 29.9% knew the correct time for initiation of exclusive breastfeeding, while 30.5% believed that breastmilk alone was sufficient for the first 6 months of life of an infant. One hundred six (56.7%) accept the practice of exclusive breastfeeding, while 38.5% accepted that colostrum is safe for a child. Reasons for rejecting colostrum were chiefly because it is perceived as poisonous, dirty milk and culturally unacceptable. Educational status and age significantly affected knowledge and acceptance of exclusive breastfeeding among the respondents. CONCLUSION: There is a critical need to target men for intensive breastfeeding education.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [Adult](#)
[Age Distribution](#)
[Aged](#)
[Aged, 80 and over](#)
[*Breast Feeding/px \[Psychology\]](#)
[Educational Status](#)
[*Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[Male](#)
[Men/ed \[Education\]](#)
[*Men/px \[Psychology\]](#)
[Middle Aged](#)
[Nigeria](#)
[Rural Population](#)
[Young Adult](#)

Source: MEDLINE

24. Breastfeeding rates among mothers of infants with neonatal abstinence syndrome.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, August 2010, vol./is. 5/(159-64), 1556-8253;1556-8342 (2010 Aug)

Author(s): Wachman EM; Byun J; Philipp BL

Institution: Department of Pediatrics, Boston Medical Center, Massachusetts, USA.

Language: English

Abstract: BACKGROUND: Woman who struggle with drug addiction during pregnancy are perhaps the most vulnerable of new mothers. The opioid substitution medications methadone and buprenorphine are both compatible with breastfeeding. The objective of this study is to determine breastfeeding rates among opioid-dependent women giving birth in a Baby-Friendly Hospital. METHODS: We performed a retrospective chart review of all infants born at Boston Medical Center (Boston, MA) between July 2003 and January 2009 with a diagnosis of neonatal abstinence syndrome. Feeding information was obtained, as well as baseline medical information about the mother-infant pairs. Breastfeeding eligibility was determined by a negative urine toxicology screen on admission, no illicit drug use in the third trimester, and a negative human immunodeficiency virus status. RESULTS: Two hundred seventy-six mother-infant pairs

were identified. Forty percent of the mothers carried one or more psychiatric diagnoses; 24% were taking two or more psychiatric medications. Sixty-eight percent of the mothers were eligible to breastfeed; of those, 24% breastfed to some extent during their infant's hospitalization. Sixty-percent of those who initiated stopped breastfeeding after an average of 5.88 days (SD 6.51). CONCLUSIONS: Breastfeeding rates among opioid-dependent women were low, with three-quarters of those eligible electing not to breastfeed. Of the minority of women who did choose to breastfeed, more than half stopped within 1 week.

Country of Publication: United States
CAS Registry Number: 52485-79-7 (Buprenorphine); 76-99-3 (Methadone)
Publication Type: Journal Article
Subject Headings: [Adult](#)

[*Breast Feeding/ep \[Epidemiology\]](#)
[Buprenorphine/ad \[Administration & Dosage\]](#)
[Female](#)
[Humans](#)
[Infant, Newborn](#)
[Methadone/ad \[Administration & Dosage\]](#)
[*Mothers/px \[Psychology\]](#)
[*Neonatal Abstinence Syndrome/co \[Complications\]](#)
[*Opioid-Related Disorders/co \[Complications\]](#)
[Retrospective Studies](#)
[Time Factors](#)
[Young Adult](#)

Source: MEDLINE

25. Abuse, neglect, and breastfeeding.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, August 2010, vol./is. 5/(139-40), 1556-8253;1556-8342 (2010 Aug)
Author(s): Lawrence RA
Language: English
Country of Publication: United States
Publication Type: Editorial
Subject Headings: [Adult](#)
[*Breast Feeding/px \[Psychology\]](#)
[Child](#)
[*Child Abuse/px \[Psychology\]](#)
[Child Abuse, Sexual/px \[Psychology\]](#)
[Female](#)
[Humans](#)
[*Mothers/px \[Psychology\]](#)
Source: MEDLINE

26. ABM Clinical Protocol #7: Model Breastfeeding Policy (Revision 2010).

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, August 2010, vol./is. 5/(173-7), 1556-8253;1556-8342 (2010 Aug)
Author(s): Philipp BL; Academy of Breastfeeding Medicine Protocol Committee
Language: English
Abstract: A central goal of The Academy of Breastfeeding Medicine is the development of clinical protocols for managing common medical problems that may impact breastfeeding success. These protocols serve only as guidelines for the care of breastfeeding mothers and infants and do not delineate an exclusive course of treatment or serve as standards of

medical care. Variations in treatment may be appropriate according to the needs of an individual patient.

Country of Publication: United States

Publication Type: Practice Guideline; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: [Breast Feeding/ep \[Epidemiology\]](#)
[Breast Feeding/px \[Psychology\]](#)
[*Breast Feeding](#)
[Female](#)
[*Health Policy/lj \[Legislation & Jurisprudence\]](#)
[*Health Promotion/og \[Organization & Administration\]](#)
[Humans](#)
[Social Support](#)
[Societies](#)
[United States](#)

Source: MEDLINE

27. Torun.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, August 2010, vol./is. 5/(179), 1556-8253;1556-8342 (2010 Aug)

Author(s): Calnen G

Language: English

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [*Breast Feeding](#)
[*Congresses as Topic](#)
[Humans](#)

Source: MEDLINE

28. The impact of childhood sexual abuse on childbearing and breastfeeding: the role of maternity caregivers.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, August 2010, vol./is. 5/(141-5), 1556-8253;1556-8342 (2010 Aug)

Author(s): Klaus P

Institution: Erickson Institute, Santa Rosa, California, USA. phyllisklaus@sbcglobal.net

Language: English

Abstract: This article is not a research study but rather a review of current understanding of the effects of childhood sexual abuse on the childbearing woman. Approximately one in four women has experienced early sexual abuse. Such a history can affect a woman's relationships with loved ones and care providers, contribute to her fears of labor and birth, and affect her ability to attach to her baby. It continues to challenge her on issues of breastfeeding and parenting. Care providers can benefit by recognizing some typical indicators of an abuse history and some of the elements in perinatal care that may become triggers for memories or adverse reactions for survivors of abuse, as well as learn some strategies for helping them. There are specific suggestions to help women survivors suffering with anxiety related to breastfeeding. How to recognize or ask about a history of sexual abuse and how to make it safe emotionally for a woman to share her story or disclose her fears are important so that the provider can collaborate with the woman to avoid re-traumatization.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [Adult](#)
[*Adult Survivors of Child Abuse/px \[Psychology\]](#)

[*Breast Feeding/px \[Psychology\]](#)
[Female](#)
[Humans](#)
[*Nurse's Role](#)
[Parenting/px \[Psychology\]](#)
[Parturition/px \[Psychology\]](#)
[*Perinatal Care](#)
[Postnatal Care/px \[Psychology\]](#)
[*Pregnancy/px \[Psychology\]](#)
[Social Support](#)

Source: MEDLINE

29. First-day newborn weight loss predicts in-hospital weight nadir for breastfeeding infants.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, August 2010, vol./is. 5/(165-8), 1556-8253;1556-8342 (2010 Aug)

Author(s): Flaherman VJ; Bokser S; Newman TB

Institution: Department of Pediatrics, University of California, San Francisco, 94143-0503, USA.
FlahermanV@peds.ucsf.edu

Language: English

Abstract: BACKGROUND: Exclusive breastfeeding reduces infant infectious disease. Losing > or =10% birth weight may lead to formula use. The predictive value of first-day weight loss for subsequent weight loss has not been studied. The objective of the present study was to evaluate the relationship between weight loss at <24 hours and subsequent in-hospital weight loss > or =10%. METHODS: For 1,049 infants, we extracted gestational age, gender, delivery method, feeding type, and weights from medical records. Weight nadir was defined as the lowest weight recorded during birth hospitalization. We used multivariate logistic regression to assess the effect of first-day weight loss on subsequent in-hospital weight loss. RESULTS: Mean in-hospital weight nadir was 6.0 +/- 2.6%, and mean age at in-hospital weight nadir was 38.7 +/- 18.5 hours. While in the hospital 6.4% of infants lost > or =10% of birth weight. Infants losing > or =4.5% birth weight at <24 hours had greater risk of eventual in-hospital weight loss > or =10% (adjusted odds ratio 3.57 [1.75, 7.28]). In this cohort, 798 (76.1%) infants did not have documented weight gain while in the hospital. CONCLUSIONS: Early weight loss predicts higher risk of > or =10% in-hospital weight loss. Infants with high first-day weight loss could be targeted for further research into improved interventions to promote breastfeeding.

Country of Publication: United States

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings:
[*Breast Feeding/ep \[Epidemiology\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Cohort Studies](#)
[Female](#)
[Gestational Age](#)
[Humans](#)
[Infant Formula/ad \[Administration & Dosage\]](#)
[Infant Nutritional Physiological Phenomena](#)
[Infant, Newborn](#)
[Logistic Models](#)
[Male](#)
[Multivariate Analysis](#)
[Postpartum Period](#)
[Predictive Value of Tests](#)
[Retrospective Studies](#)
[Time Factors](#)
[*Weight Loss/ph \[Physiology\]](#)

Source: MEDLINE

30. Residency curriculum improves breastfeeding care.

Citation:	Pediatrics, August 2010, vol./is. 126/2(289-97), 0031-4005;1098-4275 (2010 Aug)
Author(s):	Feldman-Winter L; Barone L; Milcarek B; Hunter K; Meek J; Morton J; Williams T; Naylor A; Lawrence RA
Institution:	Division of Adolescent Medicine, Department of Pediatrics, Cooper University Hospital, University of Medicine and Dentistry of New Jersey-Robert Wood Johnson Medical School, Camden, NJ 08103-1438, USA. winter-lori@cooperhealth.edu
Language:	English
Abstract:	<p>OBJECTIVES: Multiple studies have revealed inadequacies in breastfeeding education during residency, and results of recent studies have confirmed that attitudes of practicing pediatricians toward breastfeeding are deteriorating. In this we study evaluated whether a residency curriculum improved physician knowledge, practice patterns, and confidence in providing breastfeeding care and whether implementation of this curriculum was associated with increased breastfeeding rates in patients. SUBJECTS AND METHODS: A prospective cohort of 417 residents was enrolled in a controlled trial of a novel curriculum developed by the American Academy of Pediatrics in conjunction with experts from the American College of Obstetricians and Gynecologists, American Academy of Family Physicians, and Association of Pediatric Program Directors. Six intervention residency programs implemented the curriculum, whereas 7 control programs did not. Residents completed pretests and posttests before and after implementation. Breastfeeding rates were derived from randomly selected medical charts in hospitals and clinics at which residents trained. RESULTS: Trained residents were more likely to show improvements in knowledge (odds ratio [OR]: 2.8 [95% confidence interval (CI): 1.5-5.0]), practice patterns related to breastfeeding (OR: 2.2 [95% CI: 1.3-3.7]), and confidence (OR: 2.4 [95% CI: 1.4-4.1]) than residents at control sites. Infants at the institutions in which the curriculum was implemented were more likely to breastfeed exclusively 6 months after intervention (OR: 4.1 [95% CI: 1.8-9.7]). CONCLUSIONS: A targeted breastfeeding curriculum for residents in pediatrics, family medicine, and obstetrics and gynecology improves knowledge, practice patterns, and confidence in breastfeeding management in residents and increases exclusive breastfeeding in their patients. Implementation of this curriculum may similarly benefit other institutions.</p>
Country of Publication:	United States
Publication Type:	Journal Article; Multicenter Study; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, P.H.S.
Subject Headings:	<p>Adult *Breast Feeding *Curriculum Female *Health Education *Health Promotion Humans Infant *Infant Care/st [Standards] Infant, Newborn *Internship and Residency Male *Pediatrics/ed [Education] *Primary Health Care/mt [Methods]</p>
Source:	MEDLINE

31. West Nile virus (WNV) transmission routes in the murine model: intrauterine, by breastfeeding and after cannibal ingestion.

Citation:	Virus Research, August 2010, vol./is. 151/2(240-3), 0168-1702;1872-7492 (2010 Aug)
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Author(s): Blázquez AB; Sáiz JC

Institution: Departamento de Biotecnolog໚, Instituto Nacional de Investigación y Tecnolog໚ Agraria y Alimentaria (INIA), Ctra. Coruña Km. 7.5, 28040 Madrid, Spain.

Language: English

Abstract: Since its first detection in New York in 1999, West Nile virus (WNV) has already caused over 1000 human deaths in the U.S. Although the virus is usually transmitted by mosquito bites; other routes, such as intrauterine and breastfeeding, have been occasionally reported in humans. To investigate alternative routes of WNV transmission, mice were inoculated during gestation and after delivery, and offspring from infected and non-infected mothers were interchanged and nursed as foster babies. Intrauterine and breastfeeding transmission was confirmed after WNV detection, by quantitative RT-PCR and viral culture infectivity, in babies born to infected mothers and in newborns that were nursed by mothers infected after delivery. All infected mothers, either experimentally or after cannibal ingestion of infected fostered babies, succumbed to the disease, as did most of their nursed babies. These results indicate that WNV is efficiently transmitted by vertical routes (intrauterine and lactation) and after cannibal ingestion of infected animals. Copyright 2010 Elsevier B.V. All rights reserved.

Country of Publication: Netherlands

CAS Registry Number: 0 (RNA, Viral)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Animals](#)
[*Breast Feeding](#)
[Disease Models, Animal](#)
[*Eating](#)
[Female](#)
[*Fetal Diseases/vi \[Virology\]](#)
[Humans](#)
[*Infectious Disease Transmission, Vertical](#)
[Mice](#)
[Pregnancy](#)
[*Pregnancy Complications, Infectious](#)
[RNA, Viral/ip \[Isolation & Purification\]](#)
[Reverse Transcriptase Polymerase Chain Reaction](#)
[Virus Cultivation](#)
[*West Nile Fever/tm \[Transmission\]](#)
[West Nile virus/ge \[Genetics\]](#)
[*West Nile virus/ip \[Isolation & Purification\]](#)

Source: MEDLINE

32. The elusive mechanistic link between exclusive breast-feeding and lower risk of postnatal mother-to-child HIV transmission.

Citation: Clinical Infectious Diseases, August 2010, vol./is. 51/4(474-5; author reply 475-6), 1058-4838;1537-6591 (2010 Aug 15)

Author(s): Filteau S

Language: English

Country of Publication: United States

Publication Type: Letter

Subject Headings: [*Breast Feeding/ae \[Adverse Effects\]](#)
[Female](#)
[*HIV Infections/pc \[Prevention & Control\]](#)
[*HIV Infections/tm \[Transmission\]](#)
[Humans](#)

Infant
 Infant, Newborn
 *Infectious Disease Transmission, Vertical/pc [Prevention & Control]
 *Risk Assessment

Source: MEDLINE

33. The Beginning Breastfeeding Survey: measuring mothers' perceptions of breastfeeding effectiveness during the postpartum hospitalization.

Citation: Research in Nursing & Health, August 2010, vol./is. 33/4(329-44), 0160-6891;1098-240X (2010 Aug)

Author(s): Mulder PJ; Johnson TS

Institution: College of Nursing, University of Iowa, 50 Newton Road, Iowa City, IA 52242-1121, USA.

Language: English

Abstract: No current breastfeeding assessment tool assesses the mother's perception of breastfeeding effectiveness during the early postpartum. Psychometric analysis of a new tool, the Beginning Breastfeeding Survey (BBS), in a multi-racial sample of 131 women revealed a coefficient alpha of .90. Factor analysis yielded three factors, (a) Maternal Breastfeeding Competence and Emotional Satisfaction, (b) Maternal Discomfort and Anxiety, and (c) Infant Breastfeeding Skill and Emotional Satisfaction. The BBS demonstrated discriminant validity in known group analyses and convergent validity with breastfeeding self-efficacy and postpartum fatigue. Future research will focus on improving the internal consistency reliability of the BBS and examining its ability to identify women at risk for breastfeeding problems during the postpartum hospitalization. 2010 Wiley Periodicals, Inc.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't; Validation Studies

Subject Headings: Adolescent
 Adult
 Breast Feeding/px [Psychology]
 *Breast Feeding
 Factor Analysis, Statistical
 Female
 Humans
 Midwestern United States
 Mothers/px [Psychology]
 *Nursing Assessment
 Postpartum Period
 Pregnancy
 Prospective Studies
 Psychometrics
 Questionnaires
 Reproducibility of Results
 Self Efficacy

Source: MEDLINE

34. Lactational mastitis: recognition and breastfeeding support.

Citation: British Journal of Midwifery, 01 August 2010, vol./is. 18/8(503-508), 09694900

Author(s): Noonan M

Language: English

Abstract: Mastitis is an inflammatory condition of the breast which may be infective or non-infective. The incidence of lactational mastitis may reach 33% but is usually less than 10% (World Health Organization, 2000). A number of predisposing causes have been

identified. A case study has been included and the discussion may assist the midwife in recognizing and supporting the woman with lactational mastitis.

Publication Type: journal article

Subject Headings: [Lactation](#)
[Mastitis](#)
[Breast Feeding](#)
[Midwives](#)
[Professional Role](#)
[Mastitis](#)
[Mastitis](#)
[Postnatal Period](#)
[Mastitis](#)
[Mastitis](#)
[Mastitis](#)
[Latching, Breastfeeding](#)
[Analgesics](#)
[Antibiotics](#)
[Alternative Therapies](#)

Source: CINAHL

35. JOURNAL CLUB. Also of Note.

Citation: Contemporary Pediatrics, 01 August 2010, vol./is. 27/8(18-18), 87500507

Language: English

Publication Type: journal article

Subject Headings: [Fever](#)
[Immunization](#)
[Breast Feeding](#)
[Infant](#)

Source: CINAHL

36. Contextualising risk, constructing choice: breastfeeding and good mothering in risk society.

Citation: Health, Risk & Society, 01 August 2010, vol./is. 12/4(345-355), 13698575

Author(s): Knaak SJ

Language: English

Abstract: The 'whats' and 'hows' of feeding babies is a key interest in the arena of public health. In recent years, this has translated into an ever-increasing emphasis on breastfeeding; namely, on trying to get more mothers to breastfeed, to breastfeed exclusively, and to breastfeed for longer. It is argued, however, that this discourse is not a benign communicate about the relative benefits of breastfeeding, but an ideologically infused, moral discourse about what it means to be a 'good mother' in an advanced capitalist society. With the dual aim of (a) building upon existing cultural analyses of infant feeding, and (b) furthering our understanding of the construction of 'good mothering' in risk society, this paper examines how notions of risk/benefit are taken up and used in mothers' talk about their infant feeding decisions and experiences. The findings detailed in this paper support the thesis that the authority to define and monitor 'risk' in parenting is increasingly the purview of medical-scientific discourse. The analysis further demonstrates how, within such a framework, mothers' risk consciousness vis-a-vis infant feeding is activated primarily as an issue of identity, of 'good mothering' as defined by the dominant, expert-guided, scientific-medical discourse.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Culture](#)
[Motherhood](#)

[Parenting](#)
[Uncertainty](#)
[Adult](#)
[Decision Making](#)
[Female](#)
[Human](#)
[Interviews](#)
[Morals](#)
[Public Health](#)

Source: CINAHL

37. 'If they want to risk the health and well-being of their child, that's up to them': long-term breastfeeding, risk and maternal identity.

Citation: Health, Risk & Society, 01 August 2010, vol./is. 12/4(357-367), 13698575

Author(s): Faircloth CR

Language: English

Abstract: This article examines the narratives of women who breastfeed their children for 'extended' periods of time, as a means of exploring the relationship between risk-consciousness, infant feeding and maternal identity. The paper shows that whilst these women practice a form of infant feeding which is validated by wider policy directives emphasising the risks associated with formula milk use, their 'identity work' is not as straightforward as may be expected. Indeed, women sit at a juncture between affirmation and marginalisation, highlighting a significant dissonance between statistical, ideological and cultural norms. The argument is that the widespread moralisation of infant feeding practices (and parenting more generally) appears to have amplified tensions between various 'tribes' of mothers. In terms of risk consciousness, this leaves the mothers in this sample in a double bind: on the one hand, their marginal position is affirmed through recourse to risk reduction, on the other, their non-conventional practices are left open to the charge of 'riskiness' with respect to the social and emotional development of their children.

Publication Type: journal article

Subject Headings:
[Breast Feeding](#)
[Child Health](#)
[Gender Identity](#)
[Uncertainty](#)
[Wellness](#)
[Adult](#)
[Child, Preschool](#)
[Ethnographic Research](#)
[Female](#)
[Human](#)
[Infant](#)
[Male](#)
[Middle Age](#)
[Questionnaires](#)
[Semi-Structured Interview](#)

Source: CINAHL

38. Managing breastfeeding and work: a Foucauldian secondary analysis.

Citation: Journal of Advanced Nursing, 01 August 2010, vol./is. 66/8(1810-1818), 03092402

Author(s): Payne D; Nicholls DA

Language: English

Abstract: Aim. This paper is a report of a secondary analysis of the experiences of employed breastfeeding mothers. Background. Health promotion policies exhort mothers to feed their infants breastmilk exclusively for the first 6 months and partially until the age of 2

years. More mothers are returning to paid employment less than a year after having a baby. Combining breastfeeding and paid work is an issue for nursing and midwifery as predominantly female professions caring for women and their children. Method. Foucauldian discourse analysis was used for a secondary analysis of interviews performed in 2005 with 20 women who continued to breastfeed on their return to work. The discursive positions and disciplinary practices were identified and analysed. Findings. Combining breastfeeding and paid work required negotiating the positions of good mother and good worker. Being a good mother conferred health benefits on infants. Being a good worker required the mothers to constrain their breastfeeding practices. The practices performed by the mothers involved stockpiling breastmilk, maintaining milk supply, preparing the baby ready for absence, making sacrifices and remaining silent and invisible as a breastfeeding worker. Conclusion. Breastfeeding workers have the potential to threaten the focus of the workplace. They discipline themselves to minimize their disruptive potential. Such strategies serve to maintain the marginalization of breastfeeding in the workplace and to keep women's efforts to continue breastfeeding invisible. The work of breastfeeding workers needs to be better recognized and supported.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Mothers, Working](#)
[Power](#)
[Self Care](#)
[Adult](#)
[Audiorecording](#)
[Discourse Analysis](#)
[Female](#)
[Human](#)
[Interviews](#)
[Milk Expression](#)
[New Zealand](#)
[Purposive Sample](#)
[Qualitative Studies](#)
[Secondary Analysis](#)
[Thematic Analysis](#)
[Work Environment](#)

Source: CINAHL

39. Carpal Tunnel Syndrome.

Citation: Nursing for Women's Health, 01 August 2010, vol./is. 14/4(318-321), 17514851

Author(s): O'Donnell M; Elio R; Day D

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Carpal Tunnel Syndrome](#)
[Obstetric Care](#)
[Coping](#)
[Mothers](#)
[Female](#)
[Pregnancy](#)
[Infant, Newborn](#)
[Activities of Daily Living](#)
[Functional Status](#)
[Carpal Tunnel Syndrome](#)
[Carpal Tunnel Syndrome](#)
[Splints](#)
[Information Resources](#)
[World Wide Web](#)

[Carpal Tunnel Syndrome](#)
[Patient Education](#)
[Breast Feeding Positions](#)
[Obstetric Nursing](#)
[Nursing Role](#)

Source: CINAHL

40. Breastfeeding challenge.

Citation: Nursing Update, 01 August 2010, vol./is. 34/7(60-62),

Language: English

Abstract: World Breastfeeding Week is celebrated every year from 1 to 7 August in more than 120 countries to encourage breastfeeding and improve the health of babies around the world. The word is that breastfeeding is definitely the best way to provide newborns with the nutrients they need.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Maternal-Child Health](#)
[Anniversaries and Special Events](#)
[Breast Feeding Promotion](#)
[Infant, Newborn](#)
[Information Resources](#)
[World Health Organization](#)
[World Wide Web](#)

Source: CINAHL

41. Clinical digest. Breastfeeding mothers retain less pregnancy weight gain.

Citation: Nursing Standard, 21 July 2010, vol./is. 24/46(0-), 00296570

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Mothers](#)
[Weight Gain](#)
[Bottle Feeding](#)
[Female](#)
[Infant, Newborn](#)
[Postnatal Period](#)
[Pregnancy](#)
[Weight Gain](#)

Source: CINAHL

42. How Long to Breast-Feed.

Citation: Time, 05 July 2010, vol./is. 176/1(18-), 0040781X

Language: English

Abstract: The article discusses research which found that breast-feeding an infant for at least four months reduces the risk of respiratory and gastrointestinal-tract infections by approximately 45%.

Publication Type: Periodical

Subject Headings: [BREASTFEEDING -- Research](#)
[NEWBORN infants -- Health](#)
[PEDIATRIC respiratory diseases -- Prevention](#)

Source: HEALTH BUSINESS ELITE

43. Factors associated with successful establishment of breastfeeding in very preterm infants.

Citation:	Acta Paediatrica, July 2010, vol./is. 99/7(1000-4), 0803-5253;1651-2227 (2010 Jul)
Author(s):	Zachariassen G; Faerk J; Grytter C; Esberg B; Juvonen P; Halken S
Institution:	Hans Christian Andersen Children's Hospital, Odense University Hospital, Odense, Denmark. Gitte.Zachariassen@ouh.regionsyddanmark.dk
Language:	English
Abstract:	<p>AIM: To describe feeding practices at hospital discharge in relation to characteristics of the very preterm infants (VPI) and their mothers. METHODS: Design. Prospective hospital-based registration of very preterm infants born with a gestational age ≤ 32 weeks in Denmark during 2004-2008. Subjects. Healthy mothers and VPI without diseases causing eating disabilities at discharge. RESULTS: A total of 478 VPI were registered. At discharge, 60% were exclusively breastfed, 35% were exclusively bottlefed, and 5% were both breast- and bottle-fed. Mothers of high social class ($p = 0.000$) and 'not smoking' ($p = 0.003$) were significantly more often breastfeeding their preterm infant(s) at discharge. Single births infants tended more often to be breastfed ($p = 0.09$). Infant age at discharge and duration of hospitalization did not influence breastfeeding at discharge. Increase in weight z-score from birth to discharge was largest in the bottlefeeding-group compared with the breastfeeding-group ($p = 0.000$) probably as a result of feeding practice the last week(s) of hospitalization. CONCLUSION: Breastfeeding can successfully be established in very preterm infants. Mothers of low social classes, smokers, multiple birth and very preterm infants with low weight for age may need extra attention in breastfeeding establishing policies.</p>
Country of Publication:	Norway
Publication Type:	Journal Article; Research Support, Non-U.S. Gov't
Subject Headings:	Adult *Bottle Feeding/sn [Statistics & Numerical Data] *Breast Feeding/sn [Statistics & Numerical Data] Denmark Female Gestational Age Humans Infant, Newborn *Infant, Premature Intensive Care Units, Neonatal Male Mother-Child Relations Multiple Birth Offspring Prospective Studies Smoking Social Class
Source:	MEDLINE

44. Prolonged and exclusive breastfeeding reduces the risk of infectious diseases in infancy.

Citation:	Pediatrics, July 2010, vol./is. 126/1(e18-25), 0031-4005;1098-4275 (2010 Jul)
Author(s):	Duijts L; Jaddoe VW; Hofman A; Moll HA
Institution:	Generation R Study Group, Rotterdam, Netherlands.
Language:	English
Abstract:	<p>OBJECTIVE: To examine the associations of duration of exclusive breastfeeding with infections in the upper respiratory (URTI), lower respiratory (LRTI), and gastrointestinal tracts (GI) in infancy. METHODS: This study was embedded in the Generation R Study, a population-based prospective cohort study from fetal life onward in the Netherlands. Rates of breastfeeding during the first 6 months (never; partial for <4 months, not</p>

thereafter; partial for 4-6 months; exclusive for 4 months, not thereafter; exclusive for 4 months, partial thereafter; and exclusive for 6 months) and doctor-attended infections in the URTI, LRTI, and GI until the age of 12 months were assessed by questionnaires and available for 4164 subjects. RESULTS: Compared with never-breastfed infants, those who were breastfed exclusively until the age of 4 months and partially thereafter had lower risks of infections in the URTI, LRTI, and GI until the age of 6 months (adjusted odds ratio [aOR]: 0.65 [95% confidence interval (CI): 0.51-0.83]; aOR: 0.50 [CI: 0.32-0.79]; and aOR: 0.41 [CI: 0.26-0.64], respectively) and of LRTI infections between the ages of 7 and 12 months (aOR: 0.46 [CI: 0.31-0.69]). Similar tendencies were observed for infants who were exclusively breastfed for 6 months or longer. Partial breastfeeding, even for 6 months, did not result in significantly lower risks of these infections. CONCLUSIONS: Exclusive breastfeeding until the age of 4 months and partially thereafter was associated with a significant reduction of respiratory and gastrointestinal morbidity in infants. Our findings support health-policy strategies to promote exclusive breastfeeding for at least 4 months, but preferably 6 months, in industrialized countries.

Country of Publication: United States

Publication Type: Comparative Study; Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Age Factors](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Cohort Studies](#)
[*Communicable Disease Control/mt \[Methods\]](#)
[Communicable Diseases/ep \[Epidemiology\]](#)
[Confidence Intervals](#)
[Diarrhea, Infantile/ep \[Epidemiology\]](#)
[Diarrhea, Infantile/im \[Immunology\]](#)
[*Diarrhea, Infantile/pc \[Prevention & Control\]](#)
[Female](#)
[Follow-Up Studies](#)
[Gastroenteritis/ep \[Epidemiology\]](#)
[Gastroenteritis/im \[Immunology\]](#)
[Gastroenteritis/pc \[Prevention & Control\]](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[Male](#)
[Netherlands](#)
[Odds Ratio](#)
[Primary Prevention/mt \[Methods\]](#)
[Prospective Studies](#)
[Reference Values](#)
[Respiratory Tract Infections/ep \[Epidemiology\]](#)
[Respiratory Tract Infections/im \[Immunology\]](#)
[*Respiratory Tract Infections/pc \[Prevention & Control\]](#)
[Risk Assessment](#)
[Time Factors](#)

Source: MEDLINE

45. Passive acquisition of protective antibodies reactive with *Bordetella pertussis* in newborns via placental transfer and breast-feeding.

Citation: Scandinavian Journal of Immunology, July 2010, vol./is. 72/1(66-73), 0300-9475;1365-3083 (2010 Jul)

Author(s): Quinello C; Quintilio W; Carneiro-Sampaio M; Palmeira P

Institution: Department of Pediatrics, Faculdade de Medicina da Universidade de Sao Paulo, Brazil.

Language: English

Abstract:	<p>Although acquisition of anti-pertussis antibodies by the newborn via placental transfer has been demonstrated, a subsequent recrudescence of pertussis infection is often observed, particularly in infants. The present study investigated the passive transfer of anti-pertussis IgG and IgA antibodies to term newborns and their ability to neutralize bacterial pathogenicity in an in vivo experimental model using mice intracerebrally challenged with viable <i>Bordetella pertussis</i>. Forty paired samples of maternal/umbilical cord sera and colostrum were obtained. Anti-pertussis antibodies were analysed by immunoenzymatic assay and by Immunoblotting. Antibody neutralizing ability was assessed through intracerebral <i>B. pertussis</i> challenges in mice. Anti-pertussis IgG titres were equivalent in both maternal and newborn sera (medians = 1:225 and 1:265), with a transfer rate of 118%. The colostrum samples had variable specific IgA titres (median = 1:74). The immunoblotting assays demonstrated identical recognition profiles of paired maternal and newborn serum pools but different bacterial recognition intensities by colostrum pools. In the animal model, significant differences were always observed when the serum and colostrum samples and pools were compared with the positive control ($P < 0.05$). Unlike samples with lower anti-pertussis titres, samples with high titres showed protective capacities above 50%. Pertussis-absorbed serum and colostrum pools protected 30% of mice and purified IgG antibodies protected 65%. Both pooled and single-sample protective abilities were correlated with antibody titres ($P < 0.01$). Our data demonstrated the effectiveness of anti-pertussis antibodies in bacterial pathogenesis neutralization, emphasizing the importance of placental transfer and breast-feeding in protecting infants against respiratory infections caused by <i>Bordetella pertussis</i>.</p>
Country of Publication:	England
CAS Registry Number:	0 (Antibodies, Bacterial)
Publication Type:	Journal Article; Research Support, Non-U.S. Gov't
Subject Headings:	<p> Adolescent Adult Animals Animals, Newborn Antibodies, Bacterial/bl [Blood] *Antibodies, Bacterial/im [Immunology] *Bordetella pertussis/im [Immunology] *Breast Feeding Colostrum/im [Immunology] Female Humans *Immunity, Maternally-Acquired/im [Immunology] Immunoblotting Infant, Newborn Male Mice *Placenta/im [Immunology] Pregnancy *Whooping Cough/im [Immunology] Whooping Cough/pc [Prevention & Control] Young Adult </p>
Source:	MEDLINE

46. Breastfeeding experiences of mothers from disadvantaged groups: a review.

Citation:	Community Practitioner, July 2010, vol./is. 83/7(30-3), 1462-2815;1462-2815 (2010 Jul)
Author(s):	MacGregor E; Hughes M
Institution:	Leicester Royal Infirmary.
Language:	English
Abstract:	<p>Despite the World Health Organization promoting breastfeeding as the optimal feeding method for infants, the breastfeeding initiation rates within these disadvantaged groups'</p>

remains low. It is important to identify the factors that prevent these groups from initiating and establishing successful breastfeeding. This review aims to identify the breastfeeding experiences of teenage mothers and mothers from low income groups. Qualitative research papers were identified using electronic and manual searches by following a systematic methodology. Nine relevant articles were critically analysed using a qualitative Critical Appraisal Skills Programme tool. Coding of the nine papers generated six themes. The benefits of breastfeeding known to these mothers were often superseded by the perceived barriers of breastfeeding, while the decision to breastfeed was frequently influenced by their social support network and prior exposure to breastfeeding. Disadvantaged mothers may require extra input and support to overcome any problems associated with breastfeeding. Developing healthcare professionals' capabilities to educate these disadvantaged groups, their social networks and the public about breastfeeding is crucial if it is to become established within our society.

Country of Publication: England

Publication Type: Journal Article; Review

Subject Headings: [Adolescent](#)
[Adult](#)
[*Attitude to Health](#)
[Breast Feeding/px \[Psychology\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Feeding](#)
[Female](#)
[Great Britain](#)
[Health Promotion](#)
[Health Services Needs and Demand](#)
[Humans](#)
[Mothers/ed \[Education\]](#)
[Mothers/px \[Psychology\]](#)
[Mothers/sn \[Statistics & Numerical Data\]](#)
[*Mothers](#)
[Nursing Methodology Research](#)
[Patient Education as Topic](#)
[Qualitative Research](#)
[Research Design](#)
[Social Support](#)
[Social Values](#)
[Socioeconomic Factors](#)
[Vulnerable Populations/px \[Psychology\]](#)
[Vulnerable Populations/sn \[Statistics & Numerical Data\]](#)
[*Vulnerable Populations](#)

Source: MEDLINE

47. [Facial and acral dermatitis in a breast-fed infant. Diagnosis: Acrodermatitis enteropathica]. [German] Faziale und akrale Hautveränderungen bei einem gestillten Säugling. Diagnose: Verdacht auf Acrodermatitis enteropathica.

Original Title: Faziale und akrale Hautveränderungen bei einem gestillten Säugling. Diagnose: Verdacht auf Acrodermatitis enteropathica.

Citation: Deutsche Medizinische Wochenschrift, July 2010, vol./is. 135/28-29(1427-8), 0012-0472;1439-4413 (2010 Jul)

Author(s): Edle von Jaschke AK; Kruse R

Institution: Universitathautklinik Dusseldorf, Moorenstr. 5, 40225 Dusseldorf. annkristin.vonjaschke@med.uni-duesseldorf.de

Language: German

Country of Publication: Germany

CAS Registry Number: 7440-66-6 (Zinc)

Publication Type: Case Reports; Journal Article

Subject Headings: [Acrodermatitis/bl \[Blood\]](#)
[*Acrodermatitis/di \[Diagnosis\]](#)
[*Breast Feeding/ae \[Adverse Effects\]](#)
[Diagnosis, Differential](#)
[Facial Dermatoses/bl \[Blood\]](#)
[*Facial Dermatoses/di \[Diagnosis\]](#)
[Humans](#)
[Infant](#)
[Male](#)
[Zinc/bl \[Blood\]](#)
[*Zinc/df \[Deficiency\]](#)

Source: MEDLINE

48. What are the risks associated with formula feeding? A re-analysis and review.

Citation: Breastfeeding Review, July 2010, vol./is. 18/2(25-32), 0729-2759;0729-2759 (2010 Jul)

Author(s): McNiel ME; Labbok MH; Abrahams SW

Institution: University of North Carolina School of Medicine, Charlotte 28209, USA.

Language: English

Abstract: BACKGROUND: Most infant feeding studies present infant formula use as 'standard' practice, supporting perceptions of formula feeding as normative and hindering translation of current research into counseling messages supportive of exclusive breastfeeding. To promote optimal counseling, and to challenge researchers to use exclusive breastfeeding as the standard, we have reviewed the scientific literature on exclusive breastfeeding and converted reported odds ratios to allow discussion of the 'risks' of any formula use. METHODS: Studies indexed in PubMed that investigated the association between exclusive breastfeeding and otitis media, asthma, types 1 and 2 diabetes, atopic dermatitis, and infant hospitalization secondary to lower respiratory tract diseases were reviewed. Findings were reconstructed with exclusive breastfeeding as the standard, and levels of significance calculated. RESULTS: When exclusive breastfeeding is set as the normative standard, the re-calculated odds ratios communicate the risks of any formula use. For example, any formula use in the first 6 months is significantly associated with increased incidence of otitis media (OR: 1.78, 95% CI: 1.19, 2.70 and OR: 4.55, 95% CI: 1.64, 12.50 in the available studies; pooled OR for any formula in the first 3 mo: 2.00, 95% CI: 1.40, 2.78). Only shorter durations of exclusive breastfeeding are available to use as standards for calculating the effect of 'any formula use' for type 1 diabetes, asthma, atopic dermatitis, and hospitalization secondary to lower respiratory tract infections. CONCLUSIONS: Exclusive breastfeeding is an optimal practice, compared with which other infant feeding practices carry risks. Further studies on the influence of presenting exclusive breastfeeding as the standard in research studies and counseling messages are recommended.

Country of Publication: Australia

Publication Type: Journal Article; Research Support, Non-U.S. Gov't; Review

Subject Headings: [*Breast Feeding](#)
[Chronic Disease](#)
[Humans](#)
[Infant](#)
[*Infant Food/ae \[Adverse Effects\]](#)
[*Infant Formula/ad \[Administration & Dosage\]](#)
[Infant, Newborn](#)
[Odds Ratio](#)
[Risk Assessment](#)

Source: MEDLINE

49. 2006-07 north metropolitan Perth breastfeeding cohort study: how long are mothers breastfeeding?.

Citation: Breastfeeding Review, July 2010, vol./is. 18/2(14-24), 0729-2759;0729-2759 (2010 Jul)

Author(s): Forde KA; Miller LJ

Institution: child and Adolescent Community Health, Child and Adolescent Health Service, Western Australia. karen.forde@health.wa.gov.au

Language: English

Abstract: Information about local breastfeeding rates and predictors of breastfeeding outcomes can assist with improving health planning and community support. Longitudinal infant feeding data were collected during scheduled contacts with a Community Child Health Nurse and a telephone survey at 6 months for 3828 infants in Perth, Western Australia. Breastfeeding rates were below recommended targets. Regression analyses identified several significant protective and risk predictors of breastfeeding outcomes. Factors that increased the likelihood of use of artificial baby milk in hospital were low birth weight, multiple births, private hospital, primiparity and mother of Asian ethnicity. At 6 months, factors that reduced the likelihood of breastfeeding were young mother, no tertiary education, multiple births, use of artificial baby milk in hospital, low birth weight and mother seeking postnatal professional breastfeeding advice within 14 days. A strong commitment by health leaders and professionals is required across the continuum of care to provide timely and consistent support to maintain breastfeeding.

Country of Publication: Australia

Publication Type: Journal Article

Subject Headings: [Adult](#)
[Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Cohort Studies](#)
[Educational Status](#)
[Female](#)
[Humans](#)
[Infant](#)
[Infant Formula/ad \[Administration & Dosage\]](#)
[Infant, Newborn](#)
[Likelihood Functions](#)
[Maternal Age](#)
[Mothers/ed \[Education\]](#)
[*Mothers/px \[Psychology\]](#)
[Mothers/sn \[Statistics & Numerical Data\]](#)
[Risk Factors](#)
[Time Factors](#)
[Western Australia](#)
[Young Adult](#)

Source: MEDLINE

50. Beyond 'breast is best': next steps in the counterrevolution.

Citation: Breastfeeding Review, July 2010, vol./is. 18/2(5-9), 0729-2759;0729-2759 (2010 Jul)

Author(s): Akre J

Institution: International Board of Lactation Consultant Examiners, Geneva, Switzerland. akrej@yahoo.com

Language: English

Country of Publication: Australia

Publication Type: Journal Article; Review

Subject Headings: [Breast Feeding/ae \[Adverse Effects\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[Female](#)
[*Health Promotion/mt \[Methods\]](#)

Humans
 Infant
 Infant, Newborn
 *Mothers/ed [Education]

Source: MEDLINE

51. The quiet of birth and breastfeeding.

Citation: Practising Midwife, July 2010, vol./is. 13/7(50), 1461-3123;1461-3123 (2010 Jul-Aug)
Author(s): Temurcin J
Language: English
Country of Publication: England
Publication Type: Journal Article
Subject Headings: *Breast Feeding
 *Feeding Behavior
 Humans
 Infant, Newborn
 *Mother-Child Relations
 Mothers
 *Object Attachment
 *Postpartum Period

Source: MEDLINE

52. Factors affecting breastfeeding cessation after discontinuation of antiretroviral therapy to prevent mother-to-child transmission of HIV.

Citation: AIDS Care, 01 July 2010, vol./is. 22/7(866-873), 09540121
Author(s): Morgan MC; Masaba RO; Nyikuri M; Thomas TK
Language: English
Abstract: In the Kisumu Breastfeeding Study (KiBS), prevention of mother-to-child HIV transmission study, highly active antiretroviral therapy (HAART) is provided from 34 weeks gestation, through delivery to six months postpartum. The study recommends that women practice exclusive breastfeeding for six months, then wean abruptly. We sought to explore factors such as, education, family support, cultural norms, and sources of information about perinatal HIV transmission, which may influence a mother's decision to comply or not comply with the study's recommendation to stop breastfeeding when HAART is discontinued. We used semi-structured interviews of a purposive sample of 18 mothers participating in the KiBS. By interviewing 10 mothers who stopped breastfeeding and eight mothers who continued, it was possible to examine how different factors may have affected the groups of participants. All participants stated that it was not traditional to stop breastfeeding at six months. Participants who stopped breastfeeding reported more family support, were more educated, and were more likely to disclose their HIV status. Participants who continued breastfeeding more often expressed concern about stigma. Participants learned about mother-to-child transmission from clinics, churches, community groups, and other HIV-positive mothers. This substudy suggests that family support, education, and cultural norms are important factors that may influence a mother's decision regarding breastfeeding cessation. Thus, counseling and family support may play integral roles in the promotion of early breastfeeding cessation.

Publication Type: journal article

Subject Headings: Antiretroviral Therapy, Highly Active
 Breast Feeding
 Counseling
 Disease Transmission, Vertical
 HIV Infections
 Adult

[Audiorecording](#)
[Decision Making](#)
[Descriptive Statistics](#)
[Female](#)
[Funding Source](#)
[Health Knowledge](#)
[Human](#)
[Infant](#)
[Interview Guides](#)
[Male](#)
[Pregnancy](#)
[Qualitative Studies](#)
[Sample Size](#)
[Semi-Structured Interview](#)
[Support, Psychosocial](#)
[Thematic Analysis](#)
[Time Factors](#)
[Truth Disclosure](#)

Source: CINAHL

53. The effects of breastfeeding on cognitive and neurological development of children at 9 years.

Citation: Child: Care, Health & Development, 01 July 2010, vol./is. 36/4(583-590), 03051862

Author(s): Holme A; MacArthur C; Lancashire R

Language: English

Abstract: Background The effect of breastfeeding on cognitive development in the child remains controversial. The commonly observed association between breastfeeding and higher intelligence quotient (IQ) scores in children may result from the numerous confounding factors in this complex relationship. The aim of this study was to examine whether breastfeeding is associated with later differences in children's cognitive and neurological development. Methods Secondary analysis from a 9-year follow-up study of children of 982 smokers recruited to a randomized controlled trial of anti-smoking education in pregnancy in a maternity hospital between November 1981 and October 1982; and all ex-smokers and a random 25% sample of non-smokers during the same period (total 1853 women). Cognitive and neurological development of children was assessed by psychologists in schools using the British Ability Scales and Quick Neurological Screening Test (QNST). Data on breastfeeding and factors relevant to child development were drawn from interviews with mothers at home. Main outcome measures were IQ and QNST scores. Results A total of 1218 (66%) children were followed up. In total, 61.6% of children were breastfed, median duration being 12 weeks. Before adjustment, breastfeeding was significantly associated with higher total, verbal and visual IQ scores in children, and increasing duration was significantly correlated with IQ scores. Total IQ was 5.49 points higher in breastfed children ($P \leq 0.001$), but became non-significant after adjustment. Total IQ scores were most strongly associated with maternal education, maternal age, parity, housing and chronic childhood illness. Breastfeeding was significantly associated with better QNST scores on bivariate analysis but not after adjustment. QNST scores were most strongly associated with maternal education and the child's sex. Conclusions Breastfeeding was not associated with any crude IQ advantage or difference in neurological soft signs in children at 9 years. The greater IQ score associated with breastfeeding is accounted for by confounding, with maternal and socio-economic characteristics particularly important.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Child Development](#)
[Cognition](#)
[Nervous System](#)
[Child](#)
[Child, Preschool](#)

[Clinical Trials](#)
[Female](#)
[Funding Source](#)
[Human](#)
[Infant](#)
[Infant, Newborn](#)
[Intelligence](#)
[Interviews](#)
[Male](#)
[United Kingdom](#)

Source: CINAHL

54. Breastfeeding and child cognitive development.

Citation: Child: Care, Health & Development, 01 July 2010, vol./is. 36/4(591-591), 03051862

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Cognition](#)
[Child Development](#)

Source: CINAHL

55. Maternal oral health. Breastfeeding... Beall A. The breastfeeding--oral health relationship. Access 24:20-2, 2010.

Citation: Dental Abstracts, 01 July 2010, vol./is. 55/4(212-213), 00118486

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Dental Hygienists](#)
[Oral Health](#)
[Political Participation](#)
[Professional Role](#)
[Adult](#)
[Female](#)
[Infant](#)
[United States](#)

Source: CINAHL

56. An extended midwifery support programme did not increase breast feeding at 6 months, compared with standard postnatal midwifery support.

Citation: Evidence-Based Nursing, 01 July 2010, vol./is. 13/3(86-87), 13676539

Author(s): Wallace LM

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Midwifery](#)
[Support, Psychosocial](#)
[Clinical Trials](#)

Source: CINAHL

57. Many factors can determine whether a woman continues to breastfeed: knowing that breastfeeding is good for the baby is important to mothers but breastfeeding in public continues to be a negative experience for some.

Citation: Evidence-Based Nursing, 01 July 2010, vol./is. 13/3(93-94), 13676539

Author(s): McFadden A
Language: English
Publication Type: journal article
Subject Headings: [Breast Feeding](#)
[Weaning](#)
[Prospective Studies](#)
Source: CINAHL

58. A review of the psychometric properties of breastfeeding assessment tools.

Citation: JOGNN: Journal of Obstetric, Gynecologic & Neonatal Nursing, 01 July 2010, vol./is. 39/4(386-400), 08842175

Author(s): Ho Y; McGrath JM

Language: English

Abstract: Objective: To compare and contrast the clinical usefulness and psychometric properties of existing self-report instruments designed to assess maternal breastfeeding attitudes, experience, satisfaction, and confidence. Data Sources: CINAHL, PsycINFO, MEDLINE, PubMed databases from 1990 through 2009, and reference lists from selected articles were included in the search. Only published research articles written in English that provided reliability and validity of the self-report instruments for breastfeeding assessment were reviewed. Study Selection: A total of 301 articles were retrieved according to the initial selection criteria; 24 articles met the final inclusion criteria. Data Extraction: Data extracted from research studies addressing the purpose of the review and demonstrating psychometric properties were presented. Data Synthesis: Seven breastfeeding assessment tools were identified, and each tool demonstrated acceptable reliability and validity. Conclusion: Seven self-report instruments were found to be valid, reliable, and feasible measures for assessing breastfeeding relationships. But two of the seven self-report instruments were only tested in one study, and only one study used a self-report instrument (the Breastfeeding Attrition Prediction Tool-BAPT) to test the effectiveness of an intervention. It is recommended that researchers consider using the existing self-report instruments in future experimental studies to test the feasibility and effectiveness of breastfeeding interventions. Moreover, it is important to continue to conduct more well designed research to further test and refine these self-report instruments in a variety of diverse populations and ethnic groups and to further examine their psychometric properties. Clinical applications have not been well addressed and need to be considered in the design of these future works. Understanding how to best support the breastfeeding mother must be the long-term outcome of instrument development in this area.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Maternal Attitudes](#)
[Scales](#)
[CINAHL Database](#)
[Coefficient Alpha](#)
[Descriptive Statistics](#)
[Human](#)
[Medline](#)
[Psycinfo](#)
[PubMed](#)
[Self Report](#)
[Systematic Review](#)

Source: CINAHL

59. Breastfeeding educational interventions for health professionals: a synthesis of intervention studies.

Citation: Journal for Specialists in Pediatric Nursing, 01 July 2010, vol./is. 15/3(223-232), 15390136

Author(s): Watkins AL; Dodgson JE

Language: English

Abstract: PURPOSE. The purpose of this synthesis was to review intervention studies that focused on increasing the breastfeeding knowledge, self-confidence, and supportive behaviors of healthcare professionals. DESIGN AND METHODS. Fourteen articles were identified through database searches as the basis for this review. RESULTS. Breastfeeding education can be effective in increasing the knowledge and confidence of nurses. Duration and exclusivity rates for breastfeeding may also be improved. PRACTICE IMPLICATIONS. Improving nurses' knowledge of breastfeeding is a modifiable factor that is important in supporting a mother in her decision to breastfeed.

Publication Type: journal article

Subject Headings: [Breast Feeding Promotion](#)
[Breast Feeding](#)
[Education, Continuing](#)
[Health Personnel](#)
[Attitude of Health Personnel](#)
[Attitude to Breast Feeding](#)
[CINAHL Database](#)
[Clinical Competence](#)
[Cochrane Library](#)
[Confidence](#)
[Culture](#)
[Descriptive Statistics](#)
[Education Research](#)
[Female](#)
[Human](#)
[Infant, Newborn](#)
[Intervention Trials](#)
[Lactation](#)
[Medline](#)
[Midwives](#)
[Mothers](#)
[Obstetric Nursing](#)
[Outcomes of Education](#)
[Pediatric Nursing](#)
[Physicians](#)
[Postnatal Period](#)
[Professional Knowledge](#)
[Psycinfo](#)
[Research Methodology](#)
[Students, Nursing](#)

Source: CINAHL

60. An innovative model for achieving breast-feeding success in infants with complex surgical anomalies.

Citation: Journal of Perinatal & Neonatal Nursing, 01 July 2010, vol./is. 24/3(246-253), 08932190

Author(s): Edwards TM; Spatz DL

Language: English

Abstract: This manuscript describes an innovative nurse-driven continuous quality improvement project. Infants born with congenital surgical anomalies face significant challenges within the newborn period and human milk/breast-feeding may not be viewed as a priority. In many hospitals, nurses refer families to lactation consultants for all breast-feeding assistance and support. The Transition to Breast Pathway was developed on the basis of

the evidence-based standards and protocols at The Children's Hospital of Philadelphia. The pathway consists of (1) initiation of pumping and maintenance of milk supply, (2) mouth care with human milk, (3) skin-to-skin care, (4) nonnutritive sucking at the breast, (5) transitioning to at breast feeds. A sample of 80 infants were enrolled in this project. Major results of the project are as follows: (1) mother's average milk supply was approximately 603 mL/d, (2) 71% (57/80) of the infants received mouth care with human milk, (3) 48% (38/80) mother/infant dyads performed skin-to-skin care, (4) 60% (35/58) of mother/infant dyads performed nonnutritive sucking at the breast, (5) 100% (58/58) of mother-infant dyads transitioned to breast prior to discharge. This continuous quality improvement project demonstrates that nurses can and should lead the process of transitioning infants to at breast feeds.

Publication Type: journal article

Subject Headings: [Abnormalities](#)
[Breast Feeding](#)
[Breast Pumps](#)
[Neonatal Intensive Care Nursing](#)
[Support, Psychosocial](#)
[Education, Continuing \(Credit\)](#)
[Hospitals, Pediatric](#)
[Infant, Newborn](#)
[Intensive Care Units, Neonatal](#)
[Kangaroo Care](#)
[Medical Practice, Evidence-Based](#)
[Mouth Care](#)
[Multidisciplinary Care Team](#)
[Pennsylvania](#)
[Quality Improvement](#)
[Sucking Behavior](#)

Source: CINAHL

61. CE test.

Citation: Journal of Perinatal & Neonatal Nursing, 01 July 2010, vol./is. 24/3(254-255), 08932190

Language: English

Publication Type: journal article

Subject Headings: [Abnormalities](#)
[Breast Feeding](#)
[Breast Pumps](#)
[Neonatal Intensive Care Nursing](#)
[Education, Continuing \(Credit\)](#)

Source: CINAHL

62. Toward evidence based practice. Hospital practice and womens likelihood of fulfilling their intention to exclusively breastfeed.

Citation: MCN: The American Journal of Maternal Child Nursing, 01 July 2010, vol./is. 35/4(242-242), 0361929X

Author(s): Jonsdottir SS

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Hospitals](#)
[Female](#)
[United States](#)

Source: CINAHL

63. Factors associated with cessation of breastfeeding [Spanish].

Citation: Metas de Enfermería, 01 July 2010, vol./is. 13/6(61-67), 11387262

Author(s): Martínez Galiano JM

Language: English

Abstract: The World Health Organization (WHO) recommends exclusive breastfeeding for at least the first six months of life. Objectives: to determine the prevalence of exclusive breastfeeding at four months of life of the newborn; to ascertain the social-cultural profile of mothers who exclusively breastfeed at four months and determine the factors associated with the cessation of exclusive breastfeeding at four months. Methodology: descriptive and analytic observational study. Methodology: descriptive and analytic observational study. Probability sampling with consecutive recruitment of cases of mothers with four month old children, during the months of July and August 2008 in the "Ciudad de Jaen" university hospital. A self-elaborated and self-administered questionnaire was used. The dependent variable was exclusive breastfeeding at four months of life of the newborn and the independent variables were grouped into sociodemographic, pregnancy- and labour-related, newborn-related and breastfeeding-related variables. Results: at four months of life of the newborn 34,6% of mothers only breastfeed versus 51,9% who use formula exclusively. "Not having breast milk" was the reason why 26,47% of mothers quit breastfeeding. The cessation of breastfeeding was significantly higher in women whose labour had been induced ($p = 0,037$) and in women who had not been informed by their family members ($p = 0,041$). Conclusions: the rates of exclusive breastfeeding at four months are far from the WHO's recommendations. Hypogalactia is the main cause of breastfeeding cessation. Normal delivery and the participation of the family in informing the mother on breastfeeding favour the maintenance of breastfeeding.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Mothers](#)
[Weaning](#)
[Academic Medical Centers](#)
[Adult](#)
[Analytic Research](#)
[Delivery](#)
[Descriptive Research](#)
[Descriptive Statistics](#)
[Educational Status](#)
[Employment Status](#)
[Female](#)
[Human](#)
[Income](#)
[Infant](#)
[Infant, Newborn](#)
[Male](#)
[Patient Satisfaction](#)
[Pregnancy](#)
[Prenatal Care](#)
[Probability Sample](#)
[Questionnaires](#)
[Spain](#)

Source: CINAHL

64. Does opening a milk bank in a neonatal unit change infant feeding practices?

Citation: Neonatal Intensive Care, 01 July 2010, vol./is. 23/4(29-32), 10622454

Author(s):	Torres MIU; López CM; Román SV; Díaz CA; Cruz-Rojo J; Cooke EF; Alonso CRP
Language:	English
Abstract:	<p>BACKGROUND: Donor human milk banks are much more than simple centers for collection, storage, processing, and distribution of donor human milk, as they cover other aspects and represent a real opportunity to promote and support breastfeeding. The aim of our study is to assess the impact that opening a human milk bank has had on the proportion of infants receiving exclusive breast milk at discharge and other aspects related to feeding children with birth weight ≤ 1500 g or < 32 weeks gestation admitted to the neonatal unit. METHODS: The study included babies of ≤ 1500 g or < 32 weeks gestation. Fifty infants born from February to July in 2006, before the opening of the human milk bank, and 54 born from February to July in 2008, after its opening, met inclusive criteria. We collected data about days of hospital stay, hours of life when feeding was started, hours of life when full enteral feeding was attained, the type of milk received during admission, and the type of feeding on discharge. RESULTS: Children born in 2008 commenced feeding 16 hours earlier than those born in 2006 ($p = 0.00$). The proportion of infants receiving exclusive breast milk at discharge was 54% in 2006 and 56% in 2008 ($p = 0.87$). The number of days they received their mother's own milk during the first 28 days of life was 24.2 days in 2006, compared to 23.7 days in 2008 ($p = 0.70$). In 2006, 60% of infants received infant formula at least once in the first 28 days of life, compared to 37% in 2008 ($p = 0.01$). CONCLUSIONS: The opening of a donor human milk bank in a neonatal unit did not reduce the proportion of infants exclusively fed with breast milk at discharge, but did reduce the proportion of infants that received infant formula during the first four weeks of life. Also, having donor human milk available enables commencement of enteral feeding earlier.</p>
Publication Type:	journal article
Subject Headings:	Breast Feeding Intensive Care Units, Neonatal Milk Banks Comparative Studies Convenience Sample Data Analysis Software Demography Descriptive Statistics Fisher's Exact Test Human Infant, Newborn Infant, Premature Mothers Spain T-Tests Wilcoxon Rank Sum Test
Source:	CINAHL

65. Complementary and alternative methods of increasing breast milk supply for lactating mothers of infants in the NICU.

Citation:	Neonatal Network, 01 July 2010, vol./is. 29/4(225-234), 07300832
Author(s):	Jackson PC
Language:	English
Abstract:	<p>"Breastfeeding" an infant in the NICU means that the mother must manually pump her breasts for milk for weeks to months until the infant is physiologically mature enough to suckle at the breast. Complementary and alternative therapies have been proposed to assist with lactation in NICU mothers. These methods for increasing breast milk supply include herbal galactagogues, kangaroo mothering, and relaxation therapies. A review of the literature was performed using PubMed and CINAHL databases. Twenty-four sources were chosen for inclusion in this article. Search terms included the following: galactagogues, breastfeeding, kangaroo care, and lactation, among others. The state of the</p>

science of alternative therapies in the management of inadequate breast milk supply is summarized here. The evidence is discussed and adverse side effects related to these therapies is addressed.

Publication Type: journal article

Subject Headings: [Alternative Therapies](#)
[Breast Feeding](#)
[Lactation](#)
[Milk, Human](#)
[Breast](#)
[CINAHL Database](#)
[Education, Continuing \(Credit\)](#)
[Human](#)
[Infant Care](#)
[Infant, Premature](#)
[Intensive Care Units, Neonatal](#)
[Medicine, Herbal](#)
[Milk Expression](#)
[Mother-Infant Relations](#)
[PubMed](#)
[Relaxation](#)

Source: CINAHL

66. Influences on weight status of female adults at 6 months postpartum.

Citation: Topics in Clinical Nutrition, 01 July 2010, vol./is. 25/3(256-263), 08835691

Author(s): Slotkin E; Herbold N

Language: English

Abstract: A total of 692 postpartum mothers were surveyed on breast-feeding, physical activity, stress level, depression, and work status. Higher stress level ($P = .008$), greatest severity of postpartum depression ($P < .001$), and support group participation ($P = .009$) were associated with less success for losing weight. Working ($P = .018$), childcare help ($P = .033$), breast-feeding ($P = .001$), and greater physical activity ($P \leq .001$) were associated with more success for weight loss. Weight control interventions should emphasize child care help, support for postpartum depression, and encourage breast-feeding and physical activity.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Depression, Postpartum](#)
[Employment Status](#)
[Physical Activity](#)
[Postnatal Period](#)
[Stress, Psychological](#)
[Weight Loss](#)
[Adolescence](#)
[Adult](#)
[Bivariate Statistics](#)
[Child Day Care](#)
[Confidence Intervals](#)
[Data Analysis Software](#)
[Descriptive Statistics](#)
[Female](#)
[Fetus](#)
[Human](#)
[Massachusetts](#)
[Middle Age](#)
[Mothers](#)
[Pregnancy](#)

[Questionnaires](#)
[Spearman's Rank Correlation Coefficient](#)
[Support Groups](#)
[Survey Research](#)
[United States](#)
[Weight Gain](#)
[Women's Health](#)
[World Wide Web](#)
[Young Adult](#)

Source: CINAHL

67. Prevention of mother to child transmission of HIV in Burkina Faso: breastfeeding and wet nursing.

Citation: Journal of Tropical Pediatrics, June 2010, vol./is. 56/3(183-6), 0142-6338;1465-3664 (2010 Jun)

Author(s): Nacro B; Barro M; Gaudreault S; Dao B

Institution: Pediatric Department, CHUSS, Bobo-Dioulasso, Burkina Faso. bnacro@fasonet.bf

Language: English

Abstract: OBJECTIVE: A survey of the knowledge of women about HIV and breastfeeding. METHOD AND PATIENTS: The study employed a voluntary questionnaire. Data were analyzed using Epi info 6 with chi(2) test and $P < 0.05$ was considered as statistically significant. RESULTS: Three hundred women agreed to participate in the study. Only 82 realized that HIV could be transmitted by breastmilk. After information about HIV transmission, 37 stated that they would still breastfeed. On the other hand, 220 (74.1%) stated that they would accept breastfeeding by a wet nurse. Two hundred and eighty (69.8%) would accept to serve as the wet nurse for an infant born to an HIV-infected woman. There was an association between acceptance of HIV screening and willingness to breastfeed ($P = 0.00206529$). CONCLUSION: Appropriate Prevention of Mother-To-Child Transmission (PMTCT) measures must be made available to HIV-infected women. Detailed studies must be performed to evaluate the feasibility of this approach in resource limited settings.

Country of Publication: England

CAS Registry Number: 0 (Anti-HIV Agents)

Publication Type: Journal Article

Subject Headings: [Adolescent](#)
[Adult](#)
[Anti-HIV Agents/tu \[Therapeutic Use\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Feeding](#)
[Burkina Faso](#)
[Female](#)
[HIV Infections/dt \[Drug Therapy\]](#)
[*HIV Infections/pc \[Prevention & Control\]](#)
[HIV Infections/tm \[Transmission\]](#)
[HIV-1](#)
[Health Care Surveys](#)
[*Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[Infant](#)
[*Infectious Disease Transmission, Vertical/pc \[Prevention & Control\]](#)
[Mothers/ed \[Education\]](#)
[Pregnancy](#)
[*Pregnancy Complications, Infectious/pc \[Prevention & Control\]](#)
[Risk Factors](#)
[Young Adult](#)

Source: MEDLINE

68. The influence of the "they": an interpretation of breastfeeding culture in New Zealand.

Citation: Qualitative Health Research, June 2010, vol./is. 20/6(768-77), 1049-7323;1049-7323 (2010 Jun)

Author(s): McBride-Henry K

Institution: Victoria University of Wellington, Wellington, New Zealand.
karen.mcbride-henry@vuw.ac.nz

Language: English

Abstract: The society in which a woman breastfeeds has a significant effect on how she will interpret her breastfeeding experiences; however, only limited research has been conducted on the phenomenon of breastfeeding, despite the recognition that the majority of women do not breastfeed beyond 6 months. In this article I present the findings of a research study that explored the experience of breastfeeding for 19 women in New Zealand using an interpretive lifeworld methodology. The participants engaged in interviews about their experience of breastfeeding. The interviews were analyzed alongside Heidegger's exposition of the "they" as a dialogical partner. The findings are presented in themes that articulate how women experience societal culture when breastfeeding, and how this culture influences their interpretations of their breastfeeding experiences. This research contributes to expanding understandings about why women might wean their infants prematurely, and provides insights into how health care professionals might support women to prolong breastfeeding.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [Adult](#)
[*Breast Feeding/px \[Psychology\]](#)
[*Cultural Characteristics](#)
[Family Characteristics](#)
[Female](#)
[Humans](#)
[Interviews as Topic](#)
[New Zealand](#)
[Social Environment](#)

Source: MEDLINE

69. [Lack of data on glyceryl trinitrate risks in breast feeding]. [Swedish] Data saknas om risker med glyceryltrinitrat vid amning.

Original Title: Data saknas om risker med glyceryltrinitrat vid amning.

Citation: Lakartidningen, June 2010, vol./is. 107/22(1483), 0023-7205;0023-7205 (2010 Jun 2-8)

Author(s): Bottiger Y

Language: Swedish

Country of Publication: Sweden

CAS Registry Number: 0 (Vasodilator Agents); 55-63-0 (Nitroglycerin)

Publication Type: Journal Article

Subject Headings: [*Breast Feeding](#)
[Female](#)
[Humans](#)
[Milk, Human/ch \[Chemistry\]](#)
[*Nitroglycerin/ae \[Adverse Effects\]](#)
[Nitroglycerin/me \[Metabolism\]](#)
[Risk Factors](#)
[*Vasodilator Agents/ae \[Adverse Effects\]](#)
[Vasodilator Agents/me \[Metabolism\]](#)

Source: MEDLINE

70. Breastfeeding and risk for fever after immunization.

Citation: Pediatrics, June 2010, vol./is. 125/6(e1448-52), 0031-4005;1098-4275 (2010 Jun)

Author(s): Pisacane A; Continisio P; Palma O; Cataldo S; De Michele F; Vairo U

Institution: Dipartimento di Pediatria, Universita Federico II, Via S. Pansini 5, Napoli 80131, Italy. pisacane@unina.it

Language: English

Abstract: **OBJECTIVE:** The objective of this study was to evaluate the effects of breastfeeding on the risk for fever after routine immunizations. **METHODS:** A prospective cohort study was conducted at a pediatric vaccination center in Naples, Italy. The mothers of the infants scheduled to receive routine immunizations were instructed on how to measure and record infant temperature on the evening of the vaccination and for the subsequent 3 days. The information about the incidence of fever was obtained by telephone on the third day after vaccination. The relative risk for fever in relation to the type of breastfeeding was estimated in multivariate analyses that adjusted for vaccine dose, maternal education and smoking, and number of other children in the household. **RESULTS:** A total of 460 infants were recruited, and information on the outcome was obtained for 450 (98%). Fever was reported for 30 (25%), 48 (31%), and 94 (53%) of the infants who were being exclusively breastfed, partially breastfed, or not breastfed at all, respectively ($P < .01$). The relative risk for fever among infants who were exclusively and partially breastfed was 0.46 (95% confidence interval: 0.33-0.66) and 0.58 (95% confidence interval: 0.44-0.77), respectively. The protection conferred by breastfeeding persisted even when considering the role of several potential confounders. **CONCLUSIONS:** In this study, breastfeeding was associated with a decreased incidence of fever after immunizations.

Country of Publication: United States

Publication Type: Comparative Study; Journal Article

Subject Headings: [*Breast Feeding](#)
[Confounding Factors \(Epidemiology\)](#)
[Female](#)
[*Fever/ep \[Epidemiology\]](#)
[Humans](#)
[*Immunization](#)
[Infant](#)
[Male](#)
[Multivariate Analysis](#)
[Prospective Studies](#)
[Risk Assessment](#)
[Smoking/ep \[Epidemiology\]](#)

Source: MEDLINE

71. Do infants fed from bottles lack self-regulation of milk intake compared with directly breastfed infants?.

Citation: Pediatrics, June 2010, vol./is. 125/6(e1386-93), 0031-4005;1098-4275 (2010 Jun)

Author(s): Li R; Fein SB; Grummer-Strawn LM

Institution: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity, 4770 Buford Highway, MS K25, Atlanta, GA 30341, USA. rli1@cdc.gov

Language: English

Abstract: **OBJECTIVE:** How breastfeeding reduces the risk of childhood obesity is unclear, and 1 hypothesis pertains to the ability of breastfed infants to self-regulate. We studied whether infants' self-regulation of milk intake is affected by feeding mode (bottle versus breast) and the type of milk in the bottle (formula versus expressed breast milk). **PATIENTS AND METHODS:** Participants in the 2005-2007 Infant Feeding Practices Study II

received monthly questionnaires during their infant's first year, and complete data were available for 1250 infants. We tested the impact of feeding mode and type of milk during early infancy on self-regulation during late infancy. RESULTS: Although only 27% of infants fed exclusively at the breast in early infancy emptied the bottle or cup in late infancy, 54% of infants who were fed both at the breast and by bottle did so, and 68% of those who were fed only by bottle did so. Multivariate regression analysis indicated that infants who were bottle-fed more intensively early in life were approximately 71% or 2 times more likely to empty the bottle or cup later in life than those who were bottle-fed less intensively ((1/3)-(2/3) or (2/3) of milk feeds given by bottle versus < (1/3) of milk feeds). When feeding formula and expressed milk were considered separately, similar dose-response relationships were observed. CONCLUSIONS: Infants who are bottle-fed in early infancy are more likely to empty the bottle or cup in late infancy than those who are fed directly at the breast. Bottle-feeding, regardless of the type of milk, is distinct from feeding at the breast in its effect on infants' self-regulation of milk intake.

Country of Publication: United States

Publication Type: Comparative Study; Journal Article; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: [Appetite Regulation/ph \[Physiology\]](#)
[*Bottle Feeding](#)
[*Breast Feeding](#)
[*Eating](#)
[Female](#)
[Humans](#)
[Infant](#)
[Male](#)
[Multivariate Analysis](#)
[Sucking Behavior/ph \[Physiology\]](#)

Source: MEDLINE

72. Prolonged breastfeeding reduces risk of breast cancer in Sri Lankan women: a case-control study.

Citation: Cancer Epidemiology, June 2010, vol./is. 34/3(267-73), 1877-783x (2010 Jun)

Author(s): De Silva M; Senarath U; Gunatilake M; Lokuhetty D

Institution: Department of Community Medicine, Faculty of Medicine, University of Colombo, 25 Kynsey Road, Colombo, Sri Lanka.

Language: English

Abstract: GOAL: To assess the association between duration of breastfeeding and the risk of breast cancer in Sri Lankan women. METHODS: We conducted a case-control study in women aged 30-64 years in selected health care facilities in the Western province. A total of 100 recent cases of breast cancer (histologically confirmed) and 203 controls (age and parity matched) were included. Detailed information regarding breastfeeding, menstruation, reproductive factors, passive smoking and other confounders was collected using a structured questionnaire. Adjusted odds ratios and 95% confidence intervals were calculated using multiple logistic regressions. PRINCIPLE RESULTS: Multivariate analysis found that those women who breastfed for > or =24 months during lifetime had significantly lower risk of breast cancer than those who breastfed for less than 24 months (OR=0.40; 95%CI=0.22, 0.73). Compared to 0-11 months of lifetime breastfeeding, there was a 66.3% reduction in breast cancer risk in women who breastfed for 12-23 months, 87.4% reduction in 24-35 months and 94% reduction in 36-47 months categories. The mean duration of breastfeeding per child for > or =12 months was also associated with reduced risk of breast cancer (OR=0.52; 95%CI=0.28, 0.94). The significant factors associated with increased risk of breast cancer were: post-menopausal women (OR=1.74; 95%CI=1.01, 3.01); having an abortion in the past (OR=3.42; 95%CI=1.75, 6.66) and exposure to passive smoking (OR=2.96, 95%CI=1.53, 5.75). MAJOR CONCLUSIONS: Prolonged breastfeeding significantly reduces the risk of breast cancer and this protective effect was supported by a dose-response relationship. Risk due to passive smoking should

be emphasized in anti-smoking programmes. Copyright (c) 2010 Elsevier Ltd. All rights reserved.

Country of Publication: Netherlands

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Breast Feeding](#)
[*Breast Neoplasms/ep \[Epidemiology\]](#)
[Breast Neoplasms/pc \[Prevention & Control\]](#)
[Case-Control Studies](#)
[Female](#)
[Humans](#)
[Middle Aged](#)
[Risk Factors](#)
[Sri Lanka/ep \[Epidemiology\]](#)
[Time](#)

Source: MEDLINE

73. Smoking and ethnic group, not epidural use, determine breast feeding outcome.

Citation: Anaesthesia, June 2010, vol./is. 65/6(652), 0003-2409;1365-2044 (2010 Jun)

Author(s): Uppal V; Young SJ

Language: English

Country of Publication: England

Publication Type: Comment; Letter

Subject Headings: [*Analgesia, Epidural](#)
[*Analgesia, Obstetrical/mt \[Methods\]](#)
[Attitude to Health](#)
[*Breast Feeding/eh \[Ethnology\]](#)
[Female](#)
[Humans](#)
[Infant, Newborn](#)
[Retrospective Studies](#)
[Scotland/ep \[Epidemiology\]](#)
[*Smoking/ep \[Epidemiology\]](#)

Source: MEDLINE

74. Complications while breastfeeding: challenges and concerns.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, June 2010, vol./is. 5/3(101-2), 1556-8253;1556-8342 (2010 Jun)

Author(s): Lawrence RA

Language: English

Country of Publication: United States

Publication Type: Editorial; Introductory Journal Article

Subject Headings: [Adult](#)
[*Breast Feeding](#)
[*Communicable Diseases/co \[Complications\]](#)
[Female](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[Infectious Disease Transmission, Vertical](#)
[Male](#)
[*Mastitis/co \[Complications\]](#)

Source: MEDLINE

75. Maternal membranous glomerulonephritis and successful exclusive breastfeeding.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, June 2010, vol./is. 5/3(123-6), 1556-8253;1556-8342 (2010 Jun)

Author(s): Szucs KA; Axline SE; Rosenman MB

Institution: Department of Pediatrics, Indiana University School of Medicine, James Whitcomb Riley Hospital for Children, Indianapolis, Indiana 46202, USA. kszucs@iupui.edu

Language: English

Abstract: Despite the fact that exclusive breastfeeding is the gold standard for feeding babies through 6 months of age, there is a notable paucity of information regarding the effect of various chronic maternal illnesses on lactation. With increasingly effective obstetrical and subspecialty management of pregnancy in these women, a growing number of questions about breastfeeding in the context of chronic maternal illnesses will be asked. Here we describe a case of successful exclusive breastfeeding by a woman with long-standing membranous glomerulonephritis.

Country of Publication: United States

Publication Type: Case Reports; Journal Article

Subject Headings: [Adult](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[Female](#)
[*Glomerulonephritis, Membranous/co \[Complications\]](#)
[Humans](#)
[Pregnancy](#)

Source: MEDLINE

76. Redefining "breastfeeding" initiation and duration in the age of breastmilk pumping.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, June 2010, vol./is. 5/3(135-7), 1556-8253;1556-8342 (2010 Jun)

Author(s): Geraghty SR; Rasmussen KM

Language: English

Country of Publication: United States

Publication Type: Letter; Research Support, N.I.H., Extramural; Research Support, U.S. Gov't, Non-P.H.S.

Subject Headings: [Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Data Collection/mt \[Methods\]](#)
[Humans](#)
[*Milk, Human/se \[Secretion\]](#)
[*Suction/is \[Instrumentation\]](#)
[United States](#)

Source: MEDLINE

77. Hepatitis B and breastfeeding in Hangzhou, Zhejiang Province, People's Republic of China.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, June 2010, vol./is. 5/3(109-12), 1556-8253;1556-8342 (2010 Jun)

Author(s): Qiu L; Binns CW; Zhao Y; Zhang K; Xie X

Institution: Women's Hospital, Zhejiang University, Hangzhou, People's Republic of China.

Language: English

Abstract:	<p>OBJECTIVE: This study examined infant feeding methods in hepatitis B-positive mothers in Zhejiang Province, People's Republic of China. METHODS: A cohort study was undertaken in Hangzhou in Zhejiang Province. A sample of 638 mothers was recruited at birth from the city of Hangzhou and was followed up until their infants were 6 months of age. RESULTS: Chronic hepatitis B is a continuing public health issue in pregnant women. Breastfeeding is the foundation of infant nutrition, sets the scene for lifetime health, and is important for all mothers. In the Hangzhou cohort of 638 mothers, 38 were identified as hepatitis B positive, a rate of 6.0%. All of the infants of the hepatitis B-positive mothers were fed on formula immediately after birth while their breastmilk was tested for virus transmission and their infants were vaccinated. At 1 month of age 61.8% of the hepatitis B-positive mothers were breastfeeding compared to 92% of the remainder of the cohort. The rates at 3 months were 60.6% and 89% and at 6 months were 45.5% and 64%, respectively. The hazard ratio for hepatitis B-positive mothers discontinuing breastfeeding before 6 months was 3.69 (95% confidence interval, 2.28, 5.98). CONCLUSIONS: The World Health Organization recommends that all mothers who are hepatitis B positive breastfeed their infants and that their infants be immunized at birth. In this study breastfeeding rates of hepatitis B-positive mothers were substantially less than those of the other mothers.</p>
Country of Publication:	United States
CAS Registry Number:	0 (Hepatitis B Vaccines)
Publication Type:	Journal Article
Subject Headings:	<p>Adult Breast Feeding/ep [Epidemiology] *Breast Feeding China Cohort Studies Female *Hepatitis B Vaccines/ad [Administration & Dosage] Hepatitis B, Chronic/pc [Prevention & Control] *Hepatitis B, Chronic/tm [Transmission] Humans Infant Infant Care/mt [Methods] Infant Formula Infant, Newborn *Infectious Disease Transmission, Vertical/pc [Prevention & Control] Male Young Adult</p>
Source:	MEDLINE

78. Protecting the next generation--eliminating perinatal HIV-1 infection.

Citation:	New England Journal of Medicine, June 2010, vol./is. 362/24(2316-8), 0028-4793;1533-4406 (2010 Jun 17)
Author(s):	Mofenson LM
Language:	English
Country of Publication:	United States
CAS Registry Number:	0 (Anti-Retroviral Agents)
Publication Type:	Comment; Editorial
Subject Headings:	<p>*Anti-Retroviral Agents/tu [Therapeutic Use] Antiretroviral Therapy, Highly Active *Breast Feeding CD4 Lymphocyte Count Drug Therapy, Combination Female</p>

[HIV Infections/dt \[Drug Therapy\]](#)
[*HIV Infections/tm \[Transmission\]](#)
[*HIV-1](#)
[Humans](#)
[Infant, Newborn](#)
[*Infectious Disease Transmission, Vertical/pc \[Prevention & Control\]](#)
[Pregnancy](#)
[Pregnancy Complications, Infectious/dt \[Drug Therapy\]](#)

Source: MEDLINE

79. Antiretroviral regimens in pregnancy and breast-feeding in Botswana.

Citation: New England Journal of Medicine, June 2010, vol./is. 362/24(2282-94), 0028-4793;1533-4406 (2010 Jun 17)

Author(s): Shapiro RL; Hughes MD; Ogwu A; Kitch D; Lockman S; Moffat C; Makhema J; Moyo S; Thior I; McIntosh K; van Widenfelt E; Leidner J; Powis K; Asmelash A; Tumbare E; Zwierski S; Sharma U; Handelsman E; Mburu K; Jayeoba O; Moko E; Souda S; Lubega E; Akhtar M; Wester C; Tuomola R; Snowden W; Martinez-Tristani M; Mazhani L; Essex M

Institution: Division of Infectious Diseases, Beth Israel Deaconess Medical Center, 110 Francis St., Suite GB, Boston, MA 02215, USA. rshapiro@hsph.harvard.edu

Language: English

Abstract: BACKGROUND: The most effective highly active antiretroviral therapy (HAART) to prevent mother-to-child transmission of human immunodeficiency virus type 1 (HIV-1) in pregnancy and its efficacy during breast-feeding are unknown. METHODS: We randomly assigned 560 HIV-1-infected pregnant women (CD4+ count, > or = 200 cells per cubic millimeter) to receive coformulated abacavir, zidovudine, and lamivudine (the nucleoside reverse-transcriptase inhibitor [NRTI] group) or lopinavir-ritonavir plus zidovudine-lamivudine (the protease-inhibitor group) from 26 to 34 weeks' gestation through planned weaning by 6 months post partum. A total of 170 women with CD4+ counts of less than 200 cells per cubic millimeter received nevirapine plus zidovudine-lamivudine (the observational group). Infants received single-dose nevirapine and 4 weeks of zidovudine. RESULTS: The rate of virologic suppression to less than 400 copies per milliliter was high and did not differ significantly among the three groups at delivery (96% in the NRTI group, 93% in the protease-inhibitor group, and 94% in the observational group) or throughout the breast-feeding period (92% in the NRTI group, 93% in the protease-inhibitor group, and 95% in the observational group). By 6 months of age, 8 of 709 live-born infants (1.1%) were infected (95% confidence interval [CI], 0.5 to 2.2); 6 were infected in utero (4 in the NRTI group, 1 in the protease-inhibitor group, and 1 in the observational group), and 2 were infected during the breast-feeding period (in the NRTI group). Treatment-limiting adverse events occurred in 2% of women in the NRTI group, 2% of women in the protease-inhibitor group, and 11% of women in the observational group. CONCLUSIONS: All regimens of HAART from pregnancy through 6 months post partum resulted in high rates of virologic suppression, with an overall rate of mother-to-child transmission of 1.1%. (ClinicalTrials.gov number, NCT00270296.) 2010 Massachusetts Medical Society

Country of Publication: United States

CAS Registry Number: 0 (HIV Protease Inhibitors); 0 (RNA, Viral); 129618-40-2 (Nevirapine); 30516-87-1 (Zidovudine)

Publication Type: Journal Article; Multicenter Study; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings:
[Adult](#)
[Antiretroviral Therapy, Highly Active/ae \[Adverse Effects\]](#)
[*Antiretroviral Therapy, Highly Active](#)
[*Breast Feeding](#)
[CD4 Lymphocyte Count](#)
[Female](#)

Follow-Up Studies
 HIV Infections/dt [Drug Therapy]
 *HIV Infections/tm [Transmission]
 HIV Protease Inhibitors/tu [Therapeutic Use]
 HIV-1/ge [Genetics]
 HIV-1/ip [Isolation & Purification]
 *HIV-1
 Humans
 Infant
 Infant, Newborn
 *Infectious Disease Transmission, Vertical/pc [Prevention & Control]
 Male
 Neutropenia/ci [Chemically Induced]
 Nevirapine/tu [Therapeutic Use]
 Patient Compliance
 Pregnancy
 *Pregnancy Complications, Infectious/dt [Drug Therapy]
 RNA, Viral/bl [Blood]
 Risk Factors
 Viral Load/de [Drug Effects]
 Young Adult
 Zidovudine/tu [Therapeutic Use]

Source: MEDLINE

80. Maternal or infant antiretroviral drugs to reduce HIV-1 transmission.

Citation: New England Journal of Medicine, June 2010, vol./is. 362/24(2271-81), 0028-4793;1533-4406 (2010 Jun 17)

Author(s): Chasela CS; Hudgens MG; Jamieson DJ; Kayira D; Hosseinipour MC; Kourtis AP; Martinson F; Tegha G; Knight RJ; Ahmed YI; Kamwendo DD; Hoffman IF; Ellington SR; Kacheche Z; Soko A; Wiener JB; Fiscus SA; Kazembe P; Mofolo IA; Chigwenembe M; Sichali DS; van der Horst CM; BAN Study Group

Institution: University of North Carolina Project, Lilongwe, Malawi.

Language: English

Abstract: **BACKGROUND:** We evaluated the efficacy of a maternal triple-drug antiretroviral regimen or infant nevirapine prophylaxis for 28 weeks during breast-feeding to reduce postnatal transmission of human immunodeficiency virus type 1 (HIV-1) in Malawi. **METHODS:** We randomly assigned 2369 HIV-1-positive, breast-feeding mothers with a CD4+ lymphocyte count of at least 250 cells per cubic millimeter and their infants to receive a maternal antiretroviral regimen, infant nevirapine, or no extended postnatal antiretroviral regimen (control group). All mothers and infants received perinatal prophylaxis with single-dose nevirapine and 1 week of zidovudine plus lamivudine. We used the Kaplan-Meier method to estimate the cumulative risk of HIV-1 transmission or death by 28 weeks among infants who were HIV-1-negative 2 weeks after birth. Rates were compared with the use of the log-rank test. **RESULTS:** Among mother-infant pairs, 5.0% of infants were HIV-1-positive at 2 weeks of life. The estimated risk of HIV-1 transmission between 2 and 28 weeks was higher in the control group (5.7%) than in either the maternal-regimen group (2.9%, $P=0.009$) or the infant-regimen group (1.7%, $P<0.001$). The estimated risk of infant HIV-1 infection or death between 2 and 28 weeks was 7.0% in the control group, 4.1% in the maternal-regimen group ($P=0.02$), and 2.6% in the infant-regimen group ($P<0.001$). The proportion of women with neutropenia was higher among those receiving the antiretroviral regimen (6.2%) than among those in either the nevirapine group (2.6%) or the control group (2.3%). Among infants receiving nevirapine, 1.9% had a hypersensitivity reaction. **CONCLUSIONS:** The use of either a maternal antiretroviral regimen or infant nevirapine for 28 weeks was effective in reducing HIV-1 transmission during breast-feeding. (ClinicalTrials.gov number, NCT00164736.) 2010 Massachusetts Medical Society

Country of Publication: United States

CAS Registry Number: 0 (Anti-Retroviral Agents); 129618-40-2 (Nevirapine); 134678-17-4 (Lamivudine); 30516-87-1 (Zidovudine)

Publication Type: Journal Article; Multicenter Study; Randomized Controlled Trial; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't; Research Support, U.S. Gov't, Non-P.H.S.; Research Support, U.S. Gov't, P.H.S.

Subject Headings: [Adult](#)
[Anti-Retroviral Agents/ae \[Adverse Effects\]](#)
[*Anti-Retroviral Agents/tu \[Therapeutic Use\]](#)
[*Breast Feeding](#)
[CD4 Lymphocyte Count](#)
[Drug Hypersensitivity/et \[Etiology\]](#)
[Drug Therapy, Combination](#)
[Female](#)
[HIV Infections/dt \[Drug Therapy\]](#)
[*HIV Infections/tm \[Transmission\]](#)
[HIV Seronegativity](#)
[*HIV-1](#)
[Humans](#)
[Infant, Newborn](#)
[*Infectious Disease Transmission, Vertical/pc \[Prevention & Control\]](#)
[Kaplan-Meiers Estimate](#)
[Lamivudine/tu \[Therapeutic Use\]](#)
[Male](#)
[Neutropenia/ci \[Chemically Induced\]](#)
[Nevirapine/ae \[Adverse Effects\]](#)
[Nevirapine/tu \[Therapeutic Use\]](#)
[Pregnancy](#)
[Risk Factors](#)
[Stevens-Johnson Syndrome/ci \[Chemically Induced\]](#)
[Young Adult](#)
[Zidovudine/tu \[Therapeutic Use\]](#)

Source: MEDLINE

81. Breastfeeding--still not reaching the target.

Citation: Public Health Nutrition, June 2010, vol./is. 13/6(749-50), 1368-9800;1475-2727 (2010 Jun)

Author(s): Yngve A; Tseng M

Language: English

Country of Publication: England

Publication Type: Editorial; Introductory Journal Article

Subject Headings: [*Breast Feeding/ep \[Epidemiology\]](#)
[Breast Feeding/px \[Psychology\]](#)
[Female](#)
[*Health Promotion](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[Prevalence](#)
[Time Factors](#)

Source: MEDLINE

82. Protection, promotion and support of breast-feeding in Europe: progress from 2002 to 2007.

Citation: Public Health Nutrition, June 2010, vol./is. 13/6(751-9), 1368-9800;1475-2727 (2010 Jun)

Author(s): Cattaneo A; Burmaz T; Arendt M; Nilsson I; Mikiel-Kostyra K; Kondrate I; Communal MJ; Massart C; Chapin E; Fallon M; 'Promotion of Breastfeeding in Europe: Pilot Testing the Blueprint for Action' Project

Institution: Health Services Research, Epidemiology and International Health, Institute for Maternal and Child Health IRCCS Burlo Garofolo, Trieste, Italy. cattaneo@burlo.trieste.it

Language: English

Abstract: OBJECTIVE: To assess progress in the protection, promotion and support of breast-feeding in Europe. DESIGN: Data for 2002 and 2007 were gathered with the same questionnaire. Of thirty countries, twenty-nine returned data for 2002, twenty-four for 2007. RESULTS: The number of countries with national policies complying with WHO recommendations increased. In 2007, six countries lacked a national policy, three a national plan, four a national breast-feeding coordinator and committee. Little improvement was reported in pre-service training; however, the number of countries with good coverage in the provision of WHO/UNICEF courses for in-service training increased substantially, as reflected in a parallel increase in the number of Baby Friendly Hospitals and the proportion of births taking place in them. Little improvement was reported as far as implementation of the International Code on Marketing of Breastmilk Substitutes is concerned. Except for Ireland and the UK, where some improvement occurred, no changes were reported on maternity protection. Due to lack of standard methods, it was difficult to compare rates of breast-feeding among countries. With this in mind, slight improvements in the rates of initiation, exclusivity and duration were reported by countries where data at two points in time were available. CONCLUSIONS: Breast-feeding rates continue to fall short of global recommendations. National policies are improving slowly but are hampered by the lack of action on maternity protection and the International Code. Pre-service training and standard monitoring of breast-feeding rates are the areas where more efforts are needed to accelerate progress.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Europe/ep \[Epidemiology\]](#)
[Female](#)
[Guideline Adherence](#)
[*Health Policy](#)
[*Health Promotion](#)
[Hospitals](#)
[Humans](#)
[Infant](#)
[Infant Nutritional Physiological Phenomena](#)
[Infant, Newborn](#)
[Mothers/px \[Psychology\]](#)
[*Outcome Assessment \(Health Care\)](#)
[Questionnaires](#)

Source: MEDLINE

83. Association between breast-feeding and anthropometry and CVD risk factor status in adolescence and young adulthood: the Young Hearts Project, Northern Ireland.

Citation: Public Health Nutrition, June 2010, vol./is. 13/6(771-8), 1368-9800;1475-2727 (2010 Jun)

Author(s): Holmes VA; Cardwell C; McKinley MC; Young IS; Murray LJ; Boreham CA; Woodside JV

Institution: School of Nursing and Midwifery, Queen's University Belfast, Belfast, UK. v.holmes@qub.ac.uk

Language:	English
Abstract:	<p>OBJECTIVE: To examine the association between breast-feeding and blood pressure, anthropometry and plasma lipid profile in both adolescence and young adulthood.</p> <p>DESIGN: Longitudinal study of biological and behavioural risk factors for CVD.</p> <p>SETTING: The Young Hearts Project, Northern Ireland. SUBJECTS: Schoolchildren aged 12 years and 15 years who participated in a cross-sectional study of lifestyle and health, and who were followed up as young adults aged 20-25 years. RESULTS: There was no significant difference in height, weight, BMI, skinfold thickness measurements, blood pressure or plasma lipid profile in adolescents who had been breast-fed compared with those who had not been breast-fed. However, by the time these adolescents had reached adulthood, those who had been breast-fed were significantly taller than those who had not been breast-fed (standing height, $P = 0.013$; leg length, $P = 0.035$). Specifically, the breast-fed group was on average taller by 1.7 cm (95 % CI 0.4, 3.0 cm) and had longer legs by 1.0 cm (95 % CI 0.1, 1.9 cm). There was no significant difference in other anthropometric measures, blood pressure or plasma lipid profile in adults who had been breast-fed compared with those who had not been breast-fed. CONCLUSIONS: Compared with those who had not been breast-fed, individuals who had been breast-fed were taller in adulthood. Given the known association of increased adult height with improved life expectancy, the results from the present study support a beneficial effect of breast-feeding.</p>
Country of Publication:	England
CAS Registry Number:	0 (Lipids)
Publication Type:	Comparative Study; Journal Article; Research Support, Non-U.S. Gov't
Subject Headings:	<p>Adolescent</p> <p>Adult</p> <p>Anthropometry</p> <p>*Blood Pressure/ph [Physiology]</p> <p>*Body Height/ph [Physiology]</p> <p>Bottle Feeding</p> <p>*Breast Feeding</p> <p>Cardiovascular Diseases/bl [Blood]</p> <p>*Cardiovascular Diseases/ep [Epidemiology]</p> <p>Cardiovascular Diseases/et [Etiology]</p> <p>Child</p> <p>Cross-Sectional Studies</p> <p>Female</p> <p>Humans</p> <p>Ireland</p> <p>*Lipids/bl [Blood]</p> <p>Longitudinal Studies</p> <p>Male</p> <p>Risk Factors</p> <p>Young Adult</p>
Source:	MEDLINE

84. The prevalence and determinants of breast-feeding initiation and duration in a sample of women in Ireland.

Citation:	Public Health Nutrition, June 2010, vol./is. 13/6(760-70), 1368-9800;1475-2727 (2010 Jun)
Author(s):	Tarrant RC; Younger KM; Sheridan-Pereira M; White MJ; Kearney JM
Institution:	School of Biological Sciences, Dublin Institute of Technology, Dublin, Republic of Ireland.
Language:	English
Abstract:	<p>OBJECTIVE: To assess breast-feeding initiation and prevalence from birth to 6 months in a sample of mothers in Dublin, and to determine the factors associated with breast-feeding initiation and 'any' breast-feeding at 6 weeks in a sample of Irish-national</p>

mothers. DESIGN: This prospective cross-sectional study involved the recruitment of women during the antenatal period, with subsequent follow-up of mothers who delivered healthy, term singleton infants, at 6 weeks and 6 months postpartum. SETTING: Participants were recruited from antenatal clinics in the Coombe Women and Infants University Hospital, Dublin. SUBJECTS: In all, 401 Irish-national and forty-nine non-Irish-national mothers met the criteria for inclusion in the present study. RESULTS: Breast-feeding initiation rates of the Irish-national and non-Irish-nationals were 47% and 79.6%, respectively. Factors that were significantly ($P = 0.000$) associated with both breast-feeding initiation and 'any' breast-feeding at 6 weeks included mothers who were ≥ 35 years, educated to third level, reported positive postnatal encouragement to breast-feed from their partners and had a positive antenatal intention to breast-feed. The maternal negative perception that breast-feeding is an embarrassing way to feed an infant was demonstrated as a major barrier to initiation. CONCLUSIONS: Breast-feeding initiation and prevalence rates of the Irish-national population remain low and lag considerably behind national and international targets. Inclusion of the partner in breast-feeding promotional initiatives during the antenatal period may be crucial to increase breast-feeding rates in Ireland. Public health campaigns that focus on increasing the social acceptability of breast-feeding may prove effective in addressing this cultural barrier.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Age Factors](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Cross-Sectional Studies](#)
[Educational Status](#)
[*Health Promotion/og \[Organization & Administration\]](#)
[Ireland](#)
[Mothers/ed \[Education\]](#)
[*Mothers/px \[Psychology\]](#)
[*Patient Education as Topic/og \[Organization & Administration\]](#)
[Patient-Centered Care/og \[Organization & Administration\]](#)
[Postpartum Period](#)
[Prevalence](#)
[Prospective Studies](#)
[Social Support](#)
[Time Factors](#)

Source: MEDLINE

85. The influence of fathers' socioeconomic status and paternity leave on breastfeeding duration: a population-based cohort study.

Citation: Scandinavian Journal of Public Health, June 2010, vol./is. 38/4(337-43), 1403-4948;1651-1905 (2010 Jun)

Author(s): Flacking R; Dykes F; Ewald U

Institution: Department of Women's and Children's Health, Uppsala University, Uppsala, Sweden. renee.flacking@ltdalarna.se

Language: English

Abstract: AIM: The propensity to breastfeed is a matter of public concern because of the favourable effects for infants. However, very few studies have described the influence of paternal variables upon duration of breastfeeding. The aim of this study was to describe the effects of fathers' socioeconomic status and their use of paternity leave on breastfeeding duration for infants up to 1 year of age. METHODS: A prospective population-based cohort study was undertaken. Data on breastfeeding, registered in databases in two Swedish counties for 1993-2001, were matched with data on socioeconomic status and paternity leave obtained from Statistics Sweden. Fathers of 51,671 infants were identified and included.

RESULTS: Infants whose fathers had a lower level of education, were receiving unemployment benefit and/or had a lower equivalent disposable household income were significantly less likely to be breastfed at 2, 4, 6, 9, and 12 months of age. Infants whose fathers did not take paternity leave during the infant's first year were significantly less likely to be breastfed at 2 ($p < 0.001$), 4 ($p < 0.001$), and 6 months ($p < 0.001$).

CONCLUSIONS: This paper shows that an enabling of an increased involvement from fathers during the infants' first year of life, such as by paid paternity leave, may have beneficial effects on breastfeeding up to 6 months of age. A more systematic approach to supporting fathers' involvement may be particularly valuable to those infants whose fathers have a lower socioeconomic status.

Country of Publication: Sweden

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [*Breast Feeding](#)
[Cohort Studies](#)
[Educational Status](#)
[*Fathers](#)
[Female](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[Male](#)
[*Parental Leave](#)
[Prospective Studies](#)
[*Socioeconomic Factors](#)
[Sweden](#)
[Time Factors](#)

Source: MEDLINE

86. The Google news effect: did the tainted milk scandal in China temporarily impact newborn feeding patterns in a maternity hospital?.

Citation: Acta Obstetrica et Gynecologica Scandinavica, June 2010, vol./is. 89/6(823-7), 0001-6349;1600-0412 (2010 Jun)

Author(s): Seror J; Amar A; Braz L; Rouzier R

Institution: Department of Obstetrics, Gynecology and Reproductive Medicine, Tenon Hospital, Assistance Publique des Hopitaux de Paris, 4 rue de la Chine, Paris, France. seror.je@laposte.net

Language: English

Abstract: Many factors influence a mother's decision to breastfeed. We investigated whether the melamine scandal involving infant formula influenced the decision to breastfeed. News of the melamine scandal was revealed in September 2008 and rapidly spread via the Internet. We illustrate that this scandal significantly and rapidly impacted the pattern of newborn feeding among Chinese women who delivered at a hospital in the eastern district of Paris. This area is home to one of the largest groups of Chinese people in France. The breastfeeding rate increased sharply in September 2008 from 14% to a peak of 31% ($p = 0.014$) before decreasing over a 6-month period at a rate slower than the diminishing media frenzy. The effect of the melamine news coverage on the Internet was temporary and strongly associated to ethnicity and language ($p = 0.015$, $p = 0.004$, respectively). Numerous patients utilize the Internet to access medical information, and these findings highlight the Internet's role in the healthcare equation.

Country of Publication: England

CAS Registry Number: 0 (Resins, Synthetic)

Publication Type: Journal Article

Subject Headings: [Attitude to Health](#)
[*Breast Feeding/px \[Psychology\]](#)

[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[China](#)
[*Feeding Behavior/px \[Psychology\]](#)
[Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[*Infant Formula](#)
[Infant, Newborn](#)
[Internet](#)
[*Mass Media](#)
[*Maternal Behavior/px \[Psychology\]](#)
[Prospective Studies](#)
[Resins, Synthetic](#)

Source: MEDLINE

87. The effect of human immunodeficiency virus and breastfeeding on the nutritional status of African children.

Citation: Pediatric Infectious Disease Journal, June 2010, vol./is. 29/6(514-8), 0891-3668;1532-0987 (2010 Jun)

Author(s): Taha T; Nour S; Li Q; Kumwenda N; Kafulafula G; Nkhoma C; Broadhead R

Institution: Department of Epidemiology, Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD 21205, USA. ttaha@jhsph.edu

Language: English

Abstract: BACKGROUND: The risk of HIV-1 infection is high among breast-fed children in sub-Saharan Africa. Monitoring the nutritional status can provide useful information to determine the effect of HIV infection and breast-feeding on child growth and development. We longitudinally assessed the nutritional status and determined its association with HIV infection and breast-feeding among Malawian children. METHODS: We analyzed data from 2 clinical trials to prevent mother-to-child transmission of HIV in Malawi. These trials were conducted during 2000-2003 before the current guidelines were implemented to breast-feed exclusively during the first 6 months and wean thereafter. The nutritional status of children was measured up to age 24 months, using z-scores. Age-specific differences in length-for-age (L/A), weight-for-age (W/A), and weight-for-length (W/L) were compared stratifying by gender and HIV infection status. Multivariable models examined the mean change in z-scores controlling for breast-feeding and other factors. RESULTS: In this analysis, 1589 children were included. Boys had significantly lower L/A scores and became stunted (z-score < -2 standard deviations) earlier than girls. HIV-infected children had significantly lower mean L/A and W/A z-scores than HIV-uninfected children and became stunted and underweight at an earlier age. In multivariable analysis not being breast-fed and being HIV infected were significantly ($P < 0.001$) associated with decreases in mean L/A, W/A, and W/L z-scores. CONCLUSIONS: This study shows the impact of infant HIV infection on growth and supports the critical importance of breast-feeding. Mother-to-child transmission of HIV programs should endeavor to preserve breast-feeding and find alternative measures to prevent postnatal HIV transmission.

Country of Publication: United States

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings:
[Adult](#)
[Anthropometry](#)
[*Breast Feeding](#)
[Female](#)
[HIV Infections/ep \[Epidemiology\]](#)
[*HIV Infections/me \[Metabolism\]](#)
[HIV Infections/tm \[Transmission\]](#)
[HIV-1](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)

[Malawi](#)
[Male](#)
[Multivariate Analysis](#)
[*Nutritional Status](#)
[Parents](#)
[Socioeconomic Factors](#)

Source: MEDLINE

88. Increases in breastfeeding duration observed in Latin America and the Caribbean and the role of maternal demographic and healthcare characteristics.

Citation: Food & Nutrition Bulletin, June 2010, vol./is. 31/2 Suppl(S117-27), 0379-5721;0379-5721 (2010 Jun)

Author(s): Chaparro CM; Lutter CK

Institution: Academy for Educational Development, Washington, DC, USA.

Language: English

Abstract: To understand the factors contributing to changes in breastfeeding duration, we analyzed data from seven countries in Latin America and from Haiti to document changes in breastfeeding duration between 1986 and 2005. We used a novel method that permits the overall change to be separated into the portion attributable to changing population characteristics (e.g., greater urban population or increased maternal employment) and the portion resulting from changing breastfeeding behaviors within population subgroups (e.g., more breastfeeding among urban women). Our results indicate that in the low-to-middle-income countries studied, which are experiencing socioeconomic and demographic changes, improvements in breastfeeding duration occurred. These improvements are explained almost entirely by changing breastfeeding behaviors, which were particularly evident in certain subgroups of women, such as those with higher levels of education, and very little by changing population characteristics. The socioeconomic and demographic changes we studied that were previously associated with less breastfeeding no longer appear to have a large negative effect. Our findings show that individual behaviors are amenable to change and that changes in individual behaviors collectively contribute to positive national trends in breastfeeding.

Country of Publication: Japan

Publication Type: Comparative Study; Journal Article

Subject Headings: [Adolescent](#)
[Adult](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Caribbean Region](#)
[Developing Countries/sn \[Statistics & Numerical Data\]](#)
[Educational Status](#)
[Family Characteristics](#)
[Female](#)
[Health Surveys](#)
[Humans](#)
[Latin America](#)
[Logistic Models](#)
[*Maternal Behavior](#)
[Middle Aged](#)
[*Patient Acceptance of Health Care/sn \[Statistics & Numerical Data\]](#)
[Rural Population/sn \[Statistics & Numerical Data\]](#)
[Socioeconomic Factors](#)
[Time Factors](#)
[Urban Population/sn \[Statistics & Numerical Data\]](#)
[Young Adult](#)

Source: MEDLINE

89. Breast- v. formula-feeding: impacts on the digestive tract and immediate and long-term health effects.

Citation:	Nutrition Research Reviews, June 2010, vol./is. 23/1(23-36), 0954-4224;1475-2700 (2010 Jun)
Author(s):	Le Huërou-Luron I; Blat S; Boudry G
Institution:	INRA, UMR 1079, SENAH, F-35590 Saint-Gilles, France. Isabelle.Luron@rennes.inra.fr
Language:	English
Abstract:	<p>The health benefits of breast-feeding have been recognised for a long time. In particular, breast-feeding is associated with lower incidence of necrotising enterocolitis and diarrhoea during the early period of life and with lower incidence of inflammatory bowel diseases, type 2 diabetes and obesity later in life. The higher nutritional and protective degree of human milk is related to its nutritional composition that changes over the lactation period and to the biological activities of specific components while lower growth rate of breast-fed infants may be attributed to their self-regulation of milk intake at a lower level than formula-fed infants. Many results now suggest that the developmental changes in intestinal and pancreatic function that occur postnatally are modulated by the diet. Indeed, formula-feeding induces intestinal hypertrophy and accelerates maturation of hydrolysis capacities; it increases intestinal permeability and bacterial translocation, but does not induce evident differences in microbiota composition. Whether these changes would be beneficial for enhancing absorptive capacities and for educating the gut-associated immune system remains to be further studied. Moreover, it is evident that formula-feeding increases basal blood glucose and decreases plasma ketone body concentrations, while discrepancies on postprandial glycaemia, insulin and incretin responses in both human studies and experimental studies are inconclusive. Manipulating the composition of formula, by reducing protein content, adding prebiotics, growth factors or secretory IgA can modulate intestinal and pancreatic function development, and thereby may reduce the differential responses between breast-fed and formula-fed neonates. However, the developmental responses of the digestive tract to different feeding strategies must be elucidated in terms of sensitivity to developing diseases, taking into account the major role of the intestinal microbiota.</p>
Country of Publication:	England
CAS Registry Number:	0 (Blood Glucose); 0 (Ketone Bodies)
Publication Type:	Comparative Study; Journal Article; Review
Subject Headings:	Animals Blood Glucose/an [Analysis] *Breast Feeding Diabetes Mellitus, Type 2/pc [Prevention & Control] Diarrhea/pc [Prevention & Control] Digestive System/gd [Growth & Development] *Digestive System Enterocolitis, Necrotizing/pc [Prevention & Control] Female Health Promotion *Health Status Humans Infant Infant Formula/ch [Chemistry] *Infant Formula Infant Nutritional Physiological Phenomena Infant, Newborn Inflammatory Bowel Diseases/pc [Prevention & Control] Intestines/mi [Microbiology] Intestines/ph [Physiology] Ketone Bodies/bl [Blood] Milk, Human/ch [Chemistry] Nutritive Value

[Obesity/pc \[Prevention & Control\]](#)
[Pancreas/ph \[Physiology\]](#)
[Weight Gain](#)

Source: MEDLINE

90. Factors influencing the infant feeding decision for socioeconomically deprived pregnant teenagers: the moral dimension.

Citation: Birth, June 2010, vol./is. 37/2(141-9), 0730-7659;1523-536X (2010 Jun)

Author(s): Dyson L; Green JM; Renfrew MJ; McMillan B; Woolridge M

Institution: Mother and Infant Research Unit, University of York, Heslington, York, UK.

Language: English

Abstract: BACKGROUND: The importance of breastfeeding-related health outcomes in reducing inequalities in health has been recognized as a National Health Service target to increase initiation rates especially among disadvantaged groups in England. This study examined the psychosocial factors influencing infant feeding intention among pregnant teenagers expecting their first baby and living in deprived urban areas in England. METHODS: A mixed methods study, using a quantitative questionnaire based on the Theory of Planned Behaviour, was conducted in four English regions with predominantly white and Asian teenagers (n = 71). This method identified which of all known Theory of Planned Behaviour variables were the most important in influencing feeding intentions. Focus groups provided contextual insight into the meaning of these variables for white pregnant teenagers living in a northern English inner city (n = 17). RESULTS: Moral norms were identified as the most predictive variable influencing teenage intention to formula feed or breastfeed. The likelihood that breastfeeding "will be embarrassing" was the only attitudinal belief rated as significantly important in influencing teenage intention to breastfeed. Three overarching themes emerged from the focus group data: "moral norms," "sexuality of the breast," and "self-esteem," with concerns relating to breastfeeding in public cutting across all themes. CONCLUSIONS: Breastfeeding was viewed as a morally inappropriate behavior by most of these teenagers, with formula feeding being perceived as the appropriate behavior. Existing breastfeeding promotion activities are likely to continue to fail to reach teenagers experiencing deprivation in England in the absence of effective strategies to change the underlying negative moral norms toward breastfeeding.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adolescent](#)
[*Breast Feeding/px \[Psychology\]](#)
[*Decision Making](#)
[England](#)
[Female](#)
[Humans](#)
[Pregnancy](#)
[Questionnaires](#)
[Socioeconomic Factors](#)
[Urban Population](#)
[Young Adult](#)

Source: MEDLINE

91. Across-country comparisons of selected infant and young child feeding indicators and associated factors in four South Asian countries.

Citation: Food & Nutrition Bulletin, June 2010, vol./is. 31/2(366-75), 0379-5721;0379-5721 (2010 Jun)

Author(s): Dibley MJ; Roy SK; Senarath U; Patel A; Tiwari K; Agho KE; Miharshahi S; South Asia Infant Feeding Research Network

Institution:	Sydney School of Public Health, University of Sydney, NSW, Australia. mdibley@health.usyd.edu.au
Language:	English
Abstract:	<p>BACKGROUND: Information on infant and young child feeding is widely available in Demographic and Health Surveys and National Family Health Surveys for countries in South Asia; however, infant and young child feeding indicators from these surveys have not been compared between countries in the region. OBJECTIVE: To compare the key indicators of breastfeeding and complementary feeding and their determinants in children under 24 months of age between four South Asian countries. METHODS: We selected data sets from the Bangladesh Demographic and Health Survey 2004, the India National Family Health Survey (NFHS-03) 2005-06, the Nepal Demographic and Health Survey 2006, and the Sri Lanka 2000 Demographic and Health Survey. Infant feeding indicators were estimated according to the key World Health Organization indicators. RESULTS: Exclusive breastfeeding rates were 42.5% in Bangladesh, 46.4% in India, and 53.1% in Nepal. The rate of full breastfeeding ranged between 60.6% and 73.9%. There were no factors consistently associated with the rate of no exclusive breastfeeding across countries. Utilization of health services (more antenatal clinic visits) was associated with higher rates of exclusive breastfeeding in India but lower rates in Nepal. Delivery at a health facility was a negative determinant of exclusive breastfeeding in India. Postnatal contacts by Public Health Midwives were a positive factor in Sri Lanka. A considerable proportion of infants under 6 months of age had been given plain water, juices, or other nonmilk liquids. The rate of timely first suckling ranged from 23.5% in India to 56.3% in Sri Lanka. Delivery by cesarean section was found to be a consistent negative factor that delayed initiation of breastfeeding. Nepal reported the lowest bottle-feeding rate of 3.5%. Socioeconomically privileged mothers were found to have higher bottlefeeding rates in most countries. CONCLUSIONS: Infant and young child feeding practices in the South Asia region have not reached the expected levels that are required to achieve a substantial reduction in child mortality. The countries with lower rates of exclusive breastfeeding have a great potential to improve the rates by preventing infants from receiving water and water-based or other nonmilk liquids during the first 6 months of life.</p>
Country of Publication:	Japan
Publication Type:	Comparative Study; Journal Article; Research Support, Non-U.S. Gov't
Subject Headings:	Aging Ambulatory Care Asia, Western Bottle Feeding/sn [Statistics & Numerical Data] Breast Feeding/sn [Statistics & Numerical Data] *Breast Feeding Delivery, Obstetric/mt [Methods] Feeding Behavior Health Promotion/mt [Methods] *Health Promotion Health Surveys Hospitals, Maternity/ut [Utilization] Humans Infant Infant Nutrition Disorders/pc [Prevention & Control] Infant, Newborn Midwifery Patient Acceptance of Health Care Practice Guidelines as Topic Socioeconomic Factors World Health Organization
Source:	MEDLINE

92. Determinants of infant and young child feeding practices in Sri Lanka: secondary data analysis of Demographic and Health Survey 2000.

Citation:	Food & Nutrition Bulletin, June 2010, vol./is. 31/2(352-65), 0379-5721;0379-5721 (2010 Jun)
Author(s):	Senarath U; Dibley MJ; Godakandage SS; Jayawickrama H; Wickramasinghe A; Agho KE; South Asia Infant Feeding Research Network
Institution:	Department of Community Medicine, University of Colombo, Sri Lanka. upul.senarath@yahoo.com
Language:	English
Abstract:	<p>BACKGROUND: Poor feeding practices in early childhood contribute to the burden of childhood malnutrition and morbidity. OBJECTIVE: To estimate the key indicators of breastfeeding and complementary feeding and the determinants of selected feeding practices in Sri Lanka. METHODS: The sample consisted of 1127 children aged 0 to 23 months from the Sri Lanka Demographic and Health Survey 2000. The key infant feeding indicators were estimated and selected indicators were examined against a set of individual-, household-, and community-level variables using univariate and multivariate analyses. RESULTS: Breastfeeding was initiated within the first hour after birth in 56.3% of infants, 99.7% had ever been breastfed, 85.0% were currently being breastfed, and 27.2% were being bottle-fed. Of infants under 6 months of age, 60.6% were fully breastfed, and of those aged 6 to 9 months, 93.4% received complementary foods. The likelihood of not initiating breastfeeding within the first hour after birth was higher for mothers who underwent cesarean delivery (OR = 3.23) and those who were not visited by a Public Health Midwife at home during pregnancy (OR = 1.81). The rate of full breastfeeding was significantly lower among mothers who did not receive postnatal home visits by a Public Health Midwife. Bottlefeeding rates were higher among infants whose mothers had ever been employed (OR = 1.86), lived in a metropolitan area (OR = 3.99), or lived in the South-Central Hill country (OR = 3.11) and were lower among infants of mothers with secondary education (OR = 0.27). Infants from the urban (OR = 8.06) and tea estate (OR = 12.63) sectors were less likely to receive timely complementary feeding than rural infants. CONCLUSIONS: Antenatal and postnatal contacts with Public Health Midwives were associated with improved breastfeeding practices. Breastfeeding promotion strategies should specifically focus on the estate and urban or metropolitan communities.</p>
Country of Publication:	Japan
Publication Type:	Journal Article; Research Support, Non-U.S. Gov't
Subject Headings:	Adult Aging Bottle Feeding/sn [Statistics & Numerical Data] Breast Feeding/sn [Statistics & Numerical Data] *Breast Feeding Cesarean Section Educational Status *Feeding Behavior Female *Health Promotion Health Surveys House Calls Humans Infant Infant Food/sn [Statistics & Numerical Data] Infant, Newborn Male Midwifery Mothers Rural Population Sri Lanka Urban Population Women, Working

Source: MEDLINE

93. Determinants of infant and young child feeding practices in Nepal: secondary data analysis of Demographic and Health Survey 2006.

Citation: Food & Nutrition Bulletin, June 2010, vol./is. 31/2(334-51), 0379-5721;0379-5721 (2010 Jun)

Author(s): Pandey S; Tiwari K; Senarath U; Agho KE; Dibley MJ; South Asia Infant Feeding Research Network

Institution: Ministry of Health, Kathmandu, Nepal. spandey@mail.com.np

Language: English

Abstract: BACKGROUND: Childhood undernutrition and mortality are high in Nepal, and therefore interventions on infant and young child feeding practices deserve high priority. OBJECTIVE: To estimate infant and young child feeding indicators and the determinants of selected feeding practices. METHODS: The sample consisted of 1906 children aged 0 to 23 months from the Demographic and Health Survey 2006. Selected indicators were examined against a set of variables using univariate and multivariate analyses. RESULTS: Breastfeeding was initiated within the first hour after birth in 35.4% of children, 99.5% were ever breastfed, 98.1% were currently breastfed, and 3.5% were bottle-fed. The rate of exclusive breastfeeding among infants under 6 months of age was 53.1%, and the rate of timely complementary feeding among those 6 to 9 months of age was 74.7%. Mothers who made antenatal clinic visits were at a higher risk for no exclusive breastfeeding than those who made no visits. Mothers who lived in the mountains were more likely to initiate breastfeeding within 1 hour after birth and to introduce complementary feeding at 6 to 9 months of age, but less likely to exclusively breastfeed. Cesarean deliveries were associated with delay in timely initiation of breastfeeding. Higher rates of complementary feeding at 6 to 9 months were also associated with mothers with better education and those above 35 years of age. Risk factors for bottle-feeding included living in urban areas and births attended by trained health personnel. CONCLUSIONS: Most breastfeeding indicators in Nepal are below the expected levels to achieve a substantial reduction in child mortality. Breastfeeding promotion strategies should specifically target mothers who have more contact with the health care delivery system, while programs targeting the entire community should be continued.

Country of Publication: Japan

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[Aging](#)
[Ambulatory Care](#)
[Bottle Feeding/sn \[Statistics & Numerical Data\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Feeding](#)
[Cesarean Section](#)
[Educational Status](#)
[*Feeding Behavior](#)
[Female](#)
[*Health Promotion](#)
[Health Surveys](#)
[Humans](#)
[Infant](#)
[Infant Food/sn \[Statistics & Numerical Data\]](#)
[Infant, Newborn](#)
[Male](#)
[Maternal Age](#)
[Maternal Health Services](#)
[Mothers](#)
[Nepal](#)
[Patient Acceptance of Health Care](#)

[Patient-Centered Care](#)
[Rural Population](#)

Source: MEDLINE

94. Infant and young child feeding indicators and determinants of poor feeding practices in India: secondary data analysis of National Family Health Survey 2005-06.

Citation: Food & Nutrition Bulletin, June 2010, vol./is. 31/2(314-33), 0379-5721;0379-5721 (2010 Jun)

Author(s): Patel A; Badhoniya N; Khadse S; Senarath U; Agho KE; Dibley MJ; South Asia Infant Feeding Research Network

Institution: Indira Gandhi Government Medical College, Nagpur, India. dr_apatel@yahoo.com

Language: English

Abstract: BACKGROUND: In India, poor feeding practices in early childhood contribute to the burden of malnutrition and infant and child mortality. OBJECTIVE: To estimate infant and young child feeding indicators and determinants of selected feeding practices in India. METHODS: The sample consisted of 20,108 children aged 0 to 23 months from the National Family Health Survey India 2005-06. Selected indicators were examined against a set of variables using univariate and multivariate analyses. RESULTS: Only 23.5% of mothers initiated breastfeeding within the first hour after birth, 99.2% had ever breastfed their infant, 89.8% were currently breastfeeding, and 14.8% were currently bottle-feeding. Among infants under 6 months of age, 46.4% were exclusively breastfed, and 56.7% of those aged 6 to 9 months received complementary foods. The risk factors for not exclusively breastfeeding were higher household wealth index quintiles (OR for richest = 2.03), delivery in a health facility (OR = 1.35), and living in the Northern region. Higher numbers of antenatal care visits were associated with increased rates of exclusive breastfeeding (OR for 2-7 antenatal visits = 0.58). The rates of timely initiation of breastfeeding were higher among women who were better educated (OR for secondary education or above = 0.79), were working (OR = 0.79), made more antenatal clinic visits (OR for 2-7 antenatal visits = 0.48), and were exposed to the radio (OR = 0.76). The rates were lower in women who were delivered by cesarean section (OR = 2.52). The risk factors for bottle-feeding included cesarean delivery (OR = 1.44), higher household wealth index quintiles (OR = 3.06), working by the mother (OR = 1.29), higher maternal education level (OR = 1.32), urban residence (OR = 1.46), and absence of postnatal examination (OR = 1.24). The rates of timely complementary feeding were higher for mothers who had more antenatal visits (OR = 0.57), and for those who watched television (OR = 0.75). CONCLUSIONS: Revitalization of the Baby Friendly Hospital Initiative in health facilities is recommended. Targeted interventions may be necessary to improve infant feeding practices in mothers who reside in urban areas, are more educated, and are from wealthier households.

Country of Publication: Japan

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[Aging](#)
[Ambulatory Care](#)
[Bottle Feeding/sn \[Statistics & Numerical Data\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Feeding](#)
[Delivery, Obstetric/mt \[Methods\]](#)
[*Feeding Behavior](#)
[Female](#)
[*Health Promotion](#)
[Health Surveys](#)
[Hospitals, Maternity/ut \[Utilization\]](#)
[Humans](#)
[India](#)
[Infant](#)

[Infant Food/sn \[Statistics & Numerical Data\]](#)
[Infant, Newborn](#)
[Male](#)
[Mass Media](#)
[Mothers](#)
[Patient Acceptance of Health Care](#)
[Patient-Centered Care](#)
[Socioeconomic Factors](#)
[Urban Population](#)
[Women, Working](#)

Source: MEDLINE

95. Determinants of infant and young child feeding practices in Bangladesh: secondary data analysis of Demographic and Health Survey 2004.

Citation: Food & Nutrition Bulletin, June 2010, vol./is. 31/2(295-313), 0379-5721;0379-5721 (2010 Jun)

Author(s): Mihrshahi S; Kabir I; Roy SK; Agho KE; Senarath U; Dibley MJ; South Asia Infant Feeding Research Network

Institution: School of Public Health, Institute of Health and Biomedical Innovation, Queensland University of Technology, Australia. seema.mihirshahi@qut.edu.au

Language: English

Abstract: BACKGROUND: In Bangladesh, poor infant and young child feeding practices are contributing to the burden of infectious diseases and malnutrition. Objective. To estimate the determinants of selected feeding practices and key indicators of breastfeeding and complementary feeding in Bangladesh. METHODS: The sample included 2482 children aged 0 to 23 months from the Bangladesh Demographic and Health Survey of 2004. The World Health Organization (WHO)-recommended infant and young child feeding indicators were estimated, and selected feeding indicators were examined against a set of individual-, household-, and community-level variables using univariate and multivariate analyses. RESULTS: Only 27.5% of mothers initiated breastfeeding within the first hour after birth, 99.9% had ever breastfed their infants, 97.3% were currently breastfeeding, and 22.4% were currently bottle-feeding. Among infants under 6 months of age, 42.5% were exclusively breastfed, and among those aged 6 to 9 months, 62.3% received complementary foods in addition to breastmilk. Among the risk factors for an infant not being exclusively breastfed were higher socioeconomic status, higher maternal education, and living in the Dhaka region. Higher birth order and female sex were associated with increased rates of exclusive breastfeeding of infants under 6 months of age. The risk factors for bottle-feeding were similar and included having a partner with a higher educational level (OR = 2.17), older maternal age (OR for age > or = 35 years = 2.32), and being in the upper wealth quintiles (OR for the richest = 3.43). Urban mothers were at higher risk for not initiating breastfeeding within the first hour after birth (OR = 1.61). Those who made three to six visits to the antenatal clinic were at lower risk for not initiating breastfeeding within the first hour (OR = 0.61). The rate of initiating breastfeeding within the first hour was higher in mothers from richer households (OR = 0.37). CONCLUSIONS: Most breastfeeding indicators in Bangladesh were below acceptable levels. Breastfeeding promotion programs in Bangladesh need nationwide application because of the low rates of appropriate infant feeding indicators, but they should also target women who have the main risk factors, i.e., working mothers living in urban areas (particularly in Dhaka).

Country of Publication: Japan

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings:
[Adult](#)
[Aging](#)
[Ambulatory Care](#)
[Bangladesh](#)
[Birth Order](#)

[Bottle Feeding/sn \[Statistics & Numerical Data\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Feeding](#)
[*Feeding Behavior](#)
[Female](#)
[*Health Promotion](#)
[Health Surveys](#)
[Humans](#)
[Infant](#)
[Infant Food/sn \[Statistics & Numerical Data\]](#)
[Infant, Newborn](#)
[Male](#)
[Maternal Age](#)
[Mothers](#)
[Sex Characteristics](#)
[Socioeconomic Factors](#)
[Urban Population](#)
[Women, Working](#)

Source: MEDLINE

96. Breastfeeding and obesity at 21 years: a cohort study.

Citation: Journal of Clinical Nursing, June 2010, vol./is. 19/11-12(1612-7), 0962-1067;1365-2702 (2010 Jun)

Author(s): Shields L; Mamun AA; O'Callaghan M; Williams GM; Najman JM

Institution: Curtin Health Innovation Research Institute, Curtin University and Princess Margaret Children's Hospital, Perth, Western Australia. l.shields@curtin.edu.au

Language: English

Abstract: AIMS: To determine the influence of breastfeeding on overweight and obesity, as determined by body mass index in early adulthood. BACKGROUND: Obesity is a contemporary epidemic and linked to increased risk of later cardiovascular disease and type 2 diabetes. The success of long-term treatment is modest. Protective factors, such as potentially, and breastfeeding, are few and very important. There are uncertainties as to whether breastfeeding has a protective effect, especially in adults, or whether it is a reflection of other markers of obesity that are more linked to cardiovascular disease and diabetes risk. Some studies suggest that breastfeeding is protective in later life for cardiovascular disease and atherosclerosis. DESIGN: Epidemiological analysis of longitudinal data set. METHODS: We collected data about breastfeeding duration, body mass index of children at 21 years and confounding variables from an ongoing longitudinal study of a singleton birth cohort of 7223 children in Brisbane. We assessed the duration of breastfeeding at six months and prevalence of overweight and obesity at 21 years by body mass index. Adjustment for potential confounders was by multivariable multinomial logistic regression. RESULTS: Data were available for 2553 young adults. In neither the unadjusted or adjusted analysis was longer duration of breastfeeding associated with reduction in obesity at 21 years. CONCLUSIONS: Findings of this investigation are consistent with breastfeeding not independently affecting body mass index in young adults. RELEVANCE TO CLINICAL PRACTICE: Breastfeeding has a range of important benefits for infants, mothers and families, although duration of breastfeeding may not play a substantial role in preventing adult onset obesity.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings:
[Body Mass Index](#)
[*Breast Feeding](#)
[Cohort Studies](#)
[Confounding Factors \(Epidemiology\)](#)
[Humans](#)
[Infant](#)

Infant, Newborn
 Longitudinal Studies
 *Obesity/ep [Epidemiology]
 Prevalence
 Queensland/ep [Epidemiology]

Source: MEDLINE

97. High faecal calprotectin levels in healthy, exclusively breast-fed infants.

Citation: Neonatology, June 2010, vol./is. 97/4(299-304), 1661-7800;1661-7819 (2010 Jun)

Author(s): Savino F; Castagno E; Calabrese R; Viola S; Oggero R; Miniero R

Institution: Department of Paediatrics, Regina Margherita Children's Hospital, University of Turin, Turin, Italy. francesco.savino@unito.it

Language: English

Abstract: BACKGROUND: Faecal calprotectin has been proposed as a sensitive marker for gastrointestinal inflammation in children and adults. High levels have been reported in healthy newborns and during the first months of life; the effect of the kind of feeding on the calprotectin concentration in stools is controversial. OBJECTIVE: To evaluate faecal calprotectin values in healthy, exclusively breast-fed (BF) or formula-fed (FF) infants. METHODS: Stool samples were obtained from 74 healthy infants (39 exclusively BF and 35 exclusively FF) with a median age of 51 days (range 13-90). Exclusion criteria were acute infections and treatment with anti-inflammatory drugs. Stool samples were stored at -20 degrees C until they were analysed, and the faecal calprotectin concentration was detected using a commercial quantitative enzyme-linked immunoassay (Calprest; Eurospital SpA, Trieste, Italy). RESULTS: The median faecal calprotectin concentration was significantly higher in BF infants (555.00 microg/g, range 122.5-2,000.0 microg/g) than in FF ones (206.60 mug/g, range 31.2-797.6 microg/g) ($p < 0.001$). We observed a significantly higher median stool frequency in BF infants than in FF ones ($p < 0.001$), but multiple regression analysis (independent variables: kind of feeding and stool frequency; dependent variable: calprotectin) showed a significant coefficient for the kind of feeding, but not for stool frequency ($p = 0.937$). Conclusions: Our findings show that the kind of feeding influences the faecal calprotectin concentration, with higher values in healthy exclusively BF infants than in FF ones. Our study does not allow us to clearly identify the reason for our finding; this could be due to hormones (such as ghrelin and leptin), cytokines and other immunostimulating and growth factors (such as epidermal growth factor and granulocyte colony-stimulating factor) in human milk, which contribute to the development of the gastrointestinal immune system. Further investigations are needed to better clarify the mechanism underlying the relationship between feeding and faecal calprotectin levels in young infants. Copyright 2009 S. Karger AG, Basel.

Country of Publication: Switzerland

CAS Registry Number: 0 (Leukocyte L1 Antigen Complex)

Publication Type: Controlled Clinical Trial; Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adult
 Age Factors
 Birth Weight
 Breast Feeding/ep [Epidemiology]
 *Breast Feeding
 Case-Control Studies
 *Feces/ch [Chemistry]
 Female
 Health
 Humans
 Infant
 Infant Formula
 Infant, Newborn
 *Leukocyte L1 Antigen Complex/an [Analysis]

Leukocyte L1 Antigen Complex/me [Metabolism]
Male

Source: MEDLINE

98. Clinical recommendations for promoting breastfeeding among Hispanic women.

Citation: Journal of the American Academy of Nurse Practitioners, June 2010, vol./is. 22/6(292-9), 1041-2972;1745-7599 (2010 Jun)

Author(s): Faraz A

Institution: Yale University School of Nursing, New Haven, Connecticut 06536-0740, USA. asefeh.faraz@aya.yale.edu

Language: English

Abstract: PURPOSE: To synthesize research regarding the low breastfeeding rates in Hispanic women living in the United States, particularly those who immigrate to this country and become acculturated. DATA SOURCES: Extensive review of global literature on the subject. CONCLUSIONS: Exclusive and continued breastfeeding rates in the United States have increased in recent years but remain low, and no state in the United States currently meets the Healthy People 2010 recommendations. Due to the increasing number of Hispanic women immigrating to the United States and having children, it is imperative to develop appropriate culturally specific guidelines in breastfeeding promotion programs. When providing care to a Hispanic mother, clinicians can best assist this population by holistically reviewing all aspects of a woman's life including her environment and relationships with others to provide positive outcomes that ultimately benefit Hispanic mothers and their newborns. IMPLICATIONS FOR PRACTICE: Guidelines and interventions for initiating and continuing breastfeeding in Hispanic women are proposed, including providing a bilingual personal breastfeeding advocate, as well as group classes that incorporate traditional Hispanic cultural beliefs and allow the women to devise personal breastfeeding plans.

Country of Publication: United States

Publication Type: Journal Article; Review

Subject Headings: Attitude to Health/eh [Ethnology]
*Breast Feeding/eh [Ethnology]
Breast Feeding/sn [Statistics & Numerical Data]
Cultural Characteristics
Female
Health Behavior/eh [Ethnology]
*Health Promotion/og [Organization & Administration]
Hispanic Americans/px [Psychology]
*Hispanic Americans/sn [Statistics & Numerical Data]
Humans
Infant, Newborn
Mother-Child Relations/eh [Ethnology]
*Mothers/ed [Education]
*Nurse Practitioners/og [Organization & Administration]
*Nurse's Role
Patient Education as Topic
Postnatal Care/mt [Methods]
Postnatal Care/px [Psychology]
Practice Guidelines as Topic

Source: MEDLINE

99. [Exclusive breastfeeding and mixed feeding: knowledge, attitudes and practices of primiparous mothers]. [French] Allaitement maternel exclusif et allaitement mixte: connaissances, attitudes et pratiques des mères primipares.

Original Title: Allaitement maternel exclusif et allaitement mixte: connaissances, attitudes et pratiques des mères primipares.

Citation: Eastern Mediterranean Health Journal, June 2010, vol./is. 16/6(630-5), 1020-3397;1020-3397 (2010 Jun)

Author(s): Ben Slama F; Ayari I; Ouzini F; Belhadj O; Achour N

Institution: Institut National de Santé Publique, Tunis, Tunisie. fethraj@yahoo.fr

Language: French

Abstract: We assessed the knowledge attitudes and practices of primiparous women with regard to exclusive breastfeeding and the use of formula milk. A total of 260 women were interviewed and the results showed that 41.5% of the women breastfed exclusively while 58.5% bottle-fed only or did so together with breastfeeding. Of those who breastfed, 43.0% did not do so soon after giving birth and did not know about colostrum. Overall, the knowledge, attitudes and practices of the mothers were unsatisfactory concerning the golden rules for successful breastfeeding, the ideal duration of exclusive breastfeeding and the food to include when introducing complementary feeding. This might be due to a low level of schooling and information, hence the need for improving strategies for maternal care during the antenatal and postnatal periods.

Country of Publication: Egypt

Publication Type: English Abstract; Journal Article

Subject Headings: [Adult](#)
[*Attitude to Health](#)
[Bottle Feeding/px \[Psychology\]](#)
[Bottle Feeding/sn \[Statistics & Numerical Data\]](#)
[*Bottle Feeding](#)
[Breast Feeding/px \[Psychology\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Feeding](#)
[Educational Measurement](#)
[Educational Status](#)
[Female](#)
[*Health Knowledge, Attitudes, Practice](#)
[Health Services Needs and Demand](#)
[Humans](#)
[Mothers/ed \[Education\]](#)
[Mothers/px \[Psychology\]](#)
[Mothers/sn \[Statistics & Numerical Data\]](#)
[*Mothers](#)
[Motivation](#)
[*Parity](#)
[Patient Education as Topic](#)
[Pregnancy](#)
[Questionnaires](#)
[Time Factors](#)
[Tunisia](#)
[Weaning](#)

Source: MEDLINE

100. Parity, breastfeeding, and the subsequent risk of maternal type 2 diabetes.

Citation: Diabetes Care, June 2010, vol./is. 33/6(1239-41), 0149-5992;1935-5548 (2010 Jun)

Author(s): Liu B; Jorm L; Banks E

Institution: School of Medicine, University of Western Sydney, Sydney, Australia. bette.liu@uws.edu.au

Language: English

Abstract: OBJECTIVE: To examine the effect of childbearing and maternal breastfeeding on a woman's subsequent risk of developing type 2 diabetes. RESEARCH DESIGN AND METHODS: Using information on parity, breastfeeding, and diabetes collected from

52,731 women recruited into a cohort study, we estimated the risk of type 2 diabetes using multivariate logistic regression. RESULTS A total of 3,160 (6.0%) women were classified as having type 2 diabetes. Overall, nulliparous and parous women had a similar risk of diabetes. Among parous women, there was a 14% (95% CI 10-18%, $P < 0.001$) reduced likelihood of diabetes per year of breastfeeding. Compared to nulliparous women, parous women who did not breastfeed had a greater risk of diabetes (odds ratio 1.48, 95% CI 1.26-1.73, $P < 0.001$), whereas for women breastfeeding, the risk was not significantly increased. CONCLUSIONS: Compared with nulliparous women, childbearing women who do not breastfeed have about a 50% increased risk of type 2 diabetes in later life. Breastfeeding substantially reduces this excess risk.

Country of Publication: United States
Publication Type: Journal Article; Research Support, Non-U.S. Gov't
Subject Headings: [Adult](#)
[*Breast Feeding](#)
[Cohort Studies](#)
[*Diabetes Mellitus, Type 2/ep \[Epidemiology\]](#)
[Female](#)
[Humans](#)
[*Parity/ph \[Physiology\]](#)
[Pregnancy](#)
[Risk Factors](#)
Source: MEDLINE

101. Reaching 50. Bristol has become the U.K.'s first Baby Friendly city.

Citation: Practising Midwife, June 2010, vol./is. 13/6(38-9), 1461-3123;1461-3123 (2010 Jun)
Author(s): anonymous
Language: English
Country of Publication: England
Publication Type: Journal Article
Subject Headings: [*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Female](#)
[Great Britain](#)
[Health Promotion/og \[Organization & Administration\]](#)
[*Hospitals, Maternity/og \[Organization & Administration\]](#)
[*Hospitals, Urban/og \[Organization & Administration\]](#)
[Humans](#)
[Infant Care/mt \[Methods\]](#)
[Infant, Newborn](#)
[Medical Staff, Hospital/ed \[Education\]](#)
[*Medical Staff, Hospital/og \[Organization & Administration\]](#)
[Organizational Innovation](#)
[Outcome Assessment \(Health Care\)](#)
[Pregnancy](#)
[Social Support](#)
[World Health Organization](#)
Source: MEDLINE

102. Reaching 50. Fifty maternity units have gone Baby Friendly.

Citation: Practising Midwife, June 2010, vol./is. 13/6(36-8), 1461-3123;1461-3123 (2010 Jun)
Author(s): anonymous
Language: English
Country of Publication: England

Publication Type: Journal Article

Subject Headings: [*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Female](#)
[Great Britain](#)
[Guideline Adherence](#)
[Health Knowledge, Attitudes, Practice](#)
[*Health Promotion/og \[Organization & Administration\]](#)
[*Hospitals, Maternity/og \[Organization & Administration\]](#)
[Humans](#)
[Infant, Newborn](#)
[*Maternal Health Services/og \[Organization & Administration\]](#)
[*Midwifery/og \[Organization & Administration\]](#)
[Outcome Assessment \(Health Care\)](#)
[Practice Guidelines as Topic](#)
[Pregnancy](#)
[Social Support](#)

Source: MEDLINE

103. Vitamin D supplementation of Canadian infants: practices of Montreal mothers.

Citation: Applied Physiology, Nutrition, & Metabolism = Physiologie Appliquee, Nutrition et Metabolisme, June 2010, vol./is. 35/3(303-9), 1715-5312 (2010 Jun)

Author(s): Gallo S; Jean-Philippe S; Rodd C; Weiler HA

Institution: School of Dietetics and Human Nutrition, McGill University, Ste-Anne-de-Bellevue, QC H9X 3V9, Canada.

Language: English

Abstract: Health policy in North America advocates that all breastfed infants receive a vitamin D supplement of 400 IU per day for the primary prevention of rickets. Despite this recommendation, rickets still occurs in Canada. It is not known whether vitamin D deficiency in the Canadian population is solely attributable to inadequacies in vitamin supplementation. Thus, the evaluation of current practices, including awareness and compliance with recommendations, is clearly needed. The objective of this study was to describe the vitamin D supplementation practices of mothers of newborns living in the Montreal area. This was a cross-sectional telephone survey of 343 mothers delivering a healthy term infant from December 2007 to May 2008 at the Royal Victoria Hospital (Montreal, Que.). Ninety percent of all mothers breastfed their infants during the first 6 months; 53% did so exclusively. Of mothers exclusively breastfeeding, 74% reported meeting the Health Canada recommendation. The main reason for not adhering to the recommendation was the assumption by mothers who began to feed fortified formula (400 IU.L-1) that supplementation was no longer necessary. Fifty percent of infants receiving mixed feedings without supplementation prior to 6 months did not achieve the recommended intake. Receiving advice about supplementation and the higher education of mothers were significant positive determinants of supplementation practices. This work identified infants consuming mixed feedings and those consuming only formula in the first 6 months as groups at high risk for not meeting the recommended 400 IU.day-1 of vitamin D. Therefore there may still be gaps in knowledge regarding vitamin D supplementation.

Country of Publication: Canada

CAS Registry Number: 1406-16-2 (Vitamin D)

Publication Type: Journal Article

Subject Headings: [Adult](#)
[Awareness](#)
[*Breast Feeding](#)
[Chi-Square Distribution](#)
[Cross-Sectional Studies](#)
[*Dietary Supplements](#)

[Educational Status](#)
[Female](#)
[Health Care Surveys](#)
[Health Education](#)
[*Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[Infant](#)
[*Infant Formula](#)
[*Infant Nutritional Physiological Phenomena](#)
[Infant, Newborn](#)
[*Maternal Behavior](#)
[Medication Adherence](#)
[Nutrition Policy](#)
[Quebec](#)
[Rickets/et \[Etiology\]](#)
[Rickets/pp \[Physiopathology\]](#)
[Rickets/pc \[Prevention & Control\]](#)
[Telephone](#)
[Time Factors](#)
[*Vitamin D/ad \[Administration & Dosage\]](#)
[Vitamin D Deficiency/co \[Complications\]](#)
[Vitamin D Deficiency/pp \[Physiopathology\]](#)
[*Vitamin D Deficiency/pc \[Prevention & Control\]](#)

Source: MEDLINE

104. 'I only give advice if I am asked': examining the grandmother's potential to influence infant feeding decisions and parenting practices of new mothers.

Citation: Women & Birth: Journal of the Australian College of Midwives, June 2010, vol./is. 23/2(74-80), 1871-5192;1878-1799 (2010 Jun)

Author(s): Reid J; Schmied V; Beale B

Institution: School of Nursing and Midwifery, University of Western Sydney (UWS), Australia. je.reid@uws.edu.au

Language: English

Abstract: BACKGROUND: Australia has high breastfeeding initiation rates however, at 3 and 6 months exclusive breastfeeding rates fall below global recommendations. Research suggests significant others in a woman's life can influence infant feeding decisions and practices but how and why they do so needs investigation. RESEARCH QUESTION: This study explored grandmothers' perceptions of their role in supporting new families and examined the potential for grandmothers to influence infant feeding decisions and parenting practices of new mothers in an area of Sydney, Australia, with low breastfeeding maintenance rates. PARTICIPANTS AND METHOD: A qualitative, descriptive study was conducted in South Western Sydney, Australia. Eleven grandmothers participated in one to one interviews and three of these also participated in a group discussion. RESULTS: Analysis revealed three themes: 'Presence'; 'Position'; and 'Power versus Preservation' which provide insight into the complexity of the grandmother-new mother relationship and describe the potential influence that grandmothers may have on infant feeding and parenting. DISCUSSION AND CONCLUSION: The findings highlight challenges and dilemmas faced by grandmothers in their supportive role for the new mother in her breastfeeding and early parenting experience and the difficulties grandmothers face in balancing potential risks and rewards in their interactions with the new family. 2009 Australian College of Midwives. Published by Elsevier Ltd. All rights reserved.

Country of Publication: Netherlands

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Attitude to Health](#)
[Bottle Feeding/px \[Psychology\]](#)

[Bottle Feeding/sn \[Statistics & Numerical Data\]](#)
[Breast Feeding/px \[Psychology\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Feeding](#)
[*Decision Making](#)
[*Family/px \[Psychology\]](#)
[Female](#)
[Focus Groups](#)
[Health Knowledge, Attitudes, Practice](#)
[Helping Behavior](#)
[Humans](#)
[*Intergenerational Relations](#)
[Mothers/ed \[Education\]](#)
[Mothers/px \[Psychology\]](#)
[Mothers/sn \[Statistics & Numerical Data\]](#)
[*Mothers](#)
[New South Wales](#)
[Nursing Methodology Research](#)
[Parenting/px \[Psychology\]](#)
[*Parenting](#)
[Power \(Psychology\)](#)
[Qualitative Research](#)
[Questionnaires](#)
[Reward](#)
[Role](#)
[Social Support](#)

Source: MEDLINE

105. [Physical activity in pregnancy and in breast-feeding period in obese mothers]. [German] Bewegung in Schwangerschaft und Stillperiode bei mütterlichem Übergewicht.

Original Title: Bewegung in Schwangerschaft und Stillperiode bei mütterlichem Übergewicht.

Citation: Zeitschrift für Geburtshilfe und Neonatologie, June 2010, vol./is. 214/3(95-102), 0948-2393;1439-1651 (2010 Jun)

Author(s): Korsten-Reck U

Institution: Medizinische Universitätsklinik, Abt. Rehabilitative und Präventive Sportmedizin, Freiburg. ulrike.korsten-reck@uniklinikfreiburg.de

Language: German

Abstract: BACKGROUND: Regular physical activity is an important component of a healthy pregnancy. Being physically active during pregnancy often creates uncertainty and leads to numerous questions: How much and which kind of sports is possible? In pregnant women a lot of physiological changes are taking place in haemodynamics, in the respiratory system, in the musculoskeletal system, in the glucose metabolism, and in further endocrinological feedback systems besides the psyche and bring about changes in fitness and physical performance. DISCUSSION: There is evidence that the most active women show the lowest prevalence for gestational diabetes (GDM) and, moreover a lower incidence for obesity and diabetes in both mother and child. Physically active women rarely develop not only GDM but also pre-eclampsia. The protective effect of physical activity can be explained by an enhanced placental growth and vascularity, by decreased oxidative stress, reduced inflammation and an adaptation of the disease-related endothelial dysfunction. Maternal obesity increases the frequencies of infertility and miscarriage. Weight loss programmes with nutritional advice and activity counselling represent a cost-effective infertility treatment. Moreover the possibility of health problems during pregnancy are limited thereby. A high degree of fitness before pregnancy and regular physical activity before conception can prevent the excessive weight gain during pregnancy and influence the weight at the very best. CONCLUSIONS: Considering common recommendations for training, as well as careful measures and contraindications, a moderate individual training to maintain physical and psychic fitness

is desirable. Many kinds of sports like jogging, nordic walking, swimming and cycling, for example, can be carried out in a pregnancy without any risks and furthermore promote the health of the future mother and child. Georg Thieme Verlag KG Stuttgart, New York.

Country of Publication: Germany
CAS Registry Number: 0 (Blood Glucose); 0 (Estrogens); 9002-69-1 (Relaxin)

Publication Type: English Abstract; Journal Article

Subject Headings: [Blood Glucose/me \[Metabolism\]](#)
[*Breast Feeding](#)
[Diabetes, Gestational/pp \[Physiopathology\]](#)
[Diabetes, Gestational/pc \[Prevention & Control\]](#)
[Diabetes, Gestational/th \[Therapy\]](#)
[Estrogens/bl \[Blood\]](#)
[Exercise/ph \[Physiology\]](#)
[*Exercise](#)
[Female](#)
[Hemodynamics/ph \[Physiology\]](#)
[Humans](#)
[Infant, Newborn](#)
[Musculoskeletal System/pp \[Physiopathology\]](#)
[Obesity/di \[Diagnosis\]](#)
[Obesity/pp \[Physiopathology\]](#)
[*Obesity/th \[Therapy\]](#)
[Physical Endurance/ph \[Physiology\]](#)
[Pre-Eclampsia/pc \[Prevention & Control\]](#)
[Pre-Eclampsia/th \[Therapy\]](#)
[Pregnancy](#)
[Pregnancy Complications/di \[Diagnosis\]](#)
[Pregnancy Complications/pp \[Physiopathology\]](#)
[*Pregnancy Complications/th \[Therapy\]](#)
[Puerperal Disorders/di \[Diagnosis\]](#)
[Puerperal Disorders/pp \[Physiopathology\]](#)
[*Puerperal Disorders/th \[Therapy\]](#)
[Pulmonary Gas Exchange/ph \[Physiology\]](#)
[Relaxin/bl \[Blood\]](#)
[Risk Factors](#)

Source: MEDLINE

106. Comparative study of the craniofacial growth depending on the type of lactation received.

Citation: European Journal of Paediatric Dentistry, June 2010, vol./is. 11/2(87-92), 1591-996X;1591-996X (2010 Jun)

Author(s): Sanchez-Molins M; Grau Carbo J; Lischeid Gaig C; Ustrell Torrent JM

Institution: Orthodontics Postgraduate Program, Faculty of Dentistry, University of Barcelona, Spain.

Language: English

Abstract: AIM: Several organizations consider mother's milk the optimal nutrition source for newborns [AAP, 1998; Gartner et al., 1997; Mohrbacher and Stock, 2002; WHO, 1989]. However, there is little scientific evidence supporting the idea that breastfeeding has a positive influence on the development of the orofacial structures. MATERIALS AND METHODS: The study of cases and controls (observational, analytical and retrospective) and lateral telerradiographs of the cranium of 197 patients (106 breast-fed and 91 bottle-fed) were compared. Ricketts, Steiner and McNamara values were used for the cephalometric analysis. Differences between the two groups were analysed by applying the T-test and ANOVA. Statistical significance levels were set at $p < 0.05$. Non-nutritive infantile sucking habits have been compared; differences between the two groups were analysed by applying the Chi-square test. RESULTS: First, the upper incisors were found to be protruded in the bottle-fed group. Second, subjects belonging to the breast-fed group displayed a brachycephalic mandible arch, while those fed with bottle had a

dolichocephalic Steiner mandibular plane. Third, both facial depth and distance of the pogonion to the perpendicular nasion presented a certain tendency to a retruded mandibular bone in the bottle-fed group. And fourth, the frequency of use of dummy and thumb suction were greater in the bottle feed group, without statistical significance. CONCLUSION: In addition to the multiple advantages that mother's milk offers to newborns, breastfeeding also helps correct orofacial development (not only for the incisors position, but also for the vertical and sagittal relations of the mandible with upper maxillary and cranial basis).

Country of Publication: Italy

Publication Type: Journal Article

Subject Headings: [Bottle Feeding/ae \[Adverse Effects\]](#)
[*Bottle Feeding](#)
[*Breast Feeding](#)
[Cephalometry](#)
[Child](#)
[Face/ah \[Anatomy & Histology\]](#)
[Female](#)
[Fingersucking/ae \[Adverse Effects\]](#)
[Humans](#)
[Incisor/pa \[Pathology\]](#)
[Male](#)
[Malocclusion/et \[Etiology\]](#)
[*Maxillofacial Development](#)
[Sex Factors](#)
[Skull/ah \[Anatomy & Histology\]](#)
[Skull/ra \[Radiography\]](#)

Source: MEDLINE

107. A comprehensive review of assay methods to determine drugs in breast milk and the safety of breastfeeding when taking drugs.

Citation: Analytical & Bioanalytical Chemistry, June 2010, vol./is. 397/3(1157-79), 1618-2650 (2010 Jun)

Author(s): Friguls B; Joya X; Garcia-Algar O; Pallas CR; Vall O; Pichini S

Institution: Unitat de Recerca Infancia i Entorn (URIE), Institut Municipal d'Investigacio Medica (IMIM)-Hospital del Mar, 08003 Barcelona, Spain.

Language: English

Abstract: Most of the licit and illicit drugs consumed by the breastfeeding woman pass into the milk and can modify the production, volume and composition of the milk, as well as hypothetically have short- and long-term harmful effects on the infant. There is much confusion in the scientific community regarding this issue: should a woman breastfeed her baby while continuing to use prescription drugs and/or drugs of abuse? There are many case reports of clinically significant toxicity in breast-fed infants from some substances used by mothers (such as irritability, vomiting, sedation, respiratory depression, shock), but there are too few data on studies conducted in breastfeeding women and their infants to make a realistic risk assessment. The objective measurement of a drug and/or metabolites in maternal milk is the first step when investigating the amount of drug excreted in milk and subsequently calculating the daily dose administered to the breast-fed infant. The present review reports the analytical methods developed to detect different drugs in the breast milk, listing the principal characteristics and validation parameters, advantages and disadvantages. Furthermore, the mechanisms of drug transfer into breast milk are discussed, the correlation between the concentration of the drug in breast milk and potential adverse outcomes on the infant are described for each drug, and suggested harm minimization strategies and approved breastfeeding recommendations are indicated.

Country of Publication: Germany

CAS Registry Number: 0 (Pharmaceutical Preparations); 0 (Street Drugs)

Publication Type: Journal Article; Review

Subject Headings: [Breast Feeding/ae \[Adverse Effects\]](#)
[*Breast Feeding](#)
[*Chemistry Techniques, Analytical/mt \[Methods\]](#)
[Female](#)
[Humans](#)
[Infant, Newborn](#)
[*Milk, Human/ch \[Chemistry\]](#)
[Pharmaceutical Preparations/ae \[Adverse Effects\]](#)
[*Pharmaceutical Preparations/an \[Analysis\]](#)
[Street Drugs/ae \[Adverse Effects\]](#)
[*Street Drugs/an \[Analysis\]](#)
[*Substance Abuse Detection/mt \[Methods\]](#)

Source: MEDLINE

108. Adiposity is not altered in preterm infants fed with a nutrient-enriched formula after hospital discharge.

Citation: Pediatric Research, June 2010, vol./is. 67/6(660-4), 0031-3998;1530-0447 (2010 Jun)

Author(s): Cooke RJ; Griffin IJ; McCormick K

Institution: Department of Pediatrics, Cardinal Glennon Children's Hospital, St Louis, Missouri 63104, USA. richardjcooke@mac.com

Language: English

Abstract: To determine whether adiposity was altered, body size (weight, length) and composition, determined by dual energy x-ray absorptiometry, were examined in preterm infants fed with a nutrient enriched (A, n=56), a term infant (B, n=57) or the nutrient enriched (discharge and term) plus the term formula (term and 6 mo; C, n=26), and a group of breast-fed preterm infants (D, n=25) at hospital discharge, 3, 6, and 12 mo corrected age. The results were analyzed using standard statistics. One hundred sixty-four infants (birth weight=1406+/-248 g, GA=31+/-1.7 wk) were studied. All infants underwent "catch-up," but weight and length were greater in infants in group A compared with groups B, C, or D. More rapid and complete "catch-up" was paralleled by increased total nonfat and fat mass (g) but not percentage of fat mass. Changes in fat mass (g) were primarily explained by increased fat accretion on the legs. More rapid and complete "catch-up" growth, therefore, reflected increased nonfat and peripheral fat mass. These data do not support the hypothesis of increased or central adiposity in infants fed a nutrient-enriched formula after hospital discharge.

Country of Publication: United States

Publication Type: Comparative Study; Journal Article; Randomized Controlled Trial; Research Support, Non-U.S. Gov't

Subject Headings: [Absorptiometry, Photon](#)
[*Adiposity](#)
[Age Factors](#)
[Birth Weight](#)
[Body Height](#)
[*Breast Feeding](#)
[Cephalometry](#)
[Double-Blind Method](#)
[Female](#)
[Head/ah \[Anatomy & Histology\]](#)
[Humans](#)
[Infant](#)
[*Infant Formula](#)
[*Infant Nutritional Physiological Phenomena](#)
[Infant, Newborn](#)
[*Infant, Premature/gd \[Growth & Development\]](#)

Male
 *Patient Discharge
 Prospective Studies
 Weight Gain

Source: MEDLINE

109. Complementary foods for infants: still no consensus on optimal timing.

Citation: Clinical Nutrition Insight, 01 June 2010, vol./is. 36/6(1-4), 19388640

Author(s): Lomangino K

Language: English

Abstract: Learning objectives: After participating in this activity, the clinician should be better able to: 1. State the various public health recommendations regarding when to introduce complementary foods into the diet of a breastfeeding infant. 2. Discuss the effects of 6 months compared with 4 to 6 months of exclusive breastfeeding on outcomes such as infections, infant growth, and obesity. 3. Describe the limitation current evidence poses on the ability to confidently issue public health recommendations regarding complementary foods.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Eating](#)
[Infant Feeding](#)
[Obesity](#)
[Education, Continuing \(Credit\)](#)
[Infant](#)
[Malnutrition](#)
[Social Attitudes](#)
[Time Factors](#)

Source: CINAHL

110. Breastfeeding: supporting work throughout the year.

Citation: Community Practitioner, 01 June 2010, vol./is. 83/6(14-15), 14622815

Author(s): Ly K

Language: English

Publication Type: journal article

Subject Headings: [Attitude to Breast Feeding](#)
[Breast Feeding](#)
[Community Health Nursing](#)
[Public Relations](#)
[Support, Psychosocial](#)
[Health Promotion](#)
[Infant](#)
[Mothers](#)
[United Kingdom](#)
[Women's Health Services](#)

Source: CINAHL

111. Breastfeeding and CMPA... Community Practice, May Issue, 2010.

Citation: Community Practitioner, 01 June 2010, vol./is. 83/6(20-20), 14622815

Author(s): Breward S

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Food Hypersensitivity](#)
[Milk](#)
[Infant](#)

Source: CINAHL

112. Suboptimal breastfeeding leads to excess costs, deaths.

Citation: Contemporary Pediatrics, 01 June 2010, vol./is. 27/6(14-15), 87500507

Author(s): Burke MG

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Health Care Costs](#)
[Infant Mortality](#)
[Asthma](#)
[Diabetes Mellitus](#)
[Enterocolitis, Necrotizing](#)
[Leukemia](#)
[Obesity](#)
[Patient Compliance](#)
[Respiratory Tract Infections](#)
[Sudden Infant Death](#)

Source: CINAHL

113. Herbal remedy use among Hispanic women during pregnancy and while breastfeeding: are physicians informed?

Citation: Hispanic Health Care International, 01 June 2010, vol./is. 8/2(93-106), 15404153

Author(s): Kochhar K; Saywell RM Jr.; Zollinger TW; Mandzuk CA; Haas DM; Howell LK; Martir JFS; Reger MK

Language: English

Abstract: Objective: To assess the knowledge and use of herbal remedies by Hispanic women with a history of pregnancy/breastfeeding; examine their comfort level discussing herbal remedies with their physician(s); and to determine the demographic/health characteristics that predict herbal remedy use. Methods: A cross-sectional patient survey of 461 Hispanic women was conducted from October 2003 to February 2004 at five urban health centers in Indianapolis, Indiana. Results: Majority of users were knowledgeable about the potential harm from using herbs while pregnant or breastfeeding and reported being able to communicate with their physicians. Few told their physician about all the herbs they used. Most reported their physician did not ask about their use of herbs. Few knew the English term for the herbs they were using. Four of the 11 demographic/health characteristics included in a multiple logistic regression model were predictors of Hispanic women's use of herbal remedies: age < 27, a high school graduate or greater, most comfortable speaking Spanish, and having greater knowledge of the benefits and consequences of using herbal remedies. Conclusion: Providers need to ask their parturient patients about their herbal remedy use and provide advice. Parturient patients should be encouraged to limit herb use until more scientific studies have been conducted to assess their safety.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Health Behavior](#)
[Health Knowledge](#)
[Hispanics](#)
[Medicine, Herbal](#)
[Mothers](#)

[Adolescence](#)
[Adult](#)
[Aged](#)
[Chi Square Test](#)
[Communication](#)
[Community Health Centers](#)
[Confidence Intervals](#)
[Cross Sectional Studies](#)
[Data Analysis Software](#)
[Descriptive Research](#)
[Descriptive Statistics](#)
[Educational Status](#)
[Employment Status](#)
[Female](#)
[Health Resource Utilization](#)
[Health Status](#)
[Human](#)
[Immigrants](#)
[Indiana](#)
[Infant, Newborn](#)
[Insurance, Health](#)
[Middle Age](#)
[Multiple Logistic Regression](#)
[Odds Ratio](#)
[P-Value](#)
[Patient Education](#)
[Physician-Patient Relations](#)
[Plants, Medicinal](#)
[Pregnancy](#)
[Questionnaires](#)
[Surveys](#)

Source: CINAHL

114. Attitudes to breastfeeding among adolescents.

Citation: Journal of Human Nutrition & Dietetics, 01 June 2010, vol./is. 23/3(285-293), 09523871

Author(s): Giles M; Connor S; McClenahan C; Mallet J

Language: English

Abstract: Background: Breastfeeding is a major public health concern and a decision to breastfeed has important health benefits for both the infant and mother. Breastfeeding rates are low in many Western countries, and evidence is accumulating to suggest that breastfeeding should be promoted in schools. The present study aimed to employ the theory of planned behaviour (TPB) to predict and explain young people's motivations to breastfeed with a view to designing an intervention to positively promote breastfeeding among adolescents. Methods: Senior schools in Northern Ireland were sorted by a number of key stratification variables, and then randomly sampled. In anticipation of a nonresponse, a first and second reserve list was drawn using matched replacements. Selected schools were contacted by letter, followed by a telephone call. Thirty-six schools agreed to take part in the research, and a cross-sectional survey was conducted with 2021 Year 10 pupils. Results: Having been breastfed as a child and having seen a mother breastfeeding significantly correlated with intention among both females and males. In descending order of importance, the TPB direct constructs were all significantly correlated with intention among males and females. A hierarchical multiple regression was performed with the intention to breastfeed/encourage partner to breastfeed as the dependent variable, and the TPB successfully predicted intention among males and females. Conclusions: The findings obtained in the present study suggest that the TPB is a useful framework on which to base the design of an intervention to promote attitude change, and highlight the importance of key theoretical constructs in predicting intentions to breastfeed.

Publication Type: journal article

Subject Headings: [Ajzen's Theory of Planned Behavior](#)
[Attitude to Breast Feeding](#)
[Breast Feeding](#)
[Health Promotion](#)
[Motivation](#)
[Adolescence](#)
[Adolescent Health](#)
[Adult](#)
[Attitude Measures](#)
[Coefficient Alpha](#)
[Control \(Psychology\)](#)
[Correlation Coefficient](#)
[Cross Sectional Studies](#)
[Descriptive Statistics](#)
[Female](#)
[Forecasting](#)
[Funding Source](#)
[Health Knowledge](#)
[Human](#)
[Instrument Construction](#)
[Intention](#)
[Ireland](#)
[Male](#)
[Maternal Behavior](#)
[Multiple Regression](#)
[One-Way Analysis of Variance](#)
[Questionnaires](#)
[Regression](#)
[Self-Efficacy](#)
[Survey Research](#)

Source: CINAHL

115. The process of acquiring feeding method by mothers of 0-3months twins [Japanese].

Citation: Journal of Japan Academy of Midwifery, 01 June 2010, vol./is. 24/1(4-16), 09176357

Author(s): Fujii M

Language: English

Abstract: Objective; The objective of this study was to elucidate the process of acquiring a feeding method by mothers of 0-3 monthold twins.; Subjects and Methods; Research was conducted based on the Grounded Theory Approach using the Symbolic Interaction Theory proposed by Blumer as theoretical bases. Data were collected by observation of participants and semi-structured interview methods from 5 mothers of twins who had no congenital anomaly or disease at birth and who started breastfeeding immediately after birth. Interviews took place during postpartum hospitalization, and at 1 month and 3 month check-ups of infants. The methods of Strauss & Corbin (1990/1999) and Saiki (2005) were used for analysis.; Results; The process of acquiring a feeding method by mothers of 0-3 month-old twins was "acquisition of due proportion feeding". "Due proportion feeding" is a feeding attitude that applies the concept of "due proportion" clarified by Jean Simon Pictet (Inoue, 1975). It is a unique feeding attitude toward twin created by their mothers who make judgments "taking priorities into consideration", while having "contradictory feelings" about "comparing the twins" in order to "respect their individuality" and "respect equality". During hospitalization, mothers conducted "accompanied feeding" in which midwives accompany their feeding. After discharge, "pressure from crying infants" was increased and "unusual physical condition" occurred, but mothers handled the crying twins by "supplementing with formula after wavering" or using "a strategy to overcome frequent feeding". Until 1 month postpartum, mothers selected feeding methods caring mainly about the weight difference of the twins, but

concern about the weight difference disappeared with "growth of the babies" and they came to feed the infant with higher priority by comparing the twins, in order to understand their individual characteristics. Then "pressure from crying infants" decreased and mothers shifted to "mother-led breastfeeding" where the twins were fed based on their needs and conducted "continued breastfeeding".; Conclusion; The process of acquiring a feeding method that fits the mothers of 0-3 month-old twins was "acquisition of due proportion feeding". Healthcare professionals should understand this process and provide support so that the mothers of twins understand the characteristics of each individual infant.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Twins](#)
[Conceptual Framework](#)
[Crying](#)
[Female](#)
[Grounded Theory](#)
[Human](#)
[Infant](#)
[Infant Feeding, Supplemental](#)
[Infant, Newborn](#)
[Mothers](#)
[Observational Methods](#)
[Postnatal Period](#)
[Pregnancy](#)
[Semi-Structured Interview](#)

Source: CINAHL

116. Breastfeeding mothers identify attitudes and actions of healthcare professionals that resulted in confusion and anxiety about breastfeeding [Japanese].

Citation: Journal of Japan Academy of Midwifery, 01 June 2010, vol./is. 24/1(17-27), 09176357

Author(s): Nagamori K; Doeda N; Kobayashi N; Nakagawa Y; Horiuchi S; Kataoka Y; Hishinuma Y; Shimizu A

Language: English

Abstract: Objective; The purpose of this qualitative study was to identify those attitudes and actions by healthcare professionals that detracted from the breastfeeding mother's confidence in nursing her infant.; Methods; The subjects of this research were a convenience sample of 40 mothers: 35 were recruited at a breastfeeding counseling room at a nursing college in Tokyo and five from a sibling preparation class at the same location. Data were collected from August through November 2007 following established ethical procedures. Researchers used semi-structured interviews about problems and coping with breastfeeding and providing nutrition for their infant. All interviews were taped and transcribed. The data were systematically analyzed. Codes were extracted and then aggregated into sub-categories from which categories were created. A research team provided conformability.; Results; Regarding breastfeeding support, the interviews revealed that some interactions with health care professionals were described as: "unhelpful", "causing anxiety", and "results in confusion". Identified were five categories of behavior of healthcare professionals that failed to support the breastfeeding mother thus, contributing her sense of confusion and anxiety about nursing her infant: (i) intrusive behavior of healthcare professionals dismissing the mother's wishes and intentions to breastfeed, (ii) insufficient help to become independent with breastfeeding, (iii) dismissing the mothers' feelings, (iv) discordant advice from the mothers' expectation, and (v) provision of inconsistent information. Mothers desired to institute frequent breastfeeding including the addition of human milk substitute provided by healthcare professionals. Unfortunately those health care providers did not listen to their requests nor did they respond empathically to the mother's sense of suffering and anxiety of breastfeeding and the child rearing. Mothers choose to breastfeed; they felt a sense of commitment to providing the best nutrition that could to protect their infants. The lack of

support and concern by health care providers left mothers with a burden of regret and a sense of failure about their ability to breastfeed. The sense of failure continued after discharge and they continued to experience challenges and difficulties about their breastfeeding or expression of their milk at home. Mothers were left alone to manage their breastfeeding problems.; Conclusions; Women were motivated to breastfeed but their interactions with health care providers resulted in feelings of failure, confusion and anxiety. Health care providers need education to promote: (i) mother-driven support considering mother's intentions, (ii) support for mothers to be independent breast-feeders, (iii) empathy for the mother's feelings, (iv) adequate observation and assessment ability, and (v) provision of consistent information based on an evidence.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Mothers](#)
[Anxiety](#)
[Attitude of Health Personnel](#)
[Audiorecording](#)
[Coding](#)
[Confidence](#)
[Convenience Sample](#)
[Coping](#)
[Descriptive Research](#)
[Female](#)
[Human](#)
[Infant, Newborn](#)
[Japan](#)
[Pregnancy](#)
[Professional-Patient Relations](#)
[Qualitative Studies](#)
[Semi-Structured Interview](#)
[Support, Psychosocial](#)

Source: CINAHL

117. Experience of maternal role among breastfeeding mothers in the postnatal period [Japanese].

Citation: Journal of Japan Academy of Midwifery, 01 June 2010, vol./is. 24/1(40-52), 09176357

Author(s): Inada C; Kitagawa M

Language: English

Abstract: Purpose; As a basic study to identify nursing actions that will help mothers to grow into the maternal role, this study examined, from the viewpoint of the maternal role, the subjective experience of mother-infant interactions among mothers breastfeeding their babies in the postnatal period.; Methods; The subjects were mothers who wanted to breastfeed their baby, who had their children in the same room with them for 24 hours a day, and who had a healthy postpartum course together with their baby. Consent to participate in the study was voluntary, and level of care and confidentiality were guaranteed. Data were collected through participant observation and semi-structured interviews, and the observed mother-infant interactions and mothers' perceptions reported in the semi-structured interviews were taken as single episodes. A qualitative inductive analysis was then performed.; Results; Five healthy primiparae and seven healthy multiparae agreed to participate in the study. Eighty-five episodes, identified from semi-structured interviews and observed mother-child interactions during breastfeeding from directly after childbirth until one month, were qualitatively analyzed based on role awareness reported by the mothers themselves. From this analysis 10 categories and 25 subcategories expressing mothers' role awareness were derived. The 10 categories were "Inhibition of behavior seeking child's needs," "Arrangements for effective suckling," "Positive approach to child," "Conflict between responding to child's needs and mother's own physical needs," "Trial and error in finding methods of care suited to the child's characteristics," "Confirming the needs of the child," "Deepening the bond with the child," "Assessment of breastfeeding," "Rebuilding of maternal role," and "Limited

response to child."; Conclusion; Categories to evaluate acquisition of the maternal role among mothers who breastfed their children were identified.; As mothers are acquiring the skill to breastfeed their children they also grow into the maternal role and develop their abilities. Breastfeeding was shown to be an important act of nurturing that helps mothers to acquire a maternal role attainment.; It was found that even when observed interactions were the same, actions may be done with different role awareness among mothers, and that maternal role awareness cannot be evaluated using the quantity of observed interactions alone.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Maternal Role](#)
[Mother-Infant Relations](#)
[Female](#)
[Human](#)
[Infant, Newborn](#)
[Multiparas](#)
[Participant Observation](#)
[Perception](#)
[Postnatal Period](#)
[Pregnancy](#)
[Primiparas](#)
[Qualitative Studies](#)
[Semi-Structured Interview](#)

Source: CINAHL

118. Educational programs: effective or not?

Citation: Nursing for Women's Health, 01 June 2010, vol./is. 14/3(238-242), 17514851

Author(s): Theroux R

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Cardiovascular Diseases](#)
[Professional Knowledge](#)
[Advanced Practice Nurses](#)
[Analysis of Variance](#)
[Breast Feeding](#)
[Databases](#)
[Descriptive Statistics](#)
[Hospitals](#)
[Human](#)
[Information Resources](#)
[Logistic Regression](#)
[Medical Records](#)
[Midwives](#)
[Multicenter Studies](#)
[Nonexperimental Studies](#)
[Nonprobability Sample](#)
[Outcome Assessment](#)
[Physicians](#)
[Physicians, Family](#)
[Practice Guidelines](#)
[Pretest-Posttest Design](#)
[Professional Practice, Evidence-Based](#)
[Questionnaires](#)
[Random Sample](#)
[Record Review](#)

[Registered Nurses](#)
[World Wide Web](#)

Source: CINAHL

119. Breast- v. formula-feeding: impacts on the digestive tract and immediate and long-term health effects.

Citation: Nutrition Research Reviews, 01 June 2010, vol./is. 23/1(23-36), 09544224

Author(s): Le Huërou-Luron I; Blat S; Boudry G

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Digestive System Physiology](#)
[Infant Formula](#)
[Infant](#)
[Infant Development](#)
[Infant, Newborn](#)
[Pancreas](#)

Source: CINAHL

120. Ankyloglossia, exclusive breastfeeding, and failure to thrive.

Citation: Pediatrics, 01 June 2010, vol./is. 125/6(0-), 00314005

Author(s): Forlenza GP; Paradise Black NM; McNamara EG; Sullivan SE

Language: English

Abstract: A 6-month-old term boy was hospitalized to evaluate the cause of his failure to thrive, mandated as part of an investigation by the Department of Children and Families after an allegation of medical neglect was made. On admission the patient was below birth weight, and a medical workup for failure to thrive was pursued; however, he was noted to have severe ankyloglossia and was an exclusively breastfed infant. The only interventions during his hospitalization were frenotomy and assistance to the mother to increase her milk supply. The infant immediately experienced weight gain and has continued to show slow, but steady, weight gain as an outpatient. We illustrate here many of the controversies concerning ankyloglossia.

Publication Type: journal article

Subject Headings: [Ankyloglossia](#)
[Breast Feeding](#)
[Failure to Thrive](#)
[Ankyloglossia](#)
[Child Abuse](#)
[Clinical Assessment Tools](#)
[Infant](#)
[Male](#)

Source: CINAHL

121. Babies bringing up feeds. Dietary and nutritional advice.

Citation: BMJ: British Medical Journal, 29 May 2010, vol./is. 340/(0-0), 09598146

Author(s): McMahon JT

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Diet](#)
[Nutritional Assessment](#)
[Breast Feeding](#)

Infant, Newborn
Milk Proteins
Milk, Human
United Kingdom

Source: CINAHL

122. Breast-feeding attitudes and behavior among WIC mothers in Texas... Women, Infants, and Children.

Citation: Journal of Nutrition Education & Behavior, 02 May 2010, vol./is. 42/3S(0-), 14994046

Author(s): Vaaler ML; Stagg J; Parks SE; Erickson T; Castrucci BC

Language: English

Publication Type: journal article

Subject Headings: Attitude to Breast Feeding
Breast Feeding
Food Services
Infant Feeding
Infant Formula
Maternal Behavior
Adolescence
Adult
Age Factors
Attitude Measures
Coefficient Alpha
Confidence Intervals
Cross Sectional Studies
Descriptive Statistics
Educational Status
Female
Hispanics
Human
Infant
Infant Nutrition
Language
Logistic Regression
Mothers
Multivariate Analysis
Odds Ratio
Public Spaces
Questionnaires
Regression
Survey Research
Texas
Young Adult

Source: CINAHL

123. Social, cultural, and medical factors that influence maternal breastfeeding.

Citation: Issues in Mental Health Nursing, May 2010, vol./is. 31/5(365-7), 0161-2840;1096-4673 (2010 May)

Author(s): Purdy IB

Institution: UCLA School of Nursing, and David Geffen School of Medicine, Los Angeles, California 90095-1752, USA. IPurdy@mednet.ucla.edu

Language: English

Country of Publication: England

Publication Type: Journal Article

Subject Headings: Attitude to Health/eh [Ethnology]
 Breast Feeding/eh [Ethnology]
 Breast Feeding/px [Psychology]
 Breast Feeding/sn [Statistics & Numerical Data]
 *Breast Feeding
 *Health Promotion/og [Organization & Administration]
 Humans
 Infant, Newborn
 Mothers/ed [Education]
 Mothers/px [Psychology]
 *Mothers
 Nurse's Role
 Patient Education as Topic
 Social Support
 United States
 *World Health
 World Health Organization/og [Organization & Administration]

Source: MEDLINE

124. Primary care interventions to promote breastfeeding.

Citation: American Family Physician, May 2010, vol./is. 81/10(1273), 0002-838X;1532-0650 (2010 May 15)

Author(s): Meyers D; Camp M

Institution: Center for Primary Care, Prevention, and Clinical Partnerships, Agency for Healthcare Research and Quality.

Language: English

Country of Publication: United States

Publication Type: Case Reports; Journal Article

Subject Headings: Adult
 *Breast Feeding
 Female
 Health Knowledge, Attitudes, Practice
 *Health Promotion
 Humans
 Infant
 Infant, Newborn
 Pregnancy
 *Primary Health Care

Source: MEDLINE

125. Breast-feeding in relation to asthma, lung function, and sensitization in young schoolchildren.

Citation: Journal of Allergy & Clinical Immunology, May 2010, vol./is. 125/5(1013-9), 0091-6749;1097-6825 (2010 May)

Author(s): Kull I; Melen E; Alm J; Hallberg J; Svartengren M; van Hage M; Pershagen G; Wickman M; Bergstrom A

Institution: Institute of Environmental Medicine, Karolinska Institutet, SE-171 76 Stockholm, Sweden. inger.kull@ki.se

Language: English

Abstract: BACKGROUND: The evidence from previous studies on beneficial effects of breast-feeding in relation to development of asthma is conflicting. OBJECTIVE: To investigate the relation between breast-feeding and asthma and/or sensitization during the first 8 years of life. METHOD: In a birth cohort, children were followed up to 8 years by questionnaires at ages 2 months and 1, 2, 4, and 8 years to collect information on

exposures and health effects. Determination of serum IgE antibodies to common inhalant and food allergens was performed at 4 and 8 years. Longitudinal analyses were applied by using general estimated equations. The study population consisted of 3825 children (93% of the original cohort), of whom 2370 gave blood and 2564 performed lung function measurements at 8 years. RESULTS: Children exclusively breast-fed 4 months or more had a reduced risk of asthma during the first 8 years of life (adjusted odds ratio [OR], 0.63; 95% CI, 0.50-0.78) compared with children breast-fed less than 4 months. At 8 years, reduced risks of sensitization (adjusted OR, 0.79; 95% CI, 0.64-0.99) and asthma in combination with sensitization (adjusted OR, 0.59; 95% CI, 0.37-0.93) were seen among children exclusively breast-fed 4 months or more. This group also had a significantly better lung function measured with peak expiratory flow. CONCLUSION: Breast-feeding for 4 months or more seems to reduce the risk of asthma up to 8 years. At this age, a reduced risk was observed particularly for asthma combined with sensitization. Furthermore, breast-feeding seems to have a beneficial effect on lung function. Copyright 2010 American Academy of Allergy, Asthma & Immunology. Published by Mosby, Inc. All rights reserved.

Country of Publication: United States
CAS Registry Number: 0 (Allergens); 37341-29-0 (Immunoglobulin E)
Publication Type: Journal Article; Research Support, Non-U.S. Gov't
Subject Headings:

[Allergens/ae \[Adverse Effects\]](#)
[Allergens/im \[Immunology\]](#)
[*Allergens](#)
[Asthma/ep \[Epidemiology\]](#)
[*Asthma/pc \[Prevention & Control\]](#)
[*Breast Feeding](#)
[Child](#)
[Child, Preschool](#)
[Female](#)
[Food Hypersensitivity/ep \[Epidemiology\]](#)
[Food Hypersensitivity/et \[Etiology\]](#)
[Humans](#)
[*Hypersensitivity/ep \[Epidemiology\]](#)
[Hypersensitivity/et \[Etiology\]](#)
[Immunoglobulin E/bl \[Blood\]](#)
[Incidence](#)
[Infant](#)
[Inhalation Exposure](#)
[Male](#)
[Questionnaires](#)
[*Respiratory Function Tests](#)

Source: MEDLINE

126. Breast-feeding, aeroallergen sensitization, and environmental exposures during infancy are determinants of childhood allergic rhinitis.

Citation: Journal of Allergy & Clinical Immunology, May 2010, vol./is. 125/5(1054-1060.e1), 0091-6749;1097-6825 (2010 May)
Author(s): Codispoti CD; Levin L; LeMasters GK; Ryan P; Reponen T; Villareal M; Burkle J; Stanforth S; Lockey JE; Khurana Hershey GK; Bernstein DI
Institution: Department of Internal Medicine, Division of Immunology, Allergy and Rheumatology, University of Cincinnati, Cincinnati, Ohio 4267-0563, USA.
Language: English
Abstract:

BACKGROUND: Infant predictors of early childhood allergic rhinitis (AR) are poorly understood. OBJECTIVE: We sought to identify environmental exposures and host factors during infancy that predict AR at age 3 years. METHODS: High-risk children from greater Cincinnati were followed annually from ages 1 to 3 years. AR was defined as sneezing, runny, or blocked nose in the prior 12 months and a positive skin prick test

(SPT) response to 1 or more aeroallergens. Environmental and standardized medical questionnaires determined exposures and clinical outcomes. Primary activity area dust samples were analyzed for house dust endotoxin (HDE) and (1-3)-beta-D-glucan. Fine particulate matter sampled at 27 monitoring stations was used to estimate personal elemental carbon attributable to traffic exposure by using a land-use regression model. RESULTS: Of 361 children in this analysis, 116 had AR, and 245 were nonatopic and nonsymptomatic. Prolonged breast-feeding in African American children (adjusted odds ratio [aOR], 0.8; 95% CI, 0.6-0.9) and multiple children in the home during infancy was protective against AR (aOR, 0.4; 95% CI, 0.2-0.8). Food SPT response positivity and tree SPT response positivity in infancy increased the risk of AR at age 3 years (aOR of 4.4 [95% CI, 2.1-9.2] and aOR of 6.8 [95% CI, 2.5-18.7], respectively). HDE exposure was associated with AR; the effect was dependent on exposure level. Elemental carbon attributable to traffic and environmental tobacco smoke exposure showed no effect on AR. CONCLUSION: Prolonged breast-feeding in African American subjects and multiple children in the home during infancy reduced the risk of AR at age 3 years. SPT response positivity to food and tree allergens enhanced risk. The HDE effect on AR was related to exposure. Copyright 2010 American Academy of Allergy, Asthma & Immunology. Published by Mosby, Inc. All rights reserved.

Country of Publication: United States

CAS Registry Number: 0 (Air Pollutants); 0 (Allergens); 0 (Dust)

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Air Pollutants](#)
[Air Pollution, Indoor](#)
[Allergens/ae \[Adverse Effects\]](#)
[Allergens/im \[Immunology\]](#)
[*Allergens](#)
[*Breast Feeding](#)
[Child, Preschool](#)
[Dust/im \[Immunology\]](#)
[*Environmental Exposure](#)
[Female](#)
[Food/ae \[Adverse Effects\]](#)
[Housing](#)
[Humans](#)
[*Hypersensitivity, Immediate/et \[Etiology\]](#)
[Inhalation Exposure](#)
[Male](#)
[*Rhinitis/et \[Etiology\]](#)
[Risk Factors](#)
[Skin Tests](#)
[Trees/ae \[Adverse Effects\]](#)
[Trees/im \[Immunology\]](#)

Source: MEDLINE

127. Cow's milk protein allergy.

Citation: Community Practitioner, May 2010, vol./is. 83/5(40-1), 1462-2815;1462-2815 (2010 May)

Author(s): Wilson K; McDowall L; Hodge D; Chetcuti P; Cartledge P

Institution: Leeds General Infirmary.

Language: English

Abstract: CMPA is a common food allergy that presents with diverse manifestations affecting more than one body system. Early recognition of the condition and prompt initiation of dietary elimination of cow's milk protein is important. A future challenge with cow's milk protein can confirm a positive diagnosis.

Country of Publication: England

CAS Registry Number: 0 (Milk Proteins)

Publication Type: Case Reports; Journal Article

Subject Headings: [Algorithms](#)
[Animals](#)
[Bottle Feeding/ae \[Adverse Effects\]](#)
[*Bottle Feeding](#)
[*Breast Feeding](#)
[Cattle](#)
[Community Health Nursing/mt \[Methods\]](#)
[Decision Trees](#)
[Early Diagnosis](#)
[Humans](#)
[Infant](#)
[Infant Formula](#)
[Milk Hypersensitivity/di \[Diagnosis\]](#)
[Milk Hypersensitivity/dh \[Diet Therapy\]](#)
[Milk Hypersensitivity/et \[Etiology\]](#)
[*Milk Hypersensitivity](#)
[Milk Proteins/ae \[Adverse Effects\]](#)
[Nursing Assessment/mt \[Methods\]](#)
[Skin Tests](#)

Source: MEDLINE

128. Implementing the BFI education standards: the perils, the pitfalls and the positives.

Citation: Practising Midwife, May 2010, vol./is. 13/5(23-5), 1461-3123;1461-3123 (2010 May)

Author(s): Henshaw AM; Hewett A

Institution: University of Leeds. A.Henshaw@leeds.ac.uk

Language: English

Country of Publication: England

Publication Type: Journal Article

Subject Headings: [*Breast Feeding](#)
[*Education, Nursing, Baccalaureate/mt \[Methods\]](#)
[Great Britain](#)
[*Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[*Midwifery/ed \[Education\]](#)
[*Nurse's Role](#)
[Nurse-Patient Relations](#)
[Patient Education as Topic](#)
[*Postnatal Care/mt \[Methods\]](#)
[Program Evaluation](#)
[Students, Nursing](#)

Source: MEDLINE

129. Infant feeding practice and childhood cognitive performance in South India.

Citation: Archives of Disease in Childhood, May 2010, vol./is. 95/5(347-54), 0003-9888;1468-2044 (2010 May)

Author(s): Veena SR; Krishnaveni GV; Srinivasan K; Wills AK; Hill JC; Kurpad AV; Muthayya S; Karat SC; Nalinakshi M; Fall CH

Institution: Epidemiology Research Unit, Holdsworth Memorial Hospital, Mysore, Karnataka, India. veenasr@gmail.com

Language: English

- Abstract:** AIM: Several studies have suggested a beneficial effect of infant breastfeeding on childhood cognitive function. The main objective was to examine whether duration of breastfeeding and age at introduction of complementary foods are related to cognitive performance in 9- to 10-year-old school-aged children in South India. METHODS: The authors examined 514 children from the Mysore Parthenon birth cohort for whom breastfeeding duration (six categories from <3 to ≥ 18 months) and age at introduction of complementary foods (four categories from <4 to ≥ 6 months) were collected at the first-, second- and third-year annual follow-up visits. Their cognitive function was assessed at a mean age of 9.7 years using three core tests from the Kaufman Assessment Battery for children and additional tests measuring long-term retrieval/storage, attention and concentration, visuo-spatial and verbal abilities. RESULTS: All the children were initially breastfed. The mode for duration of breastfeeding was 12-17 months (45.7%) and for age at introduction of complementary foods 4 months (37.1%). There were no associations between longer duration of breastfeeding, or age of introduction of complementary foods, and cognitive function at 9-10 years, either unadjusted or after adjustment for age, sex, gestation, birth size, maternal age, parity, socio-economic status, parents' attained schooling and rural/urban residence. CONCLUSIONS: Within this cohort, in which prolonged breastfeeding was the norm (90% breastfed ≥ 6 months and 65% breastfed for ≥ 12 months), there was no evidence suggesting a beneficial effect of longer duration of breastfeeding on later cognitive ability.
- Country of Publication:** England
- Publication Type:** Journal Article; Research Support, Non-U.S. Gov't
- Subject Headings:** [Adolescent](#)
[Adult](#)
[Age Factors](#)
[Anthropometry](#)
[*Breast Feeding/px \[Psychology\]](#)
[Child](#)
[*Child Development/ph \[Physiology\]](#)
[Child, Preschool](#)
[*Cognition/ph \[Physiology\]](#)
[Cohort Studies](#)
[Female](#)
[Follow-Up Studies](#)
[Humans](#)
[India](#)
[Infant](#)
[Infant Nutritional Physiological Phenomena/ph \[Physiology\]](#)
[Infant, Newborn](#)
[Male](#)
[Neuropsychological Tests](#)
[Poverty](#)
[Social Class](#)
[Time Factors](#)
[Young Adult](#)
- Source:** MEDLINE
- 130. Assessment of estrogenic activity and total lipids in maternal biological samples (serum and breast milk).**
- Citation:** Ecotoxicology & Environmental Safety, May 2010, vol./is. 73/4(679-84), 0147-6513;1090-2414 (2010 May)
- Author(s):** Sapbamrer R; Prapamontol T; Hock B
- Institution:** School of Medicine, Naresuan University Phayao, Phayao 56000, Thailand. lektratana56@yahoo.com
- Language:** English

Abstract: The present study investigated estrogenic activity and total lipid levels in maternal serum and breast milk. The study was performed with 50 mothers from Fang district of northern Thailand. Maternal serum was collected 5 times, including the second trimester, pre-delivery period, delivery period, and lactating period at day 30 and day 60. Breast milk was collected 7 times, including day 1, 7, 14, 21, 30, 45, and 60 of lactation. There were the same patterns of variation between estrogenicity and total lipid levels both in serum and breast milk. The correlation between serum estrogenicity and serum total lipids was found with a correlation coefficient (r) ranging from 0.403 to 0.661. However, no correlation was found between milk estrogenicity and milk total lipids. The results therefore suggest that lipid contents might be the major factors affecting the variation of estrogenicity levels, and xenoestrogens, which the mother subjects exposed, were lipophilic pollutants. The remarkable findings were that the mean levels of estrogenicity in breast milk were approximately 8-13.5 times higher than those in maternal serum compared at the same period. However, no correlation was found between estrogenicity levels in serum and breast milk, leading to decreased accuracy in predicted infant exposure by maternal serum. Copyright 2009 Elsevier Inc. All rights reserved.

Country of Publication: United States

CAS Registry Number: 0 (Endocrine Disruptors); 0 (Estrogens); 0 (Lipids)

Publication Type: Journal Article

Subject Headings: [Adolescent](#)
[Adult](#)
[*Breast Feeding](#)
[*Endocrine Disruptors/an \[Analysis\]](#)
[Endocrine Disruptors/bl \[Blood\]](#)
[*Estrogens/bl \[Blood\]](#)
[Female](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[*Lipids/bl \[Blood\]](#)
[*Maternal Exposure](#)
[*Milk, Human/ch \[Chemistry\]](#)
[Pregnancy](#)
[Young Adult](#)

Source: MEDLINE

131. Early severe weight loss in newborns after discharge from regular nurseries.

Citation: Acta Paediatrica, May 2010, vol./is. 99/5(654-7), 0803-5253;1651-2227 (2010 May)

Author(s): Tjora E; Karlsen LC; Moster D; Markestad T

Institution: Department of Paediatrics, Haukeland University Hospital, Bergen, Norway.
erling-tjora@c2i.net

Language: English

Abstract: AIMS: To study incidence and risk factors of early neonatal dehydration in a Norwegian population based cohort. METHODS: Term neonates admitted to a paediatric department during 2002-2008 with a weight loss \geq 12% within three weeks of age were identified retrospectively through review of medical records. For each patient a sex-matched control group of two full-term infants was selected to assess risk factors for dehydration. RESULTS: A total of 38 of 37 321 infants (1.0 per thousand) were admitted at a median age of 6 (interquartile range 5-12) days, and the admission rate increased during the study period (p for trend = 0.008). Simultaneously, mean nursery stay decreased from 3.5 to 2.7 days (p = 0.022). Mean weight loss was 15.0% of birth weight and 17 of 29 (58.6%) had serum sodium above 145 mmol/L. The only significant difference between patients and controls was that mothers of patients were older (32.3 \pm 5.0 vs. 29.4 \pm 5.4 years, p = 0.005). Conclusion: Short nursery stay may be a risk factor for dehydration in newborn infants.

Country of Publication: Norway

Publication Type: Journal Article

Subject Headings: [*Breast Feeding/ae \[Adverse Effects\]](#)
[Cohort Studies](#)
[Dehydration/co \[Complications\]](#)
[*Dehydration/ep \[Epidemiology\]](#)
[Female](#)
[Humans](#)
[Incidence](#)
[Infant, Newborn](#)
[*Length of Stay/sn \[Statistics & Numerical Data\]](#)
[Male](#)
[Norway/ep \[Epidemiology\]](#)
[Nurseries, Hospital](#)
[Patient Discharge](#)
[Patient Readmission/sn \[Statistics & Numerical Data\]](#)
[Retrospective Studies](#)
[Risk Factors](#)
[Severity of Illness Index](#)
[*Weight Loss](#)

Source: MEDLINE

132. Breastfeeding as obesity prevention in the United States: a sibling difference model.

Citation: American Journal of Human Biology, May 2010, vol./is. 22/3(291-6), 1042-0533;1520-6300 (2010 May)

Author(s): Metzger MW; McDade TW

Institution: Department of Human Development and Social Policy, Northwestern University, 2046 Sheridan Road, Evanston, IL 60208, USA. m-metzger@northwestern.edu

Language: English

Abstract: In light of the growing prevalence of obesity in the United States, and the health risks associated with childhood obesity in particular, it is critical to identify avenues for obesity prevention. This study tests the hypothesis that breastfeeding serves as one protective factor against children's subsequent development of obesity. We used linear-, logistic-, and sibling fixed-effects regression models to evaluate the association between infant feeding history and body mass index (BMI) in late childhood or adolescence (9-19 years, mean = 14 years). Complete data were available for 976 participants (488 sibling pairs) in the 2002 Child Development Supplement of the Panel Study of Income Dynamics, a nationally representative survey of families in the United States. In sibling pairs in which only one sibling was breastfed, the breastfed sibling had an adolescent BMI that was 0.39 standard deviations lower than his or her sibling, controlling for child-specific factors that may have influenced parents' feeding decisions. This effect is equivalent to a difference of more than 13 pounds for a 14-year-old child of average height. Furthermore, fixed-effects logistic regressions predicting overweight and obese status showed that breastfed siblings were less likely to reach those BMI thresholds. We therefore conclude that breastfeeding in infancy may be an important protective factor against the development of obesity in the United States. The application of a sibling fixed-effects model provides stronger evidence of a causal relationship than prior research reporting similar patterns of association.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [Adolescent](#)
[Age Factors](#)
[Body Mass Index](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Child](#)
[Child, Preschool](#)

Female
 Humans
 Infant
 Infant, Newborn
 Male
 *Obesity/ep [Epidemiology]
 *Obesity/pc [Prevention & Control]
 Regression Analysis
 Sex Factors
 *Siblings
 Socioeconomic Factors
 United States/ep [Epidemiology]

Source: MEDLINE

133. [Mother's milk -- a natural source of pre- and probiotics for stimulation of child's intestinal flora. Mother's milk is to be regarded as natural symbiotic food]. [German] Muttermilch--eine natürliche Quelle von Pre- und Probiotika zur Stimulation der kindlichen Darmflora. Muttermilch ist als natürliches synbiotisches Lebensmittel zu betrachten.

Original Title: Muttermilch--eine natürliche Quelle von Pre- und Probiotika zur Stimulation der kindlichen Darmflora. Muttermilch ist als natürliches synbiotisches Lebensmittel zu betrachten.

Citation: Kinderkrankenschwester, May 2010, vol./is. 29/5(211-4), 0723-2276;0723-2276 (2010 May)

Author(s): Zwiauer K

Institution: Abt. für Kinder- und Jugendheilkunde, Landeskrankenhaus St. Pölten.
 Karl.Zwiauer@stpoelten.lknoe.at

Language: German

Country of Publication: Germany

CAS Registry Number: 0 (Oligosaccharides); 0 (Prebiotics)

Publication Type: Comparative Study; Journal Article; Review

Subject Headings: [Animal Experimentation](#)
[Animals](#)
[*Breast Feeding](#)
[Cesarean Section](#)
[Delivery, Obstetric](#)
[Female](#)
[Humans](#)
[Infant](#)
[Infant Food](#)
[Infant, Newborn](#)
[Infant, Premature](#)
[*Intestines/mi \[Microbiology\]](#)
[Lactobacillus/ip \[Isolation & Purification\]](#)
[Male](#)
[*Milk, Human](#)
[*Oligosaccharides](#)
[*Prebiotics](#)
[Pregnancy](#)
[*Probiotics](#)
[Rats](#)

Source: MEDLINE

134. [Successful breastfeeding management in neonatology]. [German] Erfolgreiches Stillmanagement in der Neonatologie.

Original Title: Erfolgreiches Stillmanagement in der Neonatologie.

Citation: Kinderkrankenschwester, May 2010, vol./is. 29/5(179-84, 186), 0723-2276;0723-2276 (2010 May)

Author(s): Blume J

Institution: Kinderkrankenschwester Still- und Laktationsberaterin IBCLC, Universitätsklinikum Erlangen Neonatologie.

Language: German

Country of Publication: Germany

CAS Registry Number: 0 (Prebiotics)

Publication Type: Comparative Study; Journal Article

Subject Headings: [Adult](#)
[Age Factors](#)
[*Breast Feeding](#)
[Counseling](#)
[Female](#)
[Germany](#)
[Humans](#)
[Infant](#)
[Infant Food](#)
[Infant, Newborn](#)
[Infant, Premature](#)
[Male](#)
[*Milk Banks](#)
[Milk, Human](#)
[*Mothers/ed \[Education\]](#)
[*Neonatology](#)
[Practice Guidelines as Topic](#)
[Prebiotics](#)
[*Probiotics/ad \[Administration & Dosage\]](#)
[Questionnaires](#)
[Time Factors](#)

Source: MEDLINE

135. Perpetuating "scientific motherhood": infant feeding discourse in Parents magazine, 1930-2007.

Citation: Women & Health, May 2010, vol./is. 50/3(297-311), 0363-0242;1541-0331 (2010 May)

Author(s): Foss KA

Institution: School of Journalism, Middle Tennessee State University, Murfreesboro, Tennessee 37132, USA. kfoss@mtsu.edu

Language: English

Abstract: Although breastfeeding initiation rates have recently been at an all-time high, duration continues to be considerably low. Given the health benefits associated with extended breastfeeding, this discrepancy is cause for concern. This research examined the messages conveyed about infant feeding in a popular parenting magazine, Parents magazine, from 1930 through 2007. Findings indicated that the messages about infant feeding shifted in accordance with changing ideologies about the means of infant feeding-from bottle-feeding to breastfeeding. However, even with changing attitudes toward infant feeding, writers used scientific evidence and the advice of "experts" to justify the dominant form of feeding. The absence of practical advice regarding breastfeeding challenges, especially from "real" women set up false expectations about the breastfeeding experience, painting it as "natural" and best for the baby. The dependency on experts and lack of practical advice in popular media, like Parents magazine, may help explain a societal trend that downplays breastfeeding obstacles, giving insight into the vast discrepancy between breastfeeding initiation and duration.

Country of Publication: England

Publication Type: Historical Article; Journal Article

Subject Headings: [*Bottle Feeding/hi \[History\]](#)
[Breast Feeding/px \[Psychology\]](#)
[*Breast Feeding](#)
[*Evidence-Based Medicine/hi \[History\]](#)
[Female](#)
[*Health Promotion/hi \[History\]](#)
[History, 20th Century](#)
[History, 21st Century](#)
[Humans](#)
[Infant](#)
[Infant Care/hi \[History\]](#)
[*Journalism, Medical/hi \[History\]](#)
[Mothers](#)
[*Parenting/hi \[History\]](#)
[*Periodicals as Topic/hi \[History\]](#)

Source: MEDLINE

136. Breast-feeding attitudes and behavior among WIC mothers in Texas.

Citation: Journal of Nutrition Education & Behavior, May 2010, vol./is. 42/3 Suppl(S30-8), 1499-4046;1708-8259 (2010 May-Jun)

Author(s): Vaaler ML; Stagg J; Parks SE; Erickson T; Castrucci BC

Institution: Office of Program Decision Support, Texas Department of State Health Services, Austin, TX 78756, USA. mvaaler@yahoo.com

Language: English

Abstract: OBJECTIVE: This study explored the influence of demographic characteristics on attitudes toward the benefits of breast-feeding, approval of public breast-feeding, and the use of infant formula. Additionally, the study examined whether attitudes were related to infant feeding practices among mothers enrolled in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) in Texas. DESIGN: This study used a cross-sectional design. SETTING: Participants completed questionnaires at WIC clinic sites across Texas. PARTICIPANTS: Mothers of young children who were receiving WIC benefits. MAIN OUTCOME MEASURE(S): Attitudes toward the benefits of breast-feeding, attitudes toward public breast-feeding, attitudes toward infant formula, and the choice of infant feeding practice. ANALYSIS: Descriptive statistics, multivariate ordinary least squares regression, and multinomial logistic regression. RESULTS: A key finding was that many Hispanic mothers held favorable attitudes toward both breast milk and infant formula. Younger and less educated mothers were least likely to agree with the benefits of breast-feeding. Mothers with positive attitudes toward the benefits of breast-feeding were likely to exclusively breastfeed and use both formula and breast milk. CONCLUSIONS AND IMPLICATIONS: Attitudes toward breast-feeding, public breast-feeding, and infant formula and their influence on breast-feeding behavior should inform the curriculum of breast-feeding promotion programs. Published by Elsevier Inc.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [Adolescent](#)
[Adult](#)
[*Breast Feeding/px \[Psychology\]](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Choice Behavior](#)
[Cross-Sectional Studies](#)
[Female](#)
[Food Services](#)
[*Health Knowledge, Attitudes, Practice](#)
[Humans](#)

[Infant](#)
[Infant Formula/ad \[Administration & Dosage\]](#)
[Infant, Newborn](#)
[Maternal-Child Health Centers](#)
[*Mothers/px \[Psychology\]](#)
[Nutrition Surveys](#)
[*Preventive Health Services](#)
[Public Assistance](#)
[Social Perception](#)
[Texas](#)
[Young Adult](#)

Source: MEDLINE

137. Effects of cigarette smoking cessation on breastfeeding duration.

Citation: Nicotine & Tobacco Research, May 2010, vol./is. 12/5(483-8), 1462-2203;1469-994X (2010 May)

Author(s): Higgins TM; Higgins ST; Heil SH; Badger GJ; Skelly JM; Bernstein IM; Solomon LJ; Washio Y; Preston AM

Institution: Department of Psychiatry, University of Vermont, Burlington, VT 05401, USA.

Language: English

Abstract: INTRODUCTION: The purpose of this study was to use data from controlled trials to examine whether smoking cessation increases breastfeeding duration. Correlational studies have confirmed associations between smoking status and breastfeeding duration, but whether smoking cessation increases breastfeeding duration has not been established. METHODS: Participants (N = 158) were smokers at the start of prenatal care who participated in controlled trials on smoking cessation. Women were assigned to either an incentive-based intervention wherein they earned vouchers exchangeable for retail items by abstaining from smoking or a control condition where they received comparable vouchers independent of smoking status. Treatments were provided antepartum through 12-week postpartum. Maternal reports of breastfeeding collected at 2-, 4-, 8-, 12-, and 24-week postpartum were compared between treatment conditions. Whether women were exclusively breastfeeding was not investigated. RESULTS: The incentive-based treatment significantly increased breastfeeding duration compared with rates observed among women receiving the control treatment, with significant differences between treatment conditions observed at 8-week (41% vs. 26%; odds ratio [OR] = 2.7, 95% CI = 1.3-5.6, p = .01) and 12-week (35% vs. 17%; OR = 3.4, 95% CI = 1.5-7.6, p = .002) postpartum. No significant treatment effects on breastfeeding were observed at other assessments. Changes in smoking status mediated the effects of treatment condition on breastfeeding duration. CONCLUSIONS: These results provide evidence from controlled studies that smoking cessation increases breastfeeding duration, which, to our knowledge, has not been previously reported.

Country of Publication: England

Publication Type: Journal Article; Randomized Controlled Trial; Research Support, N.I.H., Extramural

Subject Headings:
[Adult](#)
[*Breast Feeding](#)
[Female](#)
[Humans](#)
[*Maternal Behavior/px \[Psychology\]](#)
[Motivation](#)
[Postpartum Period](#)
[Pregnancy](#)
[Smoking/pc \[Prevention & Control\]](#)
[*Smoking Cessation](#)
[Time Factors](#)
[Young Adult](#)

Source: MEDLINE

138. Maternal socio-demographic factors influencing the initiation and exclusivity of breastfeeding in a Nigerian semi-urban setting.

Citation:	Maternal & Child Health Journal, May 2010, vol./is. 14/3(459-65), 1092-7875;1573-6628 (2010 May)
Author(s):	Ogunlesi TA
Institution:	Department of Paediatrics, Olabisi Onabanjo University, P.O. Box 652, Sagamu 121001, Nigeria. ogunlesit@yahoo.co.uk
Language:	English
Abstract:	<p>BACKGROUND: The success of breastfeeding promotion is influenced by maternal factors. Therefore, it is vital to examine the influence of basic maternal demographic factors on breastfeeding practices. OBJECTIVE: To determine the influence of maternal socio-demographic factors on the initiation and exclusivity of breastfeeding. METHOD: A cross-sectional survey of mothers of children aged from 1 to 24 months attending a Nigerian Infant Welfare Clinic was conducted. Respondents were grouped according to age, parity, education, occupation, sites of antenatal care and delivery. These groups were compared for breastfeeding indices using bivariate and multivariate analysis. RESULTS: All the 262 respondents breastfed their children. The exclusive breastfeeding rate was 33.3% for children aged 0-3 months, 22.2% for children aged 4-6 months and 19.4% for children aged 7-24 months at the time of the study. Significantly higher proportions of mothers with at least secondary education, clinic-based antenatal care and delivery in health facilities initiated breastfeeding within 1 h of birth, avoided pre-lacteal feeding and practiced exclusive breastfeeding for the first 6 months of life. Maternal age and parity did not confer any advantage on breastfeeding practices. Delivery of children outside health facilities strongly contributed to delayed initiation of breastfeeding ($P < 0.001$), pre-lacteal feeding ($P = 0.003$) and failure to breastfeed exclusively ($P = 0.049$). Maternal education below secondary level strongly contributed to pre-lacteal feeding ($P = 0.004$) and failure to practice exclusive breastfeeding ($P = 0.008$). CONCLUSION: Low maternal education and non-utilization of orthodox obstetric facilities impairs early initiation and exclusivity of breastfeeding.</p>
Country of Publication:	United States
Publication Type:	Journal Article
Subject Headings:	Adolescent Adult Breast Feeding/px [Psychology] *Breast Feeding/sn [Statistics & Numerical Data] Chi-Square Distribution Cross-Sectional Studies Delivery, Obstetric Demography Educational Status Female Hospitals, Rural Humans Infant Infant, Newborn Logistic Models Mothers/ed [Education] Mothers/px [Psychology] *Mothers/sn [Statistics & Numerical Data] Multivariate Analysis Occupations/sn [Statistics & Numerical Data] Prenatal Care *Rural Population/sn [Statistics & Numerical Data] Socioeconomic Factors

[*Suburban Population/sn \[Statistics & Numerical Data\]](#)
[Time Factors](#)

Source: MEDLINE

139. The use of antidepressants in pregnant and breastfeeding women: a review of recent studies.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(187-95), 0890-3344;1552-5732 (2010 May)

Author(s): Kendall-Tackett K; Hale TW

Institution: Texas Tech University School of Medicine, Amarillo, Texas, USA. kkendallt@aol.com

Language: English

Abstract: Antidepressants are one of the most commonly prescribed medications for pregnant and lactating women. However, there have been some recent concerns about their safety. This article summarizes recent research on the impact of untreated depression on the baby, the effects of antidepressants on the baby when prescribed during pregnancy, the short- and longer-term effects of prenatal exposure on infants and children, and the passage of medications into breast milk. Recommendations are made on providing mothers and their health care providers with information so they can make accurate risk/benefit analyses about using these medications while pregnant or breastfeeding.

Country of Publication: United States

CAS Registry Number: 0 (Antidepressive Agents)

Publication Type: Journal Article; Review

Subject Headings: [Antidepressive Agents/ae \[Adverse Effects\]](#)
[*Antidepressive Agents/me \[Metabolism\]](#)
[*Antidepressive Agents/tu \[Therapeutic Use\]](#)
[*Breast Feeding](#)
[*Depression/dt \[Drug Therapy\]](#)
[Female](#)
[Fetus/de \[Drug Effects\]](#)
[Humans](#)
[Infant, Newborn](#)
[Milk, Human/ch \[Chemistry\]](#)
[Pregnancy](#)
[*Pregnancy Complications/ci \[Chemically Induced\]](#)
[Prenatal Exposure Delayed Effects](#)
[Risk Assessment](#)

Source: MEDLINE

140. Lactation and breastfeeding research studies: who should provide consent for the neonate?.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(180-2), 0890-3344;1552-5732 (2010 May)

Author(s): Noel-Weiss J; Woodend AK; Kujawa-Myles S

Institution: University of Ottawa School of Nursing, Ottawa, Ontario, Canada. Joy.Noel-Weiss@uottawa.ca

Language: English

Abstract: Research ethics guidelines do not provide sufficient direction for breastfeeding and human lactation studies. This article presents the principles of consent for research studies and discusses rationales for who should consent for infants in lactation and breastfeeding research studies.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [Adult](#)

[*Breast Feeding](#)
[*Ethics, Research](#)
[Female](#)
[Guidelines as Topic](#)
[Humans](#)
[Infant, Newborn](#)
[*Informed Consent/es \[Ethics\]](#)
[Male](#)
[Parents/px \[Psychology\]](#)

Source: MEDLINE

141. Embracing change.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(103-4), 0890-3344;1552-5732 (2010 May)
Author(s): Heinig MJ
Language: English
Country of Publication: United States
Publication Type: Editorial
Subject Headings: [*Breast Feeding](#)
[Clinical Competence](#)
[*Counseling/td \[Trends\]](#)
[*Health Promotion/td \[Trends\]](#)
[Humans](#)
Source: MEDLINE

142. Developing a biomonitoring educational pamphlet for potential participants in a breast milk biomonitoring study.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(183-6), 0890-3344;1552-5732 (2010 May)
Author(s): Dunn RL; Carey GB
Institution: Keene State College, Keene, NH 03435-2903, USA. rdunn@keene.edu
Language: English
Abstract: Over the past decade, biomonitoring research initiatives in the United States have increased because of growing concern over the accumulation of environmental chemicals in the human body. One matrix that has become a viable biological sample for estimating human exposure to environmental chemicals is breast milk. However, breast milk biomonitoring research can induce anxiety and confusion about breastfeeding if communication is lacking between researchers, community partners, and participants. To bridge this communication gap, an informative, reassuring 8-page pamphlet was developed to educate community partners and potential participants about research on 1 class of environmental chemicals-polybrominated diphenyl ethers. Not only did the pamphlet assist in participant recruitment, but it forged positive relationships with valuable community partners.
Country of Publication: United States
CAS Registry Number: 0 (Halogenated Diphenyl Ethers)
Publication Type: Journal Article; Research Support, Non-U.S. Gov't
Subject Headings: [Adult](#)
[Body Burden](#)
[*Breast Feeding/px \[Psychology\]](#)
[Environmental Exposure](#)
[*Environmental Monitoring/mt \[Methods\]](#)
[Female](#)

*Halogenated Diphenyl Ethers/an [Analysis]
 *Health Education
 Health Knowledge, Attitudes, Practice
 Humans
 *Milk, Human/ch [Chemistry]

Source: MEDLINE

143. Effect of early skin-to-skin mother--infant contact during the first 3 hours following birth on exclusive breastfeeding during the maternity hospital stay.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(130-7), 0890-3344;1552-5732 (2010 May)

Author(s): Bramson L; Lee JW; Moore E; Montgomery S; Neish C; Bahjri K; Melcher CL

Institution: Loma Linda University, School of Public Health, California, USA, thebramsons@netscape.net

Language: English

Abstract: This was a nurse-driven, hospital-based, prospective cohort study of data collected in 19 hospitals in San Bernardino and Riverside counties by California Perinatal Services Network on all mothers (n = 21 842) who delivered a singleton infant (37-40 weeks gestation) between July 2005 through June 2006. Multivariate ordinal logistic regression showed that maternal infant-feeding method intention (measured prior to birth), sociodemographic characteristics, intrapartum variables, and early skin-to-skin mother-infant contact during the first 3 hours following birth (controlling for delivery hospital) were correlated with exclusive breastfeeding during the maternity hospitalization. Compared with mothers with no early skin-to-skin contact, exclusive breastfeeding was higher in mothers who experienced skin-to-skin contact for 1 to 15 minutes (odds ratio [OR] 1.376; 95% confidence interval [CI], 1.189-1.593), 16 to 30 minutes (OR 1.665; 95% CI, 1.468-1.888), 31 to 59 minutes (OR 2.357; 95% CI, 2.061-2.695), and more than 1 hour (OR 3.145; 95% CI, 2.905-3.405). The results demonstrate a dose-response relationship between early skin-to-skin contact and breastfeeding exclusivity.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adult
 *Breast Feeding/px [Psychology]
 Female
 Humans
 Infant, Newborn
 *Lactation/px [Psychology]
 Logistic Models
 *Maternal Behavior/px [Psychology]
 *Mother-Child Relations
 Object Attachment
 Postpartum Period
 Prospective Studies
 Time Factors

Source: MEDLINE

144. Rural-urban differences in breastfeeding initiation in the United States.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(118-29), 0890-3344;1552-5732 (2010 May)

Author(s): Sparks PJ

Institution: Department of Demography and Organization Studies, University of Texas at San Antonio, San Antonio, TX 78207, USA.

Language: English

Abstract: Research has noted a rural disadvantage in breastfeeding initiation; however, most previous research has been based on nonrepresentative samples and has been limited in its ability to compare racial/ethnic differences in breastfeeding initiation based on residential location. This research fills this gap by examining a nationally representative sample of births using the Early Childhood Longitudinal Study-Birth Cohort (ECLS-B) to explore associations between rural-urban residence and maternal race/ethnicity on breastfeeding initiation. Results indicate that associations observed for rural-urban breastfeeding initiation differ based on maternal race/ethnicity and poverty status. These patterns likely reflect differences in economic resources, work environments, and social support among rural minority postpartum women.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[Breast Feeding/eh \[Ethnology\]](#)
[Cohort Studies](#)
[Ethnic Groups/sn \[Statistics & Numerical Data\]](#)
[Female](#)
[Humans](#)
[Infant, Newborn](#)
[Longitudinal Studies](#)
[Male](#)
[Minority Groups/sn \[Statistics & Numerical Data\]](#)
[*Poverty](#)
[*Rural Population/sn \[Statistics & Numerical Data\]](#)
[*Social Support](#)
[United States/ep \[Epidemiology\]](#)
[*Urban Population/sn \[Statistics & Numerical Data\]](#)
[Young Adult](#)

Source: MEDLINE

145. The relationship between breastfeeding test weights and postpartum breastfeeding rates.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(168-74), 0890-3344;1552-5732 (2010 May)

Author(s): Wilhelm S; Rodehorst-Weber TK; Flanders Stepan MB; Hertzog M

Institution: University of Nebraska Medical Center College of Nursing, Scottsbluff, Nebraska 69361, USA.

Language: English

Abstract: This secondary analysis was conducted to determine the relationship between test weights and days of breastfeeding. Test weights were performed with a scale (accurate to 2 grams) before and after feeding. Days of breastfeeding was measured by self-reporting. All test weights were interrelated and were associated with higher days of breastfeeding. Test weights at day 2 to 4 and at 2 weeks were not correlated significantly with either intention or self-efficacy at any time. However, 6-week test weights were correlated with intention at all 3 times, and self-efficacy at 6 weeks. Women with higher breastfeeding self-efficacy scores tended to report higher intention to breastfeed for 6 months.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Breast Feeding/px \[Psychology\]](#)
[Female](#)
[Health Promotion](#)
[Humans](#)

[*Infant, Newborn/gd \[Growth & Development\]](#)
[*Intention](#)
[*Mothers/px \[Psychology\]](#)
[*Self Efficacy](#)
[Time Factors](#)
[Weight Gain](#)
[Young Adult](#)

Source: MEDLINE

146. Danish health care providers' perception of breastfeeding difficulty experienced by women who are obese, have large breasts, or both.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(138-47), 0890-3344;1552-5732 (2010 May)

Author(s): Katz KA; Nilsson I; Rasmussen KM

Institution: Cornell University, Ithaca, NY 14853-6301, USA.

Language: English

Abstract: Maternal obesity is associated with short duration of breastfeeding, and many obese women also have large breasts. To determine if health professionals who support lactating women can distinguish between these maternal characteristics as obstacles to breastfeeding, the authors conducted a mail survey of 242 Danish health professionals. They thought that initiating was more difficult ($P < .0001$) than continuing breastfeeding for women with large breasts and/or obesity. These difficulties were thought to be lowest for women with large breasts, higher for obese women, and highest for obese women with large breasts ($P < .0001$). These difficult ratings were significantly related in a complex manner to the respondents' personal characteristics and type of training. These findings indicate the importance of recognizing and treating large breasts and maternal obesity as separate obstacles to successful breastfeeding and that interventions to reduce these obstacles should be designed to account for characteristics of the person providing them.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Breast/ah \[Anatomy & Histology\]](#)
[Breast/ph \[Physiology\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[Denmark](#)
[Female](#)
[*Health Personnel/px \[Psychology\]](#)
[Health Surveys](#)
[Humans](#)
[*Lactation/ph \[Physiology\]](#)
[Middle Aged](#)
[*Obesity/co \[Complications\]](#)
[Questionnaires](#)
[Young Adult](#)

Subject Headings: [Adult](#)

[*Breast/ah \[Anatomy & Histology\]](#)
[Breast/ph \[Physiology\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[Denmark](#)
[Female](#)
[*Health Personnel/px \[Psychology\]](#)
[Health Surveys](#)
[Humans](#)
[*Lactation/ph \[Physiology\]](#)
[Middle Aged](#)
[*Obesity/co \[Complications\]](#)
[Questionnaires](#)
[Young Adult](#)

Source: MEDLINE

147. HIV-negative status is associated with very early onset of lactation among Ghanaian women.

Citation: Journal of Human Lactation, May 2010, vol./is. 26/2(107-17), 0890-3344;1552-5732 (2010 May)

Author(s): Otoo GE; Marquis GS; Sellen DW; Chapman DJ; Perez-Escamilla R

Institution: Department of Nutritional Sciences at the University of Connecticut, CT, USA. geotoo@yahoo.com

Language: English

Abstract: This is a longitudinal cohort study investigating the association between maternal HIV status and the reported onset of lactation. The Research to Improve Infant Nutrition and Growth project recruited 442 mothers from 3 antenatal clinics in the eastern region of Ghana, based on positive, negative, and unknown HIV status. Onset of lactation was assessed by maternal perception and validated with 2 subsamples: measurement of infant breast milk intake (n = 40) and daily infant weight measurement for 2 weeks (n = 150). Multivariate logistic regression was used to identify predictors of very early onset of lactation (onset of lactation < 6 hours). Predictors of very early onset of lactation include HIV-negative status (odds ratio = 2.68; P = .014), multiparity (odds ratio = 2.93; P = .009), vaginal delivery (odds ratio = 2.55; P = .035), and having a male child (odds ratio = 1.86; P = .032). The findings indicate an association between maternal HIV status and very early onset of lactation.

Country of Publication: United States

Publication Type: Journal Article; Research Support, N.I.H., Extramural

Subject Headings: [Adult](#)
[*Breast Feeding/px \[Psychology\]](#)
[Cohort Studies](#)
[Female](#)
[Ghana](#)
[*HIV Seronegativity](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[*Lactation/ph \[Physiology\]](#)
[*Lactation/px \[Psychology\]](#)
[Logistic Models](#)
[Longitudinal Studies](#)
[Male](#)
[*Mothers/px \[Psychology\]](#)
[Perception](#)
[Time Factors](#)
[Time Perception](#)
[Weight Gain](#)

Source: MEDLINE

148. Safety of immunomodulators and biologics for the treatment of inflammatory bowel disease during pregnancy and breast-feeding.

Citation: Inflammatory Bowel Diseases, May 2010, vol./is. 16/5(881-95), 1078-0998;1536-4844 (2010 May)

Author(s): Gisbert JP

Institution: Gastroenterology Unit, Hospital Universitario de la Princesa and Centro de Investigacion Biomedica en Red de Enfermedades Hepaticas y Digestivas, Madrid, Spain.
gisbert@meditex.es

Language: English

Abstract: The aim of this article is to critically review available data regarding the safety of immunomodulators and biological therapies during pregnancy and breast-feeding in women with inflammatory bowel disease. Methotrexate and thalidomide can cause congenital anomalies and are contraindicated during pregnancy (and breast-feeding). Although thiopurines have a Food and Drug Administration (FDA) rating D, available data suggest that these drugs are safe and well tolerated during pregnancy. Although traditionally women receiving azathioprine or mercaptopurine have been discouraged from breast-feeding because of theoretical potential risks, it seems that these drugs may be safe in this scenario. Treatment with cyclosporine for steroid-refractory ulcerative colitis (UC) during pregnancy can be considered safe and effective, and the use of this drug should be considered in cases of severe UC as a means of avoiding urgent surgery. Breast-feeding is contraindicated for patients receiving cyclosporine. Biological therapies

appear to be safe in pregnancy, as no increased risk of malformations has been demonstrated. Therefore, the limited clinical results available suggest that the benefits of infliximab and adalimumab in attaining response and maintaining remission in pregnant patients might outweigh the theoretical risks of drug exposure to the fetus. Stopping therapy in the third trimester may be considered, as it seems that transplacental transfer of infliximab is low prior to this. Certolizumab differs from infliximab and adalimumab in that it is a Fab fragment of an antitumor necrosis factor alpha monoclonal antibody, and therefore it may not be necessary to stop certolizumab in the third trimester. The use of infliximab is probably compatible with breast-feeding.

Country of Publication: United States

CAS Registry Number: 0 (Biological Products); 0 (Immunologic Factors)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't; Review

Subject Headings: [Biological Products/ae \[Adverse Effects\]](#)
[*Biological Products/tu \[Therapeutic Use\]](#)
[*Breast Feeding](#)
[Female](#)
[Humans](#)
[Immunologic Factors/ae \[Adverse Effects\]](#)
[*Immunologic Factors/tu \[Therapeutic Use\]](#)
[*Inflammatory Bowel Diseases/dt \[Drug Therapy\]](#)
[Pregnancy](#)
[*Pregnancy Complications/dt \[Drug Therapy\]](#)

Source: MEDLINE

149. Breastfeeding success after laryngeal mask airway resuscitation.

Citation: Journal of Maternal-Fetal & Neonatal Medicine, May 2010, vol./is. 23/5(437-40), 1476-4954;1476-4954 (2010 May)

Author(s): Zanardo V; Legarizzi S; Giustardi A; Micaglio M; Trevisanuto D

Institution: Department of Pediatrics, University of Padua, Padua, Italy. zanardo@pediatria.unipd.it

Language: English

Abstract: BACKGROUND: Positive pressure resuscitation by laryngeal mask airway (LMA) may expose the neonate to gas leak and gastric air insufflation, influencing postnatal gastrointestinal adaptation and breastfeeding success. METHODS: Term neonates admitted to regular nursery of the Department of Pediatrics of Padua University (Italy), from January 2005 to December 2005, after positive pressure resuscitation by LMA (Group A, 50) were compared with neonates who required positive pressure resuscitation by endotracheal tube (ETT) (Group B, 13) and to non resuscitated control neonates, matched for gestational age, (Group C, 100). RESULTS: Gestational age and birth weight were comparable among Group A, B, and C neonates. In addition, their ages at the first feeding and those of the first meconium emission were comparable. Diversely, LMA-, and ETT-resuscitated neonates presented a reduced exclusive breastfeeding rate at discharge and an increased hypoglycemia occurrence during postnatal adaptation. Moreover, ETT-resuscitated neonates presented a lower Apgar's score at 1 min, a significant increased regurgitation rate, and a delayed urine emission in comparison to LMA-resuscitated neonates. CONCLUSION: LMA- and ETT-positive pressure resuscitation impair postnatal gastrointestinal adaptation and breastfeeding success at discharge with equal frequency and to similar degree in term neonates. Regurgitation reflex is instead, enhanced after ETT-resuscitation.

Country of Publication: England

Publication Type: Journal Article

Subject Headings: [Adaptation, Physiological/ph \[Physiology\]](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[Case-Control Studies](#)
[Female](#)

[Gastrointestinal Transit/ph \[Physiology\]](#)
[Gestational Age](#)
[Humans](#)
[Incidence](#)
[Infant Formula/sn \[Statistics & Numerical Data\]](#)
[Infant, Newborn](#)
[Laryngeal Masks/ae \[Adverse Effects\]](#)
[*Laryngeal Masks/sn \[Statistics & Numerical Data\]](#)
[Positive-Pressure Respiration/ae \[Adverse Effects\]](#)
[Positive-Pressure Respiration/mt \[Methods\]](#)
[Positive-Pressure Respiration/sn \[Statistics & Numerical Data\]](#)
[Regurgitation, Gastric/ep \[Epidemiology\]](#)
[Resuscitation/ae \[Adverse Effects\]](#)
[Resuscitation/mt \[Methods\]](#)
[*Resuscitation/sn \[Statistics & Numerical Data\]](#)

Source: MEDLINE

150. Breastfeeding after augmentation mammaplasty with saline implants.

Citation: Annals of Plastic Surgery, May 2010, vol./is. 64/5(530-3), 0148-7043;1536-3708 (2010 May)

Author(s): Cruz NI; Korchin L

Institution: Division of Plastic Surgery, Department of Surgery, School of Medicine, University of Puerto Rico, San Juan, Puerto Rico. normacruz01@prtc.net

Language: English

Abstract: It has been reported that breastfeeding problems occur in women who have breast implants. The breastfeeding success of women who had augmentation with saline implants and subsequently had a live birth (n = 107) was compared with that of women of similar age who had hypoplastic breasts and had children before their consultation (n = 105). A self-administered 11-item questionnaire was used to collect data on demographics and breastfeeding success. The information requested included age, weight, height, whether breastfeeding was attempted, if it was successful, and the need to supplement. Additional information requested from the study group included position of breast scar, implant volume, and whether loss of nipple sensation had occurred after the surgery (as judged by the patient). The groups were not significantly different in age (22 +/- 7 vs. 23 +/- 5). There was, however, a significant difference (P < 0.05) in the breastfeeding success and need to supplement feedings. Successful breastfeeding occurred in 88% of the control and 63% of the study group. A need to supplement breastfeeding occurred in 27% of the control group but increased to 46% in the study group. No significant difference (P > 0.05) was found in the breastfeeding experience between periareolar and inframammary approaches. Loss of nipple sensation after augmentation mammaplasty was reported by 2% of both the periareolar and inframammary subgroups. The success rate of breastfeeding decreases approximately 25% and the need to supplement breastfeeding increases 19% in young women with hypoplastic breasts after augmentation mammaplasty, irrespective of whether a periareolar or inframammary approach is used.

Country of Publication: United States

CAS Registry Number: 7647-14-5 (Sodium Chloride)

Publication Type: Journal Article

Subject Headings:
[Body Mass Index](#)
[*Breast Feeding](#)
[*Breast Implants/ae \[Adverse Effects\]](#)
[Case-Control Studies](#)
[Chi-Square Distribution](#)
[Female](#)
[Humans](#)
[*Mammaplasty/ae \[Adverse Effects\]](#)
[Mammaplasty/mt \[Methods\]](#)

Questionnaires
Sodium Chloride
Treatment Outcome
Young Adult

Source: MEDLINE

151. Breastfeeding among Chinese immigrants in the United States.

Citation: Journal of Midwifery & Women's Health, May 2010, vol./is. 55/3(277-81), 1526-9523;1542-2011 (2010 May-Jun)

Author(s): Donaldson H; Kratzer J; Okutero-Ketter S; Tung P

Institution: Columbia University School of Nursing, 617 W. 168th St., New York, NY 10032, USA.

Language: English

Country of Publication: United States

Publication Type: Case Reports; Journal Article

Subject Headings: [*Acculturation](#)
[Adult](#)
[*Asian Americans/px \[Psychology\]](#)
[*Asian Americans/sn \[Statistics & Numerical Data\]](#)
[Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[China](#)
[Female](#)
[*Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[Infant, Newborn](#)
[Pregnancy](#)
[United States](#)

Source: MEDLINE

152. Factors associated to breastfeeding cessation before 6 months.

Citation: Revista Latino-Americana de Enfermagem, May 2010, vol./is. 18/3(373-80), 0104-1169;0104-1169 (2010 May-Jun)

Author(s): Roig AO; Martínez MR; Garcá JC; Hoyos SP; Navidad GL; Alvarez JC; Pujalte Mdel M; De León González RG

Institution: Departamento de Enfermerá, Universidad de Alicante, España. antonio.oliver@ua.es

Language: English

Abstract: This research aimed to identify the determinants of full breastfeeding (FBF) and any breastfeeding (ABF) cessation before 6 months, through a six-month follow-up of 248 mothers going a postpartum visit. Data were collected by personal interview during the first month and telephone interviews at four and six months postpartum. Coxs proportional hazards model was used. Not having previous ABF experience, previous ABF duration ≤ 4 months and worse evaluation of previous experience were associated with cessation of ABF and FBF. Lower educational level was associated with cessation of ABF and the use of pacifiers or occasional breast-milk substitutes with cessation of FBF. Attending childbirth education was a protective factor against early FBF or ABF cessation. Activities supporting breastfeeding should be intensified for mothers with poorer access to information and with negative or without ABF previous experience. The use of pacifiers and not-medically indicated breast milk substitutes should be controlled.

Country of Publication: Brazil

Publication Type: Journal Article

Subject Headings: [*Breast Feeding/sn \[Statistics & Numerical Data\]](#)

[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[Multivariate Analysis](#)
[Socioeconomic Factors](#)
[Time Factors](#)

Source: MEDLINE

153. Feeding of infants of HIV-positive mothers.

Citation: Current Opinion in Clinical Nutrition & Metabolic Care, May 2010, vol./is. 13/3(336-43), 1363-1950;1535-3885 (2010 May)

Author(s): Saloojee H; Cooper PA

Institution: Division of Community Paediatrics, Department of Paediatrics and Child Health, University of the Witwatersrand, Johannesburg, South Africa.
Haroon.Saloojee@wits.ac.za

Language: English

Abstract: PURPOSE OF REVIEW: To highlight recent research that has contributed to an improved understanding of, or resulted in, important changes in the approach to feeding HIV-exposed infants. RECENT FINDINGS: The administration of antiretroviral therapy to a HIV-positive pregnant woman and its continued use during breast-feeding significantly reduce postnatal HIV transmission to her child. Similarly, extended antiretroviral prophylaxis to the breast-feeding infant dramatically decreases HIV transmission and promotes HIV-free child survival. Predominant breast-feeding may be as effective as exclusive breast-feeding in reducing HIV transmission risk. The protective role of immune modulators such as interferon-gamma and interleukin-15 in preventing breast milk transmission is being better appreciated. Although infant-feeding counseling is critical to the success of infant survival strategies, it is generally done poorly with few examples of successful consequences other than in research settings. SUMMARY: Breast-feeding of HIV-exposed infants can be made considerably safer in resource-constrained settings through the provision of maternal highly active antiretroviral therapy (HAART), maternal short-course antiretrovirals, and extended infant antiretroviral prophylaxis.

Country of Publication: England

CAS Registry Number: 0 (Anti-Retroviral Agents); 0 (Immunologic Factors)

Publication Type: Journal Article; Research Support, Non-U.S. Gov't; Review

Subject Headings:

- [*Anti-Retroviral Agents/tu \[Therapeutic Use\]](#)
- [*Antiretroviral Therapy, Highly Active](#)
- [*Breast Feeding](#)
- [Counseling](#)
- [Female](#)
- [*HIV](#)
- [HIV Infections/dt \[Drug Therapy\]](#)
- [*HIV Infections/pc \[Prevention & Control\]](#)
- [HIV Infections/tm \[Transmission\]](#)
- [Humans](#)
- [Immunologic Factors](#)
- [Infant](#)
- [Infant, Newborn](#)
- [*Infectious Disease Transmission, Vertical/pc \[Prevention & Control\]](#)
- [Milk, Human/vi \[Virology\]](#)
- [Pregnancy](#)
- [Pregnancy Complications, Infectious/dt \[Drug Therapy\]](#)

Source: MEDLINE

154. The urinary cotinine levels of infants and the determinants.

Citation: Turkish Journal of Pediatrics, May 2010, vol./is. 52/3(294-300), 0041-4301;0041-4301 (2010 May-Jun)

Author(s): Yilmaz G; Karacan C; Besler HT; Yurdakök K; Coşkun T

Institution: Dr. Sami Ulus Children's and Maternity Training and Research Hospital, Ankara, Turkey.

Language: English

Abstract: The aim of this study was to determine the effect of the route of tobacco smoke exposure on urinary cotinine levels of infants. A cross-sectional analysis was done on 254 six-month-old infants. The infants were grouped according to the route of tobacco smoke exposure. The urinary cotinine/creatinine ratios were determined. Forty-nine percent (124/254) of mothers were smokers. Urinary cotinine levels in infants of smoking mothers were statistically significantly higher than levels in infants of non-smoking mothers. The highest mean cotinine/creatinine level was found in the breast-milk-exposed group. Linear regression analysis showed that maternal smoking increased urinary cotinine level by 541 times and breastfeeding increased it by 171 times, whereas early start of formula feeding decreased it by 63 times. Tobacco exposure by breastfeeding may be more harmful than other routes of exposure. Mothers should be encouraged to stop smoking during the breastfeeding period even if they avoid exposing their infants to passive tobacco smoke.

Country of Publication: Turkey

CAS Registry Number: 0 (Tobacco Smoke Pollution); 486-56-6 (Cotinine)

Publication Type: Journal Article

Subject Headings: [*Breast Feeding](#)
[*Cotinine/ur \[Urine\]](#)
[Cross-Sectional Studies](#)
[Female](#)
[Humans](#)
[Infant](#)
[Linear Models](#)
[Male](#)
[Tobacco Smoke Pollution/an \[Analysis\]](#)
[*Tobacco Smoke Pollution/sn \[Statistics & Numerical Data\]](#)

Source: MEDLINE

155. FADS1 FADS2 gene variants modify the association between fish intake and the docosahexaenoic acid proportions in human milk.

Citation: American Journal of Clinical Nutrition, 01 May 2010, vol./is. 91/5(1368-1376), 00029165

Author(s): Moltó-Puigmartí C; Plat J; Mensink RP; Müller A; Jansen E; Zeegers MP; Thijs C

Language: English

Abstract: BACKGROUND: The genes encoding Delta(5)- and Delta(6)-desaturases (FADS1 FADS2 gene cluster) were reported to be associated with n-3 (omega-3) and n-6 (omega-6) fatty acid proportions in human plasma, tissues, and milk. Docosahexaenoic acid (DHA) can be supplied especially by dietary fish or fish oil and synthesized from alpha-linolenic acid through a pathway involving these desaturases. OBJECTIVE: We evaluated whether FADS gene variants modify the effect of maternal fish and fish-oil intake on plasma and milk DHA proportions. DESIGN: FADS1 rs174561, FADS2 rs174575, and intergenic rs3834458 single nucleotide polymorphisms were genotyped in 309 women from the KOALA Birth Cohort Study in The Netherlands. Plasma was collected at 36 wk of pregnancy, and milk was collected at 1 mo postpartum. Fish and fish-oil intake was assessed by using a food-frequency questionnaire at 34 wk of pregnancy and updated for the week of milk collection. Gene-diet interactions were tested by linear regression analysis. RESULTS: DHA proportions were lower in women homozygous for the minor allele than in women who were homozygous for the major allele (DHA proportions in plasma phospholipids: $P < 0.01$; DHA proportions in milk: $P < 0.05$). Fish intake ranged from 0 to 2.5 portions of fatty fish/wk, and 12 women took

fish-oil supplements during pregnancy. DHA proportions in plasma phospholipids increased with increasing fish and fish-oil intake, irrespective of the genotype. DHA proportions in milk increased only with fish and fish-oil intake in the major-allele carriers. CONCLUSION: Lower proportions of DHA in milk from women who were homozygous for the minor allele could not be compensated for by increasing fish and fish-oil intake, possibly because of limited incorporation into milk. Copyright © 2010 American Society for Nutrition

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Diet](#)
[Docosahexaenoic Acids](#)
[Fish](#)
[Fish Oils](#)
[Milk, Human](#)
[Polymorphism, Genetic](#)
[Adult](#)
[Alleles](#)
[Analysis of Variance](#)
[Chi Square Test](#)
[Data Analysis Software](#)
[Dietary Supplementation](#)
[Female](#)
[Fetus](#)
[Funding Source](#)
[Genotype](#)
[Human](#)
[Infant, Newborn](#)
[Linear Regression](#)
[Milk, Human](#)
[Netherlands](#)
[Nutrigenomics](#)
[Nutritional Assessment](#)
[Pearson's Correlation Coefficient](#)
[Phospholipids](#)
[Pregnancy](#)
[Prospective Studies](#)
[Questionnaires](#)
[Self Report](#)
[T-Tests](#)
[Women's Health](#)

Source: CINAHL

156. Breastfeeding duration and posterior crossbite... Kobayashi HM, Scavone H Jr., Ferreira RI et al. Relationship between breastfeeding duration and prevalence of posterior crossbite in the deciduous dentition. *Am J Orthod Dentofacial Orthop* 137:54-58, 2010.

Citation: Dental Abstracts, 01 May 2010, vol./is. 55/3(155-155), 00118486

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Malocclusion](#)
[Time Factors](#)
[Infant](#)
[Maxillofacial Development](#)

Source: CINAHL

157. Letters to the editor... "MRSA as a cause of postpartum breast abscess in infant and mother," (JHL, November 2009).

Citation:	Journal of Human Lactation, 01 May 2010, vol./is. 26/2(105-106), 08903344
Author(s):	Deacon J; Rowan M; Keil AD; Hale TW; Montalto M; Lui B
Language:	English
Publication Type:	journal article
Subject Headings:	Abscess Breast Feeding Breast Mastitis Methicillin Resistance Staphylococcal Infections Bacterial Colonization Cross Infection Disease Transmission, Vertical Infant, Newborn Rifampin Rifampin Staphylococcal Infections
Source:	CINAHL

158. ILCA's inside track: a resource for breastfeeding mothers. Only a few babies have problems with foods their mothers eat.

Citation:	Journal of Human Lactation, 01 May 2010, vol./is. 26/2(199-200), 08903344
Author(s):	Kombol P; Steele TP
Language:	English
Publication Type:	journal article
Subject Headings:	Breast Feeding Food Hypersensitivity Food Intake Mothers Infant, Newborn
Source:	CINAHL

159. Research spotlight.

Citation:	Journal of Human Lactation, 01 May 2010, vol./is. 26/2(206-207), 08903344
Author(s):	Chapman DJ
Language:	English
Publication Type:	journal article
Subject Headings:	Breast Feeding Energy Metabolism Infant, Premature Body Weight Bottle Feeding Descriptive Statistics Gestational Age Human Infant, Newborn Intensive Care Units, Neonatal Israel Milk, Human

Nonprobability Sample
 Paired T-Tests
 Regression
 Time Factors

Source: CINAHL

160. First- and second-trimester WIC participation is associated with lower rates of breastfeeding and early introduction of cow's milk during infancy.

Citation: Journal of the American Dietetic Association, 01 May 2010, vol./is. 110/5(702-709), 00028223

Author(s): Ziol-Guest KM; Hernandez DC

Language: English

Publication Type: journal article

Subject Headings: Breast Feeding
 Breast Feeding
 Nutrition Education
 Infant Care
 Milk
 Milk
 Mothers
 Public Assistance
 Adult
 Animals
 Cross Sectional Studies
 Educational Status
 Female
 Human
 Infant
 Infant Formula
 Infant Nutritional Physiology
 Infant, Newborn
 Logistic Regression
 Male
 Mothers
 Multivariate Analysis
 Poverty
 Pregnancy
 Pregnancy Trimester, First
 Pregnancy Trimester, Second
 Time Factors
 Young Adult

Source: CINAHL

161. Significant weight loss in breastfed term infants readmitted for hyperbilirubinemia.

Citation: Neonatal Intensive Care, 01 May 2010, vol./is. 23/3(48-51), 10622454

Author(s): Salas AA; Salazar J; Burgoa CV; De-Villegas CA; Quevedo V; Soliz A

Language: English

Abstract: Background Weight loss of greater than 7% from birth weight indicates possible feeding problems. Inadequate oral intake causes weight loss and increases the bilirubin enterohepatic circulation. The objective of this study was to describe the association between total serum bilirubin (TSB) levels and weight loss in healthy term infants readmitted for hyperbilirubinemia after birth hospitalization. Methods We reviewed medical records of breastfed term infants who received phototherapy according to TSB levels readmitted to Caja Petrolera de Salud Clinic in La Paz, Bolivia during January 2005 through October 2008. Results Seventy-nine infants were studied (64.6% were

males). The hyperbilirubinemia readmission rate was 5% among breastfed infants. Term infants were readmitted at a median age of 4 days. Mean TSB level was 18.6 ± 3 mg/dL. Thirty (38%) had significant weight loss. A weak correlation between TSB levels and percent of weight loss was identified ($r = 0.20$; $p < 0.05$). The frequency of severe hyperbilirubinemia (> 20 mg/dL) was notably higher among infants with significant weight loss (46.7% vs. 18.4%; $p < 0.05$). The risk of having severe hyperbilirubinemia was approximately 4 times greater for infants with significant weight loss (OR: 3.9; 95% CI: 1.4-10.8; $p < 0.05$). Conclusions Significant weight loss could be a useful parameter to identify breastfed term infants at risk of severe hyperbilirubinemia either during birth hospitalization or outpatient follow-up visits in settings where routine pre-discharge TSB levels have not been implemented yet.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Hyperbilirubinemia](#)
[Weight Loss](#)
[Bilirubin](#)
[Birth Weight](#)
[Bolivia](#)
[Confidence Intervals](#)
[Correlation Coefficient](#)
[Data Analysis Software](#)
[Descriptive Statistics](#)
[Human](#)
[Hyperbilirubinemia](#)
[Infant, Newborn](#)
[Inpatients](#)
[Medical Records](#)
[Odds Ratio](#)
[Pearson's Correlation Coefficient](#)
[Phototherapy](#)
[Readmission](#)
[Record Review](#)
[Retrospective Design](#)
[Severity of Illness](#)
[T-Tests](#)

Source: CINAHL

162. A prospective study of the effect of delivery type on neonatal weight gain pattern in exclusively breastfed neonates.

Citation: Neonatal Intensive Care, 01 May 2010, vol./is. 23/3(52-54), 10622454

Author(s): Saki A; Eshraghian MR; Mohammad K; Foroushani AR; Bordbar MR

Language: English

Abstract: BACKGROUND: In this exploratory study, the contribution of delivery type to the weight gain pattern for full-term infants with exclusive breastfeeding in the first month of infancy was determined. In addition, breastfeeding success among cesarean section (C-section) delivery mothers based on their neonate's weight gain at the end of the first month of infancy was evaluated. METHODS: A cohort of 92 neonates born in Shiraz, from July 10 to August 10, 2007 was followed longitudinally. The data were collected during the first month postpartum at three occasions: 3 to 7 days postpartum, 10-21 days postpartum and 24-31 days postpartum. RESULTS: Among 92 mothers in this study, 35 (38%) were delivered by C-section. Generalized estimating equation (GEE) showed that delivery type ($p < 0.01$), receipt of advice about breastfeeding ($p = 0.03$) and neonate's age ($p < 0.01$) significantly affected weight gain. GEE estimated the values of the parameters under study and the testing contribution of each factor to weight gain, leading to the conclusion that gender, parities and maternal education did not contribute to weight gain. The neonate's weight gain pattern for C-section deliveries lies below that of normal vaginal deliveries until 25 days postpartum, when weight gain for C-section deliveries

became higher than that for normal vaginal deliveries. CONCLUSIONS: Type of delivery contributes strongly to the weight gain pattern in the first month of infancy. In spite of greater weight loss among C-section birth neonates in the first days of life, at the end of the first month neonates showed a similar weight gain. Consequently, mothers with C-section delivery can successfully exclusively breastfeed.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Childbirth](#)
[Weight Gain](#)
[Body Weights and Measures](#)
[Cesarean Section](#)
[Demography](#)
[Descriptive Statistics](#)
[Exploratory Research](#)
[Female](#)
[Human](#)
[Infant](#)
[Infant, Newborn](#)
[Interrater Reliability](#)
[Male](#)
[Prospective Studies](#)
[Questionnaires](#)
[Time Factors](#)
[Vaginal Birth](#)

Source: CINAHL

163. The burden of suboptimal breastfeeding in the United States: a pediatric cost analysis.

Citation: Pediatrics, 01 May 2010, vol./is. 125/5(0-), 00314005

Author(s): Bartick M; Reinhold A

Language: English

Abstract: BACKGROUND AND OBJECTIVE: A 2001 study revealed that \$3.6 billion could be saved if breastfeeding rates were increased to levels of the Healthy People objectives. It studied 3 diseases and totaled direct and indirect costs and cost of premature death. The 2001 study can be updated by using current breastfeeding rates and adding additional diseases analyzed in the 2007 breastfeeding report from the Agency for Healthcare Research and Quality. STUDY DESIGN: Using methods similar to those in the 2001 study, we computed current costs and compared them to the projected costs if 80% and 90% of US families could comply with the recommendation to exclusively breastfeed for 6 months. Excluding type 2 diabetes (because of insufficient data), we conducted a cost analysis for all pediatric diseases for which the Agency for Healthcare Research and Quality reported risk ratios that favored breastfeeding: necrotizing enterocolitis, otitis media, gastroenteritis, hospitalization for lower respiratory tract infections, atopic dermatitis, sudden infant death syndrome, childhood asthma, childhood leukemia, type 1 diabetes mellitus, and childhood obesity. We used 2005 Centers for Disease Control and Prevention breastfeeding rates and 2007 dollars. RESULTS: If 90% of US families could comply with medical recommendations to breastfeed exclusively for 6 months, the United States would save \$13 billion per year and prevent an excess 911 deaths, nearly all of which would be in infants (\$10.5 billion and 741 deaths at 80% compliance). CONCLUSIONS: Current US breastfeeding rates are suboptimal and result in significant excess costs and preventable infant deaths. Investment in strategies to promote longer breastfeeding duration and exclusivity may be cost-effective.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Disease](#)
[Economic Aspects of Illness](#)
[Health Care Costs](#)

[Child](#)
[Costs and Cost Analysis](#)
[Dermatitis, Atopic](#)
[Diabetes Mellitus](#)
[Enterocolitis, Necrotizing](#)
[Gastroenteritis](#)
[Health Initiative 2000](#)
[Human](#)
[Infant](#)
[Obesity](#)
[Otitis Media](#)
[Respiratory Tract Infections](#)
[Sudden Infant Death](#)
[United States](#)

Source: CINAHL

164. Breastfeeding and prolactin levels in lactating women with a family history of alcoholism.

Citation: Pediatrics, 01 May 2010, vol./is. 125/5(0-), 00314005

Author(s): Mennella JA; Pepino MY

Language: English

Abstract: **OBJECTIVE:** Many motivated new mothers fail to reach public health goals for breastfeeding, highlighting the need to identify risk factors. Because having a family history of alcoholism is associated with blunted prolactin responses to an alcohol challenge in nonlactating individuals, this study aimed to identify associations in family history of alcoholism, prolactin, and breastfeeding behaviors in lactating women. **METHODS:** This was a 2-day experimental study that used within-subject alcohol or control beverage consumption and between-subject family history of alcoholism factors. The participants were non-alcohol-dependent lactating women; 7 were family history-positive (FHP) for alcohol dependence, and 21 were family history-negative (FHN). Consumption of 0.4 g/kg alcohol or nonalcoholic beverage occurred in separate randomized sessions, followed by use of a breast pump. Basal and suckling-induced prolactin, blood alcohol concentrations, milk yield, self-reported drug effects, neophobia, and breastfeeding patterning were measured. **RESULTS:** Although no group differences in alcohol pharmacokinetics were detected, FHP women exhibited blunted prolactin to breast stimulation after drinking the control and alcohol beverage and felt more of the stimulant-like effects of alcohol than did FHN women. FHP women reported more frequent daily breastfeeding than did FHN women. **CONCLUSIONS:** This is the first evidence that family history of alcoholism is associated with a blunted magnitude, rapidity, and duration of the prolactin response to breast stimulation and an alcohol challenge in lactating women. More frequent breastfeeding by FHP women suggests behavioral compensation for perceived and/or actual poor lactation. Alcohol did not enhance lactational performance, further disputing the lore that alcohol is a galactagogue.

Publication Type: journal article

Subject Headings:
[Alcoholism](#)
[Breast Feeding](#)
[Family History](#)
[Lactation](#)
[Prolactin](#)
[Adult](#)
[Alcoholic Beverages](#)
[Analysis of Variance](#)
[Chi Square Test](#)
[Clinical Trials](#)
[Data Analysis Software](#)
[Ethanol](#)
[Female](#)
[Human](#)

Pennsylvania
Prolactin
Random Assignment

Source: CINAHL

165. Factors associated to breastfeeding cessation before 6 months [Portuguese].

Citation: Revista Latino-Americana de Enfermagem (RLAE), 01 May 2010, vol./is. 18/3(373-380), 01041169

Author(s): Roig AO; Martínez MR; Garcia JC; Hoyos SP; Navidad GL; Álvarez JCF; del Mar Calatayud Pujalte M; de León González RG

Language: English

Abstract: This research aimed to identify the determinants of full breastfeeding (FBF) and any breastfeeding (ABF) cessation before 6 months, through a six-month follow-up of 248 mothers going a postpartum visit. Data were collected by personal interview during the first month and telephone interviews at four and six months postpartum. Cox's proportional hazards model was used. Not having previous ABF experience, previous ABF duration ≤ 4 months and worse evaluation of previous experience were associated with cessation of ABF and FBF. Lower educational level was associated with cessation of ABF and the use of pacifiers or occasional breast-milk substitutes with cessation of FBF. Attending childbirth education was a protective factor against early FBF or ABF cessation. Activities supporting breastfeeding should be intensified for mothers with poorer access to information and with negative or without ABF previous experience. The use of pacifiers and not-medically indicated breast milk substitutes should be controlled.

Publication Type: journal article

Subject Headings: Breast Feeding
Mothers
Postnatal Care
Weaning
Adult
Apgar Score
Birth Weight
Bottle Feeding
Breast Feeding Promotion
Chi Square Test
Clinical Assessment Tools
Confidence Intervals
Cox Proportional Hazards Model
Data Analysis Software
Descriptive Statistics
Educational Status
Family
Female
Human
Infant
Infant Formula
Infant, Newborn
Inpatients
Interviews
Kaplan-Meier Estimator
Marital Status
Maternal Attitudes
Midwives
Outpatients
Pacifiers
Patient Education
Postnatal Period

Prospective Studies
Regression
Social Class
Spain
T-Tests

Source: CINAHL

166. Filial virtue: around the neighborhood.

Citation: Tzu Chi Nursing Journal, 01 May 2010, vol./is. 4/(83-85), 16831624

Author(s): Fu H

Language: English

Publication Type: journal article

Subject Headings: Breast Feeding
Communities
Nursing Care
Preventive Health Care
Delivery
Home Health Care

Source: CINAHL

167. Perpetuating "scientific motherhood": infant feeding discourse in parents magazine, 1930--2007.

Citation: Women & Health, 01 May 2010, vol./is. 50/3(297-311), 03630242

Author(s): Foss KA

Language: English

Abstract: Although breastfeeding initiation rates have recently been at an all-time high, duration continues to be considerably low. Given the health benefits associated with extended breastfeeding, this discrepancy is cause for concern. This research examined the messages conveyed about infant feeding in a popular parenting magazine, Parents magazine, from 1930 through 2007. Findings indicated that the messages about infant feeding shifted in accordance with changing ideologies about the means of infant feeding-from bottle-feeding to breastfeeding. However, even with changing attitudes toward infant feeding, writers used scientific evidence and the advice of "experts" to justify the dominant form of feeding. The absence of practical advice regarding breastfeeding challenges, especially from "real" women set up false expectations about the breastfeeding experience, painting it as "natural" and best for the baby. The dependency on experts and lack of practical advice in popular media, like Parents magazine, may help explain a societal trend that downplays breastfeeding obstacles, giving insight into the vast discrepancy between breastfeeding initiation and duration.

Publication Type: journal article

Subject Headings: Attitude to Breast Feeding
Breast Feeding
Mothers
Parenting
Serial Publications
Breast Feeding
Breast Feeding
Exploratory Research
Female
Healthy People 2010
Human
Qualitative Studies
Sample Size

Source: CINAHL

168. Health Reform Helps Nursing Mothers, Employees Bracing for Future Nursing Needs.

Citation: HRMagazine, 01 May 2010, vol./is. 55/5(27-27), 10473149

Author(s): Zeidner, Rita

Language: English

Abstract: The article discusses the impact of the health care reform signed into law by U.S. President Barack Obama on nursing mothers who are employed in the U.S. Employers are required to provide a private nursing place for mothers other than a bathroom for up to a year after her child was born. This benefit for mothers who are breast-feeding offers job security and tenure. There are 24 states with laws that protect working mothers including Arkansas, California, New Mexico, and Wyoming.

Publication Type: Periodical

Subject Headings: [HEALTH care reform -- United States](#)
[OBAMA, Barack](#)
[PRIVATE duty nursing](#)
[BREASTFEEDING](#)
[EMPLOYERS](#)
[UNITED States](#)

Source: HEALTH BUSINESS ELITE

169. TIP OF THE WEEK.

Citation: Pulse, 14 April 2010, vol./is. 70/12(9-), 00486000

Language: English

Abstract: The article reports on a study which discovered that there is no risk to infants breast-feeding from mothers receiving routine short-course treatment with metronidazole by any route.

Publication Type: Periodical

Subject Headings: [MOTHER & infant](#)
[BREASTFEEDING](#)

Source: HEALTH BUSINESS ELITE

170. Getting Pumped.

Citation: Time, 05 April 2010, vol./is. 175/13(49-49), 0040781X

Author(s): Sharick, Catherine

Language: English

Abstract: The article discusses preferences among mothers regarding breastfeeding techniques. It discusses mother Crystal Byrd who engaged in breastfeeding of her first child, but opted to pump her breast milk and bottle-feed it to her second child. The feeding system is termed exclusively pumping (EP). Reasons that mothers prefer EP are noted as are warnings from doctors regarding insufficient milk production and mother-baby bonding issues associated with EP.

Publication Type: Periodical

Subject Headings: [BREASTFEEDING -- Research](#)
[BREAST milk -- Collection & preservation](#)
[MOTHER & infant -- Health](#)
[MOTHER & child -- Health](#)
[MOTHERS -- Attitudes](#)

Source: HEALTH BUSINESS ELITE

171. Getting pumped. Why some moms prefer to pump their milk and bottle-feed instead of putting baby to breast.

Citation: Time, 05 April 2010, vol./is. 175/13(49-49), 0040781X

Language: English

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Milk, Human](#)
[Mothers](#)
[Suction](#)
[Consumer Satisfaction](#)
[Female](#)
[Human](#)
[United States](#)

Source: CINAHL

172. Predictors of sub-clinical enterovirus infections in infants: a prospective cohort study.

Citation: International Journal of Epidemiology, April 2010, vol./is. 39/2(459-68), 0300-5771;1464-3685 (2010 Apr)

Author(s): Witso E; Cinek O; Aldrin M; Grinde B; Rasmussen T; Wetlesen T; Ronningen KS

Institution: Department of Genes and Environment, Division of Epidemiology, Norwegian Institute of Public Health, Oslo, Norway. elwi@novonordisk.com

Language: English

Abstract: BACKGROUND: Enterovirus infections are common, although most often sub-clinical. The present purpose was to assess the impact of breastfeeding and other factors on enterovirus infections in infancy. METHODS: A prospective observational study was carried out on a population-based cohort of 639 Norwegian infants aged 3-12 months. The outcome was enterovirus RNA measured in monthly stool samples. Data on underlying determinants, such as dietary feeding and household factors, were reported in parental questionnaires. Multivariable logistic regression was performed to allow for common confounders. Statistical analyses were performed by GLLAMM using Stata 9.2, which corrects for subject-specific random effects. RESULTS: The prevalence of enterovirus in stools was 11.1% (475/4279). Risk of enterovirus infection decreased with increasing number of daily breastfeeds; the effect was most pronounced at the age of 3 months [odds ratio (OR), 0.85; 95% confidence interval (CI) 0.8-0.9, $P < 0.001$], gradually declining thereafter, reaching no effect at 11 months. Increased risk was associated with having one or more sibling(s) (OR 1.89; 95% CI 1.2-3.0), particularly if they attended daycare (OR 2.46; 95% CI 1.4-4.2), and with increasing exposure to other children (OR 1.04; 95% CI 1.0-1.1). There was a tendency towards higher prevalence of infection when a household's drinking water came from a well, and a protective effect of owning a dog or cat. CONCLUSIONS: Several factors may modify the risk for enterovirus infections in the first year of life. This study supports the protective effect of breastfeeding. The protection decreased with age and increased with dose of ingested milk.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Age Factors](#)
[Animals](#)
[Animals, Domestic](#)
[*Breast Feeding](#)
[Cats](#)
[Dogs](#)
[Enterovirus/ip \[Isolation & Purification\]](#)
[*Enterovirus Infections/ep \[Epidemiology\]](#)
[Enterovirus Infections/pc \[Prevention & Control\]](#)
[Feces/vi \[Virology\]](#)
[Humans](#)

[Infant](#)
[Norway/ep \[Epidemiology\]](#)
[Nucleic Acid Amplification Techniques](#)
[Odds Ratio](#)
[Prevalence](#)
[Prospective Studies](#)
[Risk Factors](#)
[Siblings](#)
[Water Supply](#)

Source: MEDLINE

173. Cohort profile: mamananengane or the Africa centre vertical transmission study.

Citation: International Journal of Epidemiology, April 2010, vol./is. 39/2(351-60), 0300-5771;1464-3685 (2010 Apr)
Author(s): Bland R; Coovadia H; Coutoudis A; Rollins N; Newell M
Institution: Africa Centre for Health and Population Studies, University of KwaZulu-Natal, Somkhele, South Africa. rbland@africacentre.ac.za
Language: English
Country of Publication: England
Publication Type: Journal Article; Multicenter Study; Research Support, Non-U.S. Gov't
Subject Headings:

[Adolescent](#)
[Adult](#)
[Africa/ep \[Epidemiology\]](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[Child, Preschool](#)
[Cohort Studies](#)
[Developing Countries](#)
[Female](#)
[*HIV Infections/ep \[Epidemiology\]](#)
[HIV Infections/pc \[Prevention & Control\]](#)
[*HIV Infections/tm \[Transmission\]](#)
[Humans](#)
[Incidence](#)
[Infant](#)
[*Infant Formula](#)
[Infant, Newborn](#)
[Infectious Disease Transmission, Vertical/pc \[Prevention & Control\]](#)
[*Infectious Disease Transmission, Vertical/sn \[Statistics & Numerical Data\]](#)
[Kaplan-Meiers Estimate](#)
[Pregnancy](#)
[South Africa/ep \[Epidemiology\]](#)
[Young Adult](#)

Source: MEDLINE

174. Economic evaluation of enhanced staff contact for the promotion of breastfeeding for low birth weight infants.

Citation: International Journal of Technology Assessment in Health Care, April 2010, vol./is. 26/2(133-40), 0266-4623;1471-6348 (2010 Apr)
Author(s): Rice SJ; Craig D; McCormick F; Renfrew MJ; Williams AF
Institution: Centre for Reviews and Dissemination, University of York, Heslington, York, United Kingdom. sjcr1@york.ac.uk
Language: English
Abstract: OBJECTIVES: There is evidence that breastmilk feeding reduces mortality and short and long-term morbidity among infants born too soon or too small. The aim of this study was

to evaluate the cost-effectiveness of enhanced staff contact for mothers with infants in a neonatal unit with a birth weight of 500-2,500 g from the perspective of the UK National Health Service. **METHODS:** A decision-tree model linked clinical outcomes with long-term health outcomes. The study population was divided into three weight bands: 500-999 g, 1000-1,749 g, and 1,750-2,500 g. Clinical and resource use data were obtained from literature reviews. The measure of benefit was quality-adjusted life-years. Uncertainty was evaluated using cost-effectiveness acceptability curves and sensitivity analyses. **RESULTS:** The intervention was less costly and more effective than the comparator in the base-case analysis for each birth weight group. The results were quite robust to the sensitivity analyses performed. **CONCLUSIONS:** This is the first economic evaluation in this complex field and offers a model to be developed in future research. The results provide preliminary indications that enhanced staff contact may be cost-effective. However, the limited evidence available, and the limited UK data in particular, suggest that further research is required to provide results with confidence.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [*Breast Feeding](#)
[Cost-Benefit Analysis](#)
[Data Collection](#)
[Decision Trees](#)
[England/ep \[Epidemiology\]](#)
[*Health Care Costs](#)
[Humans](#)
[Infant](#)
[Infant Mortality](#)
[*Infant, Low Birth Weight](#)
[Infant, Newborn](#)
[*Medical Staff](#)
[*Professional-Patient Relations](#)
[Quality-Adjusted Life Years](#)
[Review Literature as Topic](#)
[Wales/ep \[Epidemiology\]](#)

Source: MEDLINE

175. Population-based research: breastfeeding multiple birth infants/twin research reviews and news: perceived aging in twins; separation of conjoined twins; school placement legislation/twins in education, fashion and humanitarian events.

Citation: Twin Research & Human Genetics: the Official Journal of the International Society for Twin Studies, April 2010, vol./is. 13/2(217-20), 1832-4274;1832-4274 (2010 Apr)

Author(s): Segal NL

Language: English

Abstract: The health benefits of breastfeeding are well known. However, less is known about the frequency and duration of breastfeeding in twins. A population-based study of maternal factors associated with the early cessation of breastfeeding in preterm and term twins is reviewed. This is followed by research reviews and news concerning aging in twins, conjoined twin separation and school legislation for multiple birth children. Twins and quadruplets who have distinguished themselves in the areas of education, fashion design and humanitarian efforts are highlighted.

Country of Publication: Australia

Publication Type: News

Subject Headings: [*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Female](#)
[Humans](#)
[Infant](#)
[Multiple Birth Offspring/lj \[Legislation & Jurisprudence\]](#)

Pregnancy
 Pregnancy, Multiple/sn [Statistics & Numerical Data]
 Research/lj [Legislation & Jurisprudence]
 *Twins
 Twins, Conjoined

Source: MEDLINE

176. School nurses and teachers: attitudes regarding inclusion of breastfeeding education in school curricula.

Citation: Journal of School Nursing, April 2010, vol./is. 26/2(137-46), 1059-8405;1546-8364 (2010 Apr)

Author(s): Spear HJ

Institution: Graduate Studies in Nursing, Lynchburg, Virginia, USA.

Language: English

Abstract: School nurses and middle and high school teachers (N = 107) participated in a survey that explored their attitudes and behaviors related to the inclusion of breastfeeding content to highlight the scientific and exceptional health advantages of breastfeeding and to promote a breastfeeding culture. Although some participants believed that breastfeeding content should not be part of school curriculum, the vast majority (86.9%) agreed that the benefits of breastfeeding should be taught to high school students; and over half (57.9%) supported teaching about the value of breastfeeding to middle school children. School nurses are well positioned to promote healthy lifestyle behaviors among student populations and play a pivotal and important role in the promotion of a breastfeeding culture and related positive behaviors.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: Adult
 Aged
 *Attitude
 *Breast Feeding
 *Curriculum/sn [Statistics & Numerical Data]
 *Faculty
 Female
 *Health Education/mt [Methods]
 Health Education/sn [Statistics & Numerical Data]
 Health Promotion/mt [Methods]
 Humans
 Male
 Middle Aged
 *School Nursing
 Young Adult

Source: MEDLINE

177. The power of language: a secondary analysis of a qualitative study exploring English midwives' support of mother's baby-feeding practice.

Citation: Midwifery, April 2010, vol./is. 26/2(232-40), 0266-6138;1532-3099 (2010 Apr)

Author(s): Furber CM; Thomson AM

Institution: School of Nursing, Midwifery & Social Work, University of Manchester, University Place, Oxford Road, Manchester M13 9PL, UK. christine.furber@manchester.ac.uk

Language: English

Abstract: OBJECTIVE: to explore the use of language by midwives reporting their experiences of baby-feeding practice. DESIGN: A qualitative approach incorporating a secondary analysis of data previously collected in a study based on grounded theory principles. Data were collected using in-depth interviews. The secondary analysis involved a content

analysis method. SETTING: two maternity services in the north of England. PARTICIPANTS: 30 midwives who worked across all clinical areas. FINDINGS: these midwives' explanations of how they supported women with baby feeding suggest that they used language to direct women towards decisions that the midwives thought best, without prior exploration of the woman's understanding and beliefs of baby feeding. Women were often described as 'girls' and 'ladies' indicating the power differentials in their relationship. The midwives were aware that, at times, the language they used was contradictory to woman-centred maternity care. KEY CONCLUSIONS: language may be used to control childbearing women and direct them to decisions that the midwife wants, rather than enabling the woman to make her own decisions. The terms used by midwives to relate to women, such as 'girls' and 'ladies', may be a strategy used to improve a midwife's perception of her status in maternity care. IMPLICATIONS FOR PRACTICE: language may be used to undermine women. It is important that the language used when interacting with women is considered carefully in order to facilitate an unbiased perspective and to promote partnership. The word 'women', rather than 'girls' or 'ladies', should be used when referring to users of the maternity services. Copyright 2008 Elsevier Ltd. All rights reserved.

Country of Publication: Scotland

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Breast Feeding](#)
[Communication](#)
[*Concept Formation](#)
[England](#)
[Female](#)
[Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[Infant Care/mt \[Methods\]](#)
[Infant, Newborn](#)
[*Midwifery/mt \[Methods\]](#)
[*Mother-Child Relations](#)
[*Nurse's Role](#)
[*Patient Education as Topic/mt \[Methods\]](#)
[Questionnaires](#)
[Semantics](#)
[Young Adult](#)

Source: MEDLINE

178. ABM clinical protocol #22: guidelines for management of jaundice in the breastfeeding infant equal to or greater than 35 weeks' gestation.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, April 2010, vol./is. 5/2(87-93), 1556-8253;1556-8342 (2010 Apr)

Author(s): Academy of Breastfeeding Medicine Protocol Committee

Language: English

Country of Publication: United States

Publication Type: Journal Article; Practice Guideline; Research Support, U.S. Gov't, P.H.S.

Subject Headings: [*Breast Feeding](#)
[Evidence-Based Medicine](#)
[Gestational Age](#)
[Humans](#)
[Infant, Newborn](#)
[*Jaundice, Neonatal/th \[Therapy\]](#)
[*Phototherapy](#)
[Societies](#)
[United States](#)

Source: MEDLINE

179. New guidelines for an old problem.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, April 2010, vol./is. 5/2(57-8), 1556-8253;1556-8342 (2010 Apr)

Author(s): Howard CR

Language: English

Country of Publication: United States

Publication Type: Editorial

Subject Headings: [*Breast Feeding](#)
[Evidence-Based Medicine](#)
[Humans](#)
[Infant, Newborn](#)
[*Jaundice, Neonatal/th \[Therapy\]](#)
[*Practice Guidelines as Topic](#)

Source: MEDLINE

180. Exclusive breastfeeding in southern Brazil: prevalence and associated factors.

Citation: Breastfeeding Medicine: The Official Journal of the Academy of Breastfeeding Medicine, April 2010, vol./is. 5/2(79-85), 1556-8253;1556-8342 (2010 Apr)

Author(s): do Nascimento MB; Reis MA; Franco SC; Issler H; Ferraro AA; Grisi SJ

Institution: Department of Medicine, University of the Region of Joinville, Joinville, Santa Catarina, Brazil. beanascimento@infomedica.com.br

Language: English

Abstract: BACKGROUND: Worldwide strategies have been conducted in order to guarantee longer periods of exclusive breastfeeding for most children, especially those from developing countries. The evaluation of infant feeding practices and the identification of weaning risk factors are essential for public health policy planning. METHODS: This cross-sectional study was carried out in Joinville, the biggest city of Santa Catarina State in the southern Brazilian region. The caregivers of children under 1 year of age were systematically selected for interview in previously drawn immunization units during the 2005 National Vaccination Campaign. A structured questionnaire was applied for collection of infant, maternal, and healthcare variables. A 24-hour food recall survey was included in order to evaluate infant feeding practices. Descriptive statistic analysis on breastfeeding prevalence and Poisson regression analysis of risk factors for discontinuing exclusive breastfeeding for infants up to 6 months of age were performed. RESULTS: Caregivers of 1,470 infants were interviewed. The feeding inquiry showed an overall rate of breastfeeding of 72.5% and a frequency of exclusive breastfeeding of 43.7% and 53.9% among infants younger than 6 and 4 months of age, respectively. The findings associated with the interruption of exclusive breastfeeding for infants up to 6 months were: higher infant age ($P < 0.001$), pacifier use ($P < 0.001$), and lower maternal educational level ($P = 0.013$). CONCLUSIONS: In developing countries, specific strategies must be created for the delivery of information about breastfeeding and the effect of pacifier use, especially for less educated women.

Country of Publication: United States

Publication Type: Journal Article

Subject Headings: [Adolescent](#)
[Adult](#)
[Brazil/ep \[Epidemiology\]](#)
[*Breast Feeding/ep \[Epidemiology\]](#)
[Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Cross-Sectional Studies](#)

[Educational Status](#)
[Female](#)
[Health Knowledge, Attitudes, Practice](#)
[Humans](#)
[Infant](#)
[*Infant Nutritional Physiological Phenomena/ph \[Physiology\]](#)
[Infant, Newborn](#)
[Male](#)
[Maternal Age](#)
[Middle Aged](#)
[*Mothers/ed \[Education\]](#)
[*Mothers/px \[Psychology\]](#)
[Pacifiers/ae \[Adverse Effects\]](#)
[Pacifiers/ut \[Utilization\]](#)
[Prevalence](#)
[*Public Health](#)
[Risk Factors](#)
[Weaning](#)
[Young Adult](#)

Source: MEDLINE

181. Depressed mothers and infants are more relaxed during breastfeeding versus bottlefeeding interactions: brief report.

Citation: Infant Behavior & Development, April 2010, vol./is. 33/2(241-4), 0163-6383;1934-8800 (2010 Apr)

Author(s): Field T; Diego M; Hernandez-Reif M; Figueiredo B; Ezell S; Siblalingappa V

Institution: Touch Research Institute, University of Miami Medical School, Miami, FL 33101, United States. tfield@med.miami.edu

Language: English

Abstract: Depressed and non-depressed mothers and their 3-month-old infants were videotaped during breastfeeding and bottlefeeding interactions. The videotapes were subsequently coded for a number of feeding interaction behaviors as well as being rated on the Interaction Rating Scales. No differences were noted between the depressed and non-depressed mothers. Several breastfeeding versus bottlefeeding group effects were observed. The breastfeeding mothers showed less burping and less intrusive behavior during the nipple-in periods as well as during the nipple-out periods. In addition, the breastfeeding mothers and their infants received better ratings on the Interaction Rating Scales. These data suggest that the depressed mothers and their infants not unlike the non-depressed mothers and their infants were benefited by breastfeeding. Copyright 2010 Elsevier Inc. All rights reserved.

Country of Publication: United States

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings:
[Adult](#)
[*Bottle Feeding/px \[Psychology\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[*Depressive Disorder](#)
[Female](#)
[Humans](#)
[Maternal Behavior](#)
[Mother-Child Relations](#)
[*Mothers/px \[Psychology\]](#)
[Relaxation](#)
[*Stress, Psychological](#)
[Time Factors](#)
[Video Recording](#)

Source: MEDLINE

182. Applicability of the Gail model for breast cancer risk assessment in Turkish female population and evaluation of breastfeeding as a risk factor.

Citation: Breast Cancer Research & Treatment, April 2010, vol./is. 120/2(425-6), 0167-6806;1573-7217 (2010 Apr)

Author(s): Newman LA

Institution: University of Michigan, Ann Arbor, MI, USA. lanewman@umich.edu

Language: English

Country of Publication: Netherlands

Publication Type: Comment; Journal Article

Subject Headings: [Age Distribution](#)
[Age Factors](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[*Breast Neoplasms/ep \[Epidemiology\]](#)
[Female](#)
[Humans](#)
[*Models, Statistical](#)
[Risk Factors](#)
[Turkey/ep \[Epidemiology\]](#)

Source: MEDLINE

183. Applicability of the Gail model for breast cancer risk assessment in Turkish female population and evaluation of breastfeeding as a risk factor.

Citation: Breast Cancer Research & Treatment, April 2010, vol./is. 120/2(419-24), 0167-6806;1573-7217 (2010 Apr)

Author(s): Ulusoy C; Kepenekci I; Kose K; Aydintug S; Cam R

Institution: Department of General Surgery, Ankara University School of Medicine, Ankara, Turkey.

Language: English

Abstract: The Gail model is considered the best available means for estimating risk of breast cancer development, but it has not yet been applied systematically and validated in Turkish female population. This study was designed to evaluate the performance of the Gail model for Turkish female population. Additionally duration of breastfeeding was examined as a possible risk factor. Our analysis included 650 patients with invasive breast carcinoma (group 1) and 640 women with negative results who had undergone a screening mammography on visiting a mammary care unit (group 2). Two groups were compared with regard to individual risk factors included in the Gail model and also duration of breastfeeding. The Gail model was used to predict 5-year risk for each woman. Age and first live birth ≥ 30 years were associated with an increased relative risk for breast cancer development. Age at menarche, previous breast biopsy, atypical hyperplasia, and number of first degree relatives with breast cancer were found to be non-significant. The Gail model showed 13.3% sensitivity and 92% specificity in estimating the risk of breast cancer development in Turkish women. Positive predictive value was 63%, negative predictive value was 51.9%, and validity index was 53.1%. Duration of breastfeeding was significantly longer in group 1 than 2 (median 17 vs. 13 months). The proportion of parous women with no breastfed was higher in group 1 than 2. The currently used Gail model does not seem to be an appropriate breast cancer risk assessment tool for Turkish female population.

Country of Publication: Netherlands

Publication Type: Clinical Trial; Journal Article

Subject Headings: [Adult](#)
[Age Factors](#)
[Aged](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)

*Breast Neoplasms/ep [Epidemiology]
 Female
 Humans
 Middle Aged
 *Models, Statistical
 Risk Factors
 Sensitivity and Specificity
 Turkey/ep [Epidemiology]

Source: MEDLINE

184. Breast functions perceived by Korean mothers: infant nutrition and female sexuality.

Citation: Western Journal of Nursing Research, April 2010, vol./is. 32/3(363-78), 0193-9459;1552-8456 (2010 Apr)

Author(s): Ahn Y; Sohn M; Yoo E

Institution: Department of Nursing, College of Medicine, Inha University, Incheon, South Korea.

Language: English

Abstract: The descriptive cross-sectional study of 2,235 Korean postpartum women was conducted to explore (a) feeding types with related factors, (b) the perceived benefits of each feeding type, (c) the perceived sexuality-related barriers to breast-feeding, and (d) the perceived relative significance of breast functions. The most frequently utilized feeding type was breast-feeding only. The gender of infants, vaginal delivery, not being employed, having a nuclear family, previous breast-feeding experience, and previously receiving breast-feeding education were statistically significant factors of breast-feeding. Breast-feeding and mixed feeding mothers indicated that their feeding choices were based on nutritional benefits, convenience, and improving family relationships. Only breast-feeding mothers reported changes in breast shape as a perceived sexuality-related barrier to breast-feeding. All mothers reported that infant feeding was a more significant concern than female sexual functioning, but post hoc Scheffé revealed that the breast-feeding mothers appreciated infant feeding function more than female sexual functioning.

Country of Publication: United States

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: Adult
 *Breast/ph [Physiology]
 *Breast Feeding
 *Child Nutrition Sciences
 Cross-Sectional Studies
 Female
 Humans
 Infant
 *Mothers/px [Psychology]
 Postpartum Period
 Republic of Korea
 *Sexuality

Source: MEDLINE

185. Early postpartum discharge and breastfeeding: an observational study from France.

Citation: Pediatrics International, April 2010, vol./is. 52/2(180-6), 1442-200X (2010 Apr)

Author(s): Cambonie G; Rey V; Sabarros S; Baum TP; Fournier-Favre S; Mazurier E; Boulot P; Picaud JC

Institution: Neonatology Department, University Hospital of Montpellier, F-34000 France. g-cambonie@chu-montpellier.fr

Language: English

Abstract: BACKGROUND: Early postpartum discharge is a recent practice in France, but the influence of a shortened hospital stay on subsequent breastfeeding is unknown. The objective of the present study was to compare the breastfeeding mode after early discharge (ED) and conventional discharge (CD) from a hospital maternity unit. METHODS: An observational study was conducted in a French university hospital among 135 breastfeeding mothers, who delivered between 1 January and 31 July 2006. Forty-five ED mothers were matched with 90 CD mothers on 13 criteria. A structured questionnaire was used to collect data regarding feeding practices at 10 weeks postpartum, the period corresponding to paid maternity leave. RESULTS: Exclusive breast-, mixed, and bottle feedings were reported by, respectively, 35 (77.8%), three (6.7%) and seven (15.5%) ED mothers and 64 (71.1%), 12 (13.3%) and 14 (15.6%) CD mothers (no significant differences). Satisfaction with support for breastfeeding and reasons for switching to mixed or bottle feeding were comparable in the two groups. Multivariate analysis indicated that only the planned duration of breastfeeding and the mother's dissatisfaction with help significantly influenced breastfeeding prevalence. CONCLUSIONS: Early postpartum hospital discharge organized by skilled professionals is compatible with a satisfactory rate of exclusive breastfeeding up to the return to work. Formalized programs of instruction for perinatal professionals would help to reduce early abandonment.

Country of Publication: Australia

Publication Type: Journal Article

Subject Headings: [Adult](#)
[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Female](#)
[France](#)
[Humans](#)
[*Length of Stay/sn \[Statistics & Numerical Data\]](#)
[*Patient Discharge/sn \[Statistics & Numerical Data\]](#)
[*Postpartum Period](#)
[Time Factors](#)

Source: MEDLINE

186. Seeing other women breastfeed: how vicarious experience relates to breastfeeding intention and behaviour.

Citation: Maternal & Child Nutrition, April 2010, vol./is. 6/2(134-46), 1740-8695;1740-8709 (2010 Apr)

Author(s): Hoddinott P; Kroll T; Raja A; Lee AJ

Institution: Public Health Nutrition Research Group, University of Aberdeen, Aberdeen, UK. p.hoddinott@abdn.ac.uk

Language: English

Abstract: Vicarious experience gained through seeing women breastfeed may influence infant feeding decisions and self-efficacy. Our aim was to measure the attributes of seeing breastfeeding and to investigate how these relate to feeding intention (primary outcome) and behaviour (secondary outcome). First, we developed a Seeing Breastfeeding Scale (SBS), which consisted of five attitudes (Cronbach's alpha of 0.86) to most recently observed breastfeeding: 'I felt embarrassed'; 'I felt uncomfortable'; 'I did not know where to look'; and 'It was lovely' and 'It didn't bother me'. Test-retest reliability showed agreement (with one exception, kappas ranged from 0.36 to 0.71). Second, we conducted a longitudinal survey of 418 consecutive pregnant women in rural Scotland. We selected the 259 women who had never breastfed before for further analysis. Following multiple adjustments, women who agreed that 'It was lovely to see her breastfeed' were more than six times more likely to intend to breastfeed compared with women who disagreed with the statement [odds ratio (OR) 6.72, 95% confidence interval (CI) 2.85-15.82]. Women who completed their full-time education aged 17 (OR 3.09, 95% CI 1.41-6.77) or aged 19 (OR 7.41 95% CI 2.51-21.94) were more likely to initiate breastfeeding. Women who reported seeing breastfeeding within the preceding 12 months were significantly more likely to agree with the statement 'It was lovely to see her breastfeed' (P = 0.02). Positive

attitudes to recently seen breastfeeding are more important determinants of feeding intention than age of first seeing breastfeeding, the relationship to the person seen and seeing breastfeeding in the media.

Country of Publication: England

Publication Type: Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[*Attitude](#)
[Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding/px \[Psychology\]](#)
[Educational Status](#)
[Female](#)
[Humans](#)
[Infant, Newborn](#)
[Intention](#)
[Male](#)
[Maternal Age](#)
[*Maternal Behavior/px \[Psychology\]](#)
[*Mothers/px \[Psychology\]](#)
[Scotland](#)
[*Self Efficacy](#)
[Young Adult](#)

Source: MEDLINE

187. Risk factors for early lactation problems among Peruvian primiparous mothers.

Citation: Maternal & Child Nutrition, April 2010, vol./is. 6/2(120-33), 1740-8695;1740-8709 (2010 Apr)

Author(s): Matias SL; Nommsen-Rivers LA; Creed-Kanashiro H; Dewey KG

Institution: Department of Public Health Sciences, University of California, Davis, California 95616, USA. slmatias@ucdavis.edu

Language: English

Abstract: The aim of this study was to determine the incidence and risk factors for early lactation problems [suboptimal infant breastfeeding behaviour (SIBB), delayed onset of lactogenesis (OL) and excessive neonatal weight loss] among mother-infant pairs in Lima, Peru. All primiparous mothers who gave birth to a healthy, single, term infant at a government hospital in a peri-urban area of Lima during the 8-month recruitment period were invited to participate in the study. Data were collected at the hospital (day 0) and during a home visit (day 3). Infant breastfeeding behaviour was evaluated using the Infant Breastfeeding Assessment Tool; SIBB was defined as ≤ 10 score. OL was determined by maternal report of breast fullness changes; delayed OL was defined as perceived after 72 h. Excessive neonatal weight loss was defined as $\geq 10\%$ of birthweight by day 3. One hundred seventy-one mother-infant pairs participated in the study. SIBB prevalence was 52% on day 0 and 21% on day 3; it was associated with male infant gender (day 0), < 8 breastfeeds during the first 24 h (days 0 and 3), and gestational age < 39 weeks (day 3). Delayed OL incidence was 17% and was associated with infant Apgar score < 8 . Excessive neonatal weight loss occurred in 10% of neonates and was associated with maternal overweight and Caesarean-section delivery. Early lactation problems may be influenced by modifiable factors such as delivery mode and breastfeeding frequency. Infant status at birth and maternal characteristics could indicate when breastfeeding dyads need extra support.

Country of Publication: England

Publication Type: Journal Article; Research Support, N.I.H., Extramural; Research Support, Non-U.S. Gov't

Subject Headings: [Apgar Score](#)
[*Birth Weight/ph \[Physiology\]](#)
[Breast Feeding/ep \[Epidemiology\]](#)
[Breast Feeding/px \[Psychology\]](#)

[*Breast Feeding/sn \[Statistics & Numerical Data\]](#)
[Cesarean Section/ae \[Adverse Effects\]](#)
[Female](#)
[Gestational Age](#)
[Humans](#)
[Incidence](#)
[*Infant Behavior/ph \[Physiology\]](#)
[Infant, Newborn/gd \[Growth & Development\]](#)
[*Infant, Newborn/ph \[Physiology\]](#)
[*Lactation Disorders/ep \[Epidemiology\]](#)
[Lactation Disorders/et \[Etiology\]](#)
[Lactation Disorders/px \[Psychology\]](#)
[Male](#)
[Parity/ph \[Physiology\]](#)
[Peru](#)
[Pregnancy](#)
[Risk Factors](#)
[Sex Factors](#)
[Social Support](#)
[Sucking Behavior/ph \[Physiology\]](#)
[Time Factors](#)
[Weight Loss/ph \[Physiology\]](#)
[Young Adult](#)

Source: MEDLINE

188. Breastfeeding and complementary feeding as a public health intervention for child survival in India.

Citation: Indian Journal of Pediatrics, April 2010, vol./is. 77/4(413-8), 0019-5456;0973-7693 (2010 Apr)

Author(s): Gupta A; Dadhich JP; Faridi MM

Institution: International Baby Food Action Network-Asia, New Delhi, India. arun.ibfan@gmail.com

Language: English

Abstract: The relevance of breastfeeding and complementary feeding as proven child survival interventions, is well documented by the scientific research. These two preventive interventions can save as many as 19% of all child deaths. However, despite the volume of evidence favouring mainstreaming of these interventions, many countries, including India are yet to achieve universal appropriate infant and young child feeding practices. This article attempts to explore the evidenced based role of these interventions in the crusade to save children, and looks into the present scenario of infant and young child feeding in India, along with a possible road map to achieve high rates of early and exclusive breastfeeding and appropriate complementary feeding in the country.

Country of Publication: India

Publication Type: Journal Article

Subject Headings:
[*Breast Feeding](#)
[Child Nutrition Disorders/pc \[Prevention & Control\]](#)
[Child, Preschool](#)
[*Health Promotion](#)
[Humans](#)
[India](#)
[Infant](#)
[Infant Formula](#)
[Infant Mortality](#)
[*Infant Nutritional Physiological Phenomena](#)
[Infant, Newborn](#)
[*Nutrition Policy](#)

Source: MEDLINE

189. Understanding the cultural context of Chinese mothers' perceptions of breastfeeding and infant health in Canada.

- Citation:** Journal of Clinical Nursing, April 2010, vol./is. 19/7-8(1021-9), 0962-1067;1365-2702 (2010 Apr)
- Author(s):** Chen WL
- Institution:** School of Nursing, China Medical University, Taichung, Taiwan.
wlchen@mail.cmu.edu.tw
- Language:** English
- Abstract:** AIMS AND OBJECTIVES: The purpose of this study was to explore Chinese mothers' perceptions about breastfeeding and infant health in the Canadian context. BACKGROUND: Chinese mothers' breastfeeding perceptions are challenging for health professionals in North America, but few studies have focused on this issue in depth. DESIGN: An interpretive qualitative methodology was used. METHODS: Data were collected through semi-structured individual interviews with 15 purposively sampled Chinese mothers two months after delivery in Vancouver, British Columbia. Interviews were audiotaped and transcribed verbatim. Constant comparative analysis was used to develop coding categories and identify themes. RESULTS: Two main themes emerged: (1) the idea of harmony within change and (2) the meaning of infant health. The first represents mothers' perceptions about breastfeeding: the value of common sense, purity of breast milk and the laws of nature. The second represents notions of infant health, including its indicators and the relationship between mother's health and infant health. CONCLUSIONS: Chinese mothers' concepts of breastfeeding are associated with Western biomedical thought, traditional Chinese medicine and personal experiences, especially those embedded in the traditional Chinese cultural context. Perceptions of breastfeeding and infant health regarding notions of harmony within natural dynamic patterns must be considered when promoting breastfeeding. RELEVANCE TO CLINICAL PRACTICE: This study highlights the cultural context affecting Chinese mothers' breastfeeding practices. Nurses and other health professionals require sensitivity when assessing Chinese mothers' breastfeeding practice so that they are able to provide appropriate postnatal and breastfeeding support.
- Country of Publication:** England
- Publication Type:** Journal Article; Research Support, Non-U.S. Gov't
- Subject Headings:** [Adult](#)
[*Asian Continental Ancestry Group/px \[Psychology\]](#)
[*Attitude to Health/eh \[Ethnology\]](#)
[*Breast Feeding/eh \[Ethnology\]](#)
[British Columbia](#)
[China/eh \[Ethnology\]](#)
[Emigrants and Immigrants](#)
[Female](#)
[Humans](#)
[Infant, Newborn](#)
[Midwifery](#)
[Mother-Child Relations](#)
[Nursing Assessment](#)
[Qualitative Research](#)
- Source:** MEDLINE

190. [An acrodermatitis-enteropathica-like eruption in an exclusively breast-fed premature infant]. [French] Pseudo-acrodermatite enteropathique chez un enfant premature nourri exclusivement au sein.

- Original Title:** Pseudo-acrodermatite enteropathique chez un enfant premature nourri exclusivement au sein.
- Citation:** Annales de Dermatologie et de Venereologie, April 2010, vol./is. 137/4(336-7), 0151-9638;0151-9638 (2010 Apr)

Author(s): Saka B; Kombate K; Mouhari-Toure A; Akakpo S; Djeha A; Pitche P; Tchangai-Walla K

Institution: Service de dermatologie et venereologie, CHU Tokoin, BP 30785, Lome, Togo. barthelemysaka@yahoo.fr

Language: French

Country of Publication: France

CAS Registry Number: 0 (Gluconates); 526-95-4 (gluconic acid); 7440-66-6 (Zinc)

Publication Type: Case Reports; Journal Article

Subject Headings: [Acrodermatitis/di \[Diagnosis\]](#)
[Acrodermatitis/dt \[Drug Therapy\]](#)
[*Acrodermatitis/et \[Etiology\]](#)
[Alopecia/et \[Etiology\]](#)
[*Breast Feeding](#)
[Diagnosis, Differential](#)
[Diarrhea, Infantile/dt \[Drug Therapy\]](#)
[*Diarrhea, Infantile/et \[Etiology\]](#)
[Diseases in Twins](#)
[Erythema/dt \[Drug Therapy\]](#)
[*Erythema/et \[Etiology\]](#)
[Gluconates/tu \[Therapeutic Use\]](#)
[Humans](#)
[Infant, Newborn](#)
[Infant, Premature](#)
[Infant, Premature, Diseases/di \[Diagnosis\]](#)
[*Infant, Premature, Diseases/et \[Etiology\]](#)
[Infant, Very Low Birth Weight](#)
[Intestinal Absorption](#)
[Malabsorption Syndromes/co \[Complications\]](#)
[*Malabsorption Syndromes/di \[Diagnosis\]](#)
[Malabsorption Syndromes/dt \[Drug Therapy\]](#)
[Male](#)
[*Zinc/df \[Deficiency\]](#)
[Zinc/pk \[Pharmacokinetics\]](#)

Source: MEDLINE

191. [Effects of breast-feeding education and support services on breast-feeding rates and infant's growth].

Citation: Journal of Korean Academy of Nursing, April 2010, vol./is. 40/2(277-86), 2005-3673;2005-3673 (2010 Apr)

Author(s): Jang GJ; Kim SH

Institution: Department of Nursing, Daegu Haany University, Daegu, Korea. kjjang14@daegu.ac.kr

Language: Korean

Abstract: **PURPOSE:** This study was done to investigate the effects of breast-feeding education and support services on rate of breast-feeding three and six months after birth, and the effect on infant's growth (weight, height, body mass index [BMI]). The experimental group which had both education and support services was compared with the control group which had only breast-feeding education. **METHODS:** This study was a quasi-experimental study with a time-series design. The participants were 39 mothers who were hospitalized for childbirth. Twenty mother were assigned to the experimental group and 19 mothers, to the control group. The breast feeding education was done during hospitalization, and support services were provided once a week after discharge for a month (a total 4 times) by a maternity ward nurse. Data regarding breastfeeding rate at one month after childbirth was collected by phone call; the breast-feeding rates at three and six months after childbirth were collected in a visit to the families. The child's weight and height were also measured during the visit. **RESULTS:** The experimental group had a statistically significant higher rate for frequency of breast-feeding at one, three and six

months after childbirth than the control group. However, there was no meaningful difference between the two groups for infant growth. **CONCLUSION:** The results of this study suggest that breast-feeding education is helpful for a start, but support services are also necessary to sustain breast-feeding.

Country of Publication: Korea (South)

Publication Type: Controlled Clinical Trial; English Abstract; Journal Article; Research Support, Non-U.S. Gov't

Subject Headings: [Adult](#)
[Body Height](#)
[Body Mass Index](#)
[Breast Feeding/ep \[Epidemiology\]](#)
[*Breast Feeding](#)
[Female](#)
[Health Promotion](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[*Mothers/px \[Psychology\]](#)
[*Patient Education as Topic](#)
[*Social Support](#)
[Weight Gain](#)

Source: MEDLINE

192. [Factors affecting mother's adaptation to breastfeeding].

Citation: Journal of Korean Academy of Nursing, April 2010, vol./is. 40/2(225-35), 2005-3673;2005-3673 (2010 Apr)

Author(s): Kim SH

Institution: College of Nursing, Catholic University of Daegu, Daegu, Korea. sunhee421@cu.ac.kr

Language: Korean

Abstract: **PURPOSE:** The aim of this study was to identify factors which influence breastfeeding adaptation from among the following: parity and feeding behavior, social support, psychological, and demographic factors. **METHODS:** The respondents were 179 breastfeeding mothers. Data were collected from June 2 to 19, 2009 at two community health centers and one pediatric outpatient department. Data were analyzed using the SPSS program and included descriptive statistics, t-test, ANOVA, correlation, and multiple regression. **RESULTS:** The major findings of this study were: 1) Significant differences in the level of breastfeeding adaptation were related to number of children, current problems related to breastfeeding, and lay supporters. 2) Level of breastfeeding adaptation was significantly related to marriage satisfaction, proportion of breastfeeding, length of previous breastfeeding, planned length of breastfeeding, parenting stress, and encouragement to breastfeed given by medical personnel. 3) Regression analysis showed that parenting stress, marriage satisfaction, current problems related to breastfeeding, and proportion of breastfeeding explained 44.3% of variance for breastfeeding adaptation. Length of previous breastfeeding also explained 9.7% of breastfeeding adaptation among mothers who had breastfed an elder child. **CONCLUSION:** Mothers with lower marriage satisfaction, breastfeeding problems, and higher parenting stress require more help from their family and nurses for breastfeeding adaptation. Future research should include variables, such as mother's and baby's behavior related to breastfeeding, knowledge about breastfeeding, and attitude toward breastfeeding.

Country of Publication: Korea (South)

Publication Type: English Abstract; Journal Article

Subject Headings: [*Adaptation, Psychological](#)
[Adult](#)
[*Breast Feeding/px \[Psychology\]](#)
[Demography](#)

[Female](#)
[Humans](#)
[Infant](#)
[Infant, Newborn](#)
[Marriage](#)
[Maternal Behavior](#)
[*Mothers/px \[Psychology\]](#)
[Parenting](#)
[Personal Satisfaction](#)
[Questionnaires](#)
[Regression Analysis](#)
[Social Support](#)

Source: MEDLINE

193. Teaching Chilean mothers to massage their full-term infants: effects on maternal breast-feeding and infant weight gain at age 2 and 4 months.

Citation: Journal of Perinatal & Neonatal Nursing, April 2010, vol./is. 24/2(172-81), 0893-2190;1550-5073 (2010 Apr-Jun)

Author(s): Serrano MS; Doren FM; Wilson L

Institution: Universidad Catolica de Chile Escuela de Enfermeria, Pontificia Universidad Catolica de Chile, Santiago de Chile, Vicuna Mackenna, Chile. mcampose@uc.cl

Language: English

Abstract: The purpose of this study was to evaluate the effects of massage on infant weight gain and exclusive maternal breast-feeding of an intervention that involved teaching mothers to massage their full-term infants. The sample included 100 healthy newborn infants who were receiving primary healthcare at 3 health centers in a low-income neighborhood of Santiago, Chile. The control group included 65 infants and the massage group included 35 infants. During their second well-child clinic visit, clinic nurses provided instruction to massage-group mothers about how to massage their infants, based on the methods of the Baby's First Massage program (<http://www.babysfirstmassage.com/Scripts/default.asp>). Mothers were encouraged to massage their infants for 10 to 15 minutes at least once a day, starting when their infants were 15 days old. There was no difference in the mean weights of the infants between the massage and control groups at baseline, but at age 2 months, massage group infants weighed significantly more than control-group infants. There were no weight differences between the 2 groups at age 4 months. There were no differences between the 2 groups on the incidence of exclusive maternal breast-feeding at age 2 or 4 months. The findings suggest that teaching mothers to massage their newborn infants may have a beneficial effect on the infant's early weight gain. There is a need for additional studies to evaluate the effect of maternal massage on other health and welfare outcomes for both mothers and infants.

Country of Publication: United States

Publication Type: Controlled Clinical Trial; Journal Article; Research Support, Non-U.S. Gov't

Subject Headings:
[Adolescent](#)
[Adult](#)
[Analysis of Variance](#)
[Breast Feeding/px \[Psychology\]](#)
[*Breast Feeding](#)
[Chi-Square Distribution](#)
[Chile](#)
[Cues](#)
[Female](#)
[Follow-Up Studies](#)
[Humans](#)
[Infant, Newborn](#)
[*Massage/ed \[Education\]](#)
[Massage/mt \[Methods\]](#)

[Massage/px \[Psychology\]](#)
[Mother-Child Relations](#)
[*Mothers/ed \[Education\]](#)
[Mothers/px \[Psychology\]](#)
[Nursing Evaluation Research](#)
[Object Attachment](#)
[*Patient Education as Topic/og \[Organization & Administration\]](#)
[Poverty Areas](#)
[Urban Population](#)
[*Weight Gain](#)

Source: MEDLINE

194. Persuasion with pictures: piloting a breastfeeding image aimed at children.

Citation: British Journal of Midwifery, 01 April 2010, vol./is. 18/4(212-217), 09694900

Author(s): Ireland J; van Teijlingen E

Language: English

Abstract: Ideas about infant feeding are formed earlier than previously assumed. School-aged children have thoughts on how they might feed their future babies. Based on inoculation theory, an image, was designed and pilot-tested which would promote breastfeeding to children as a 'natural' behaviour at an age when other influences have not pervaded their consciousness. Delegates to a breastfeeding conference were invited to view the image; asked for positive and negative feelings about it; and to rate their overall feelings. Demographic data were gathered. Written comments were analysed thematically. More negative than positive comments were made. Those giving more extreme ratings on the quantitative questions also made more extreme comments in the open-ended sections. Most negatives were about the art work itself rather than the health promotion message. Using art work in health promotion has specific strengths and weaknesses which include, for example, that art stimulates reactions. These reactions are themselves influenced by personal tastes, culture and the emotions it may or may not evoke. More generally, pilot studies using a mixed-methods approach can help improve the design of breastfeeding images and, consequently, that of health promotion interventions.

Publication Type: journal article

Subject Headings: [Art](#)
[Breast Feeding Promotion](#)
[Breast Feeding](#)
[Photography](#)
[Adolescence](#)
[Adult](#)
[Aged](#)
[Attitude to Breast Feeding](#)
[Child](#)
[Funding Source](#)
[Human](#)
[Middle Age](#)
[Pilot Studies](#)
[Questionnaires](#)
[Summated Rating Scaling](#)
[Thematic Analysis](#)

Source: CINAHL

195. Practices and beliefs about exclusive breastfeeding by women living in Commune 5 in Cali, Colombia.

Citation: Colombia Médica, 01 April 2010, vol./is. 41/2(161-170), 16579534

Author(s): Hernández L; Vásquez ML

Language: English

Abstract:	Objective: To describe the practices and beliefs about breastfeeding during the first 6 months after delivery, a study was completed with women living in Commune 5 in Cali, Colombia. Methods: The methodology used for the study was ethno nursing, which facilitated inquiring about the emic perspective and identifying beneficial and risk-laden practices for the child's health regarding feeding. Fifteen women were the key informants; this sample was determined by data saturation criteria. Findings: Findings are presented in two parts: practices and beliefs in favor of exclusive breastfeeding and practices and beliefs that do not support exclusive breastfeeding. The prominent practices and beliefs in favor of exclusive breastfeeding are related to the mother's bond with the child, preparation for breastfeeding during pregnancy, and family support. Among the practices and beliefs not supporting maternal breastfeeding, we must highlight the mother's lack of confidence in her breast milk production. Conclusions: Knowledge generated by this study may facilitate nursing care of women during pregnancy and postpartum that is congruent with their culture. To accomplish this, we identified cultural practices that should be kept and others needing modification or restructuring.
Publication Type:	journal article
Subject Headings:	Breast Feeding Health Beliefs Patient Attitudes Colombia Ethnology Female Human Interviews Models, Theoretical Qualitative Studies
Source:	CINAHL

196. Dietary intake and plasma concentrations of PUFA and LC-PUFA in breastfed and formula fed infants under real-life conditions.

Citation:	European Journal of Nutrition, 01 April 2010, vol./is. 49/3(189-195), 14366207
Author(s):	Schwartz J; Drossard C; Dube K; Kannenberg F; Kunz C; Kalhoff H; Kersting M
Language:	English
Abstract:	The breastfed infant is usually used as standard for formula feeding, also regarding long-chain polyunsaturated fatty acids (LC-PUFA). Here, plasma fatty acid concentrations in formula fed infants and the effects of LC-PUFA supplementation were investigated under real-life conditions. Term healthy infants being fully milk fed until the age of 4 months were categorized as breast milk "BM" (n = 73) if consuming >95% of energy from breast milk or formula (F) if consuming >95% of energy from formula subdivided into formula without (F-) (n = 15) and with LC-PUFA supplementation (F+) (n = 15). Formula as marketed was chosen by the parents. Dietary fatty acids (FA) intake was calculated from continuous dietary records from 2 months of age onwards. Total plasma FA were analyzed at the age of 4 months with docosahexaenoic acid (DHA) as primary outcome. Dietary ratios of the polyunsaturated fatty acids (PUFA; linoleic acid/alpha-linolenic acid) were smaller in both F groups than in the BM group. Plasma DHA as % of total FA was similar in BM and F(+) but higher in BM in absolute amounts (mg/L). Plasma DHA as % of total FA in F(-) was higher than what might be supposed on the basis of dietary intake. Infants consuming present-day LC-PUFA-supplemented formula achieved plasma LC-PUFA concentrations similar to breastfed infants. In infants consuming non-LC-PUFA-supplemented formula, the favorable PUFA pattern of the formula may have supported n-3 LC-PUFA biosynthesis.
Publication Type:	journal article
Subject Headings:	Breast Feeding Diet Fatty Acids, Unsaturated Food Intake

[Infant Formula](#)
[Plasma](#)
[Analysis of Variance](#)
[Biological Markers](#)
[Chi Square Test](#)
[Female](#)
[Funding Source](#)
[Germany](#)
[Human](#)
[Infant](#)
[Male](#)
[Metabolism](#)
[Wilcoxon Rank Sum Test](#)

Source: CINAHL

197. Indices of Multiple Deprivation predict breastfeeding duration in England and Wales.

Citation: European Journal of Public Health, 01 April 2010, vol./is. 20/2(231-235), 11011262

Author(s): Brown AE; Raynor P; Benton D; Lee MD

Language: English

Abstract: BACKGROUND: To investigate the association between breastfeeding duration and socio-economic status as measured by the English and Welsh Indices of Multiple Deprivation (IMD). METHODS: Total 216 multiparous women whose youngest or only child was between 6 and 24 months completed a retrospective questionnaire study of infant feeding between birth and 26 weeks. Measurements included breast-feeding history; socio-economic demography and IMD. RESULTS: Breastfeeding duration was associated with levels of multiple deprivation in both English and Welsh samples. Deprivation level and breastfeeding duration were associated with traditional indicators of socio-economic status. When considered in combination with other socio-economic indicators of breastfeeding duration, the deprivation level remained a strong predictor of breastfeeding duration over and above other socio-economic measures. CONCLUSIONS: Deprivation, as assessed by the IMD is predictive of breastfeeding duration. Postcode and thus deprivation level can be used as a non-intrusive way to identify women most at risk of low breastfeeding rates. Service provision can be targeted directly at women in areas recognized as being high in deprivation.

Publication Type: journal article

Subject Headings:
[Breast Feeding](#)
[Infant Feeding](#)
[Adult](#)
[Data Analysis Software](#)
[Descriptive Statistics](#)
[England](#)
[Female](#)
[Funding Source](#)
[Human](#)
[Questionnaires](#)
[Retrospective Design](#)
[Socioeconomic Factors](#)
[Step-Wise Multiple Regression](#)
[Time Factors](#)
[Wales](#)

Source: CINAHL

198. Maternal return to work and breastfeeding: a population-based cohort study.

Citation: International Journal of Nursing Studies, 01 April 2010, vol./is. 47/4(461-474), 00207489

Author(s): Chuang C; Chang P; Chen Y; Hsieh W; Hurng B; Lin S; Chen P

Language:	English
Abstract:	<p>BACKGROUND: In recent decades there has been a marked rise in the participation of women with infants in the labour market, while there has been a decline in the prevalence rate of breastfeeding. OBJECTIVE: To explore the relationship between maternal return to work and breastfeeding. DESIGN: An on-going prospective longitudinal study. SETTING AND PARTICIPANTS: Multistage stratified systematic sampling was designed to recruit 24,200 pairs, postpartum women and newborns, from the Taiwan national birth register in 2005. Participating women underwent two home interviews at 6 and 18 months after giving birth, following structured questionnaires. A total of 21,248 and 20,172 women were interviewed, and the completed interview rate was thus 87.8% and 83.4% at 6 and 18 months, respectively. All study participants provided informed consent as approved by the Ethics Review Board of the National Taiwan College of Public Health. RESULTS: The overall prevalence of initial breastfeeding was 83.7%. Postpartum women returning to work less than or equal to 1 month had the lowest initiation of breastfeeding rate (77.5%), but had a higher prevalence of breastfeeding duration less than or equal to 1 month (34.9%) than the overall population (26.8%). Overall 67.9%, 39.4%, 25.4%, and 12.7% mothers who started breastfeeding still breastfed their infants at the age of 1, 3, 6 and 12 months, respectively. Women with maternal leave of less than or equal to 6 months ceased breastfeeding earlier than those with maternal leave beyond 6 months and those who did not return to work up to 18 months after birth. After adjustment for potential confounders, odds ratios of initial breastfeeding seemed no different, except those for postpartum women who returned to work less than or equal to 1 month and those who did not return to work. Mothers returning to work within 1 year after giving birth were significantly earlier in weaning than those without return to work. CONCLUSION: In our study, an early maternal return to work, especial within 6 months after giving birth, was a barrier to the initiation and continuation of breastfeeding. Thus, a comprehensive strategy is required to encourage the practice of breastfeeding in working women from pregnancy to the return to work, and nurses should work to promote breastfeeding in the different occasion.</p>
Publication Type:	journal article
Subject Headings:	Breast Feeding Job Re-Entry Mothers, Working Weaning Adult Chi Square Test Confidence Intervals Cox Proportional Hazards Model Descriptive Research Descriptive Statistics Female Funding Source Human Infant Interviews Multiple Logistic Regression Odds Ratio Parental Leave Prospective Studies Questionnaires Sampling Methods Structured Questionnaires
Source:	CINAHL
199. Breastfeeding as a pain intervention when immunizing infants.	
Citation:	Journal for Nurse Practitioners, 01 April 2010, vol./is. 6/4(287-295), 15554155
Author(s):	Tansky C; Lindberg CE

Language: English

Abstract: Pain is a perception that is often overlooked in the infant population, especially with regard to immunizations. Evidence has shown that infants do perceive and remember pain, demonstrating heightened pain responses to other painful procedures later in life. However, there has been very little research to determine a natural, cost-effective intervention to pain perception in the infant population. Breastfeeding is an intervention that incorporates those qualities, and its ability to decrease infants' pain perceptions has been recently studied. This article presents a review of the current literature on breastfeeding as an intervention to the pain caused by immunizations, as well as minor painful procedures in general. The evidence has demonstrated significant positive outcomes to decreased pain perception in the infant population when breastfeeding is used as an intervention. Nurse practitioners should use this evidence to encourage breastfeeding mothers to use the act of nursing their infants as a distraction to the pain produced by routine immunizations in the primary care setting.

Publication Type: journal article

Subject Headings: [Breast Feeding](#)
[Distraction](#)
[Immunization](#)
[Treatment Related Pain](#)
[CINAHL Database](#)
[Cochrane Library](#)
[Conceptual Framework](#)
[Crying](#)
[Gate Control Theory of Pain](#)
[Human](#)
[Infant](#)
[Medline](#)
[Nurse Practitioners](#)
[PubMed](#)
[Systematic Review](#)

Source: CINAHL

200. Nutritional vitamin A status in northeast Brazilian lactating mothers.

Citation: Journal of Human Nutrition & Dietetics, 01 April 2010, vol./is. 23/2(154-161), 09523871

Author(s): da Silva Ribeiro KD; de Araújo KF; de Souza HHB; Soares FB; da Costa Pereira M; Dimenstein R

Language: English

Abstract: Background: Vitamin A deficiency is the major cause of morbidity and mortality among children and in women of reproductive age in developing countries. The present study aimed to assess maternal nutritional vitamin A status, as well as analyse the association of preformed vitamin A and pro-vitamin A consumption on the nutritional status of nursing mothers, based on serum retinol and retinol colostrum concentrations coupled with dietary intake. Methods: Serum and colostrums were collected from 86 healthy parturients, recruited within 16 h postpartum. Blood samples were obtained, the morning after an overnight fast. Retinol was analysed by high-performance liquid chromatography. Dietary vitamin A was assessed using a food frequency questionnaire and the women were separated into two groups according to the predominant dietary source of vitamin A: group A, >50% preformed vitamin A (n = 37); and group B >50% pro-vitamin A carotenoids, (n = 49). Results: Serum retinol and total vitamin A ingestion (mean \pm SD) were higher in group A than in group B (1.4 ± 0.4 [μ]mol L⁻¹ and 2072.0 ± 1465.9 [μ]g retinol activity equivalent (RAE) day⁻¹ versus 1.2 ± 0.6 [μ]mol L⁻¹ and 1051.6 ± 920.4 [μ]g RAE day⁻¹, respectively (P < 0.05), but colostrum retinol (3.4 ± 1.7 [μ]mol L⁻¹ and 3.6 ± 1.9 [μ]mol L⁻¹) was similar in both groups. In group B, 36.7% (n = 18) of the nursing mothers presented a risk of developing vitamin A deficiency, based on

their dietary intake. Conclusions: On the basis of the intake of the pro-vitamin A carotenoids, some women may be at risk of vitamin A deficiency. However, their status is currently normal, as indicated by serum and milk retinol concentrations.

Publication Type:

journal article

Subject Headings:

Breast Feeding
 Nutritional Status
 Vitamin A
 Adolescence
 Adult
 Birth Weight
 Brazil
 C-Reactive Protein
 Carotenoids
 Chromatography, High Pressure Liquid
 Colostrum
 Confidence Intervals
 Cross Sectional Studies
 Data Analysis Software
 Descriptive Statistics
 Dietary Reference Intakes
 Female
 Gestational Age
 Human
 Infant
 Infant Nutrition
 Infant, Newborn
 Lactation
 Mann-Whitney U Test
 Milk, Human
 Nutritional Assessment
 Pearson's Correlation Coefficient
 Power Analysis
 Questionnaires
 Spearman's Rank Correlation Coefficient
 Vitamin A
 Vitamin A
 Young Adult

Source:

CINAHL