Early Initiation of Breastfeeding

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Abstract

Early initiation of breastfeeding is extremely important for establishment of successful lactation and for the health of the child as well as for providing 'Colostrums' to the baby. Ideally, the baby should receive the first breastfeed as soon as possible and preferably within one hour of birth. Early skin-to-skin contact immediately after delivery and the opportunity to suckle within the first hour after birth are both important for mothers and their healthy newborn infants. Early skin-to-skin contact after delivery may promote breastfeeding outcomes and prevent the newborn from hypothermia and hypoglycemia. There is also a culutural practice of giving prelacteal feeding before starting breast feeding like honey, sugar and water which may inhibit the baby's thirst and hunger which in turn will adversely influence the milk production and increase the risk of infection because of not sucking breast milk vigorously. Therefore there is need to bring awareness among mothers about early initiation of breastfeeding within one hour of birth to reduce child morbidity and mortality by the skillful counselors by taking initiation of breastfeeding at birth and support during the stay in the hospital.

Introduction

Breast milk is a special gift from mother to her baby. Many newborn lives are saved because breast milk provides important nutrients and protection against illness and infection. Breast milk contains vitamins, minerals and proteins. All most all of the four million newborn deaths are due to preventable causes, with the majority of them attributed to infections. According to WHO, in the Global Strategy for infant and young child feeding $2/3^{rd}$ of <5 deaths that occur in infancy are mostly related to poor feeding practices. In developing countries alone, early initiation of breastfeeding could save as many as 1.45million lives each year by reducing death mainly due to diarrheal disorders and lower respiratory tract infections in children (Laucer, Betran, Barros, & Onis, 2006).

A study from Ghana (Pediatrics, 2006) has documented that 22.3% of all neonatal deaths could be prevented if all women could initiate breastfeeding within one hour of birth in a community. Even if breastfeeding is started within 24 hours after birth, 16% neonatal deaths can still be prevented.

Current international and national guidelines recommend initiation of breastfeeding within one hour of birth. In South Asia, 24%–26% of babies born in Bangladesh, India and Pakistan are breastfed within the first hour of birth, whereas the corresponding rate for Sri Lanka is 75%. The effect of these breastfeeding patterns is reflected in the neonatal mortality rates for these countries: 40–50 per 1000 live births for Bangladesh, India and Pakistan, while in Sri Lanka the rate is as low as 11 per 1000 live births (World Health Organaization, 2006)

The World Health Organization (1998) summarized the findings of studies on the effects of early breastfeeding contact in Step 4 of *Evidence for the Ten Steps to Successful Breastfeeding* which states "Help mothers initiate breastfeeding within a half-hour of birth" and its explanation is provided in the WHO's document.

According to the Global Criteria for the WHO/ UNICEF Baby Friendly Hospital Initiative, (1992) mothers in the maternity ward who have had normal vaginal deliveries should confirm that within a half-hour of birth they were given their babies to hold with skin contact, for at least 30 minutes, and offered help by a staff member to initiate breastfeeding. The criteria also says that at least 50% of mothers who have had caesarean deliveries should confirm that within a one hour of being able to respond, they were given their babies to hold with skin contact. Initiation of breastfeeding within the first hour after birth and exclusive breast feeding for first 6 months of life plays a vital role on reducing infant morbidity and mortality (WHO & UNICEF, 2008).

The impact of early initiation of breastfeeding on infant mortality and its economic advantages are well known. Yet little attention has been paid by health-care practitioners and policy-makers to this simple preventive strategy, except for annual campaigns that aim to highlight its importance, such as the World Breastfeeding Week (http://www.worldbreastfeedingweek.net/).

Early initiation ensures that a newborn receives colostrums, the "first milk" that secreted before the milk in the mother's breast. It is the thin yellowish fluid contains less fat and sugar and more protein and salts than breast milk. The mother or family members should be advised to give initial breast feeding to the child as soon as possible or within one hour without giving any prelacteal feeding like honey, water or any other foods and fluids. Prelacted feed can satisfies the baby's thirst and hunger and the baby may not suck the breast milk vigoursly which in turn will adversly influence the adequate breast milk production. Prelacted feeds also increase the risk of infection. Colostrums is considered the baby's first immunization because of its high levels of vitamin A, antibiotics, and other protective factors to prevent perinatal, and neonatal deaths and also established breastfeeding patterns. In the first hour of life, the baby is most alert and able to imprint the unique suckling movements necessary for successful breast feeding. As time passes the baby becomes sleepier as baby recovers from the birthing process and it has been observed that the suckling reflex diminishes rapidly only to reappear adequately forty hours later. During this entire first hour of alertness, it is important to keep the baby with the mother, ideally skin to skin. It also helps to eastablish attachment with the mother or promote bonding relation between child and mother.

Advantage of early initiation of breastfeeding (without any food or drinks):

Early initiation of breastfeeding (within the first hour) provides benefits for infant and mother.

1. Saves lives

2. Takes advantage of the newborn's intense suckling reflex in alert state.

3. Helps establish and sustain breastfeeding throughout infancy

4. Protects from infections.

5. Promotion of warmth and protection may reduce the risk of death from hypothermia.

6. Fosters bonding between mother and child

7. Reduces risk of mother's post partum hemorrhage.

Considering the evidence as vital, beginning breast feeding within one hour must be considered as a vital first step towards ensuring exclusive breastfeeding. The World Breastfeeding Week (WBW)2007 aims precisely towards this objective, and also to raise public awareness of the benefits of this simple achievable practice on newborn and maternal health.(5) To promote and support early initiation of breastfeeding the mother should be encouraged for attending ANC at least four times during the pregnancy period for receiving adequate information about breastfeeding with other components of essential newborn care. She should have enough nutritious food and fluid to become healthy and promote her lactation after the birth of child. She should be free of stress and supported by her husband and other family members to keep her comfort physically and mentally to encourage her in enjoying on giving breast feeding and caring her child.

Conclusion

Early initiation of breast milk should be promoted by educational programs to all mothers and family members of the communities by discouraging them about the formula feeding and prelacted feeding. For this all health team members should play vital role on providing the information to all community people about early initiation of breastmilk and its importance through the help of mass media to facilitate in the achievement of the millennium development goal 4.

References

Edmond, K., Zandoh, C., Quigley, M., Amenga-Etego, S., Owusu-Agyei, S., & Kirkwood, B. (2006). Delayed breastfeeding initiation increases risk of neonatal mortality. *Pediatrics*, *117*, 380-386.

Lauer J. A., Betran, A. P, Barros A. J, & de Onis, M. (2006). Deaths and years of life lost due to suboptimal breast-feedingamong children in the developing world. *Public Health Nutrition*, *9*, 673-685.

World Health Organization. (n.d.). Retrieved Jan 23, 2009, from World Breastfeeding Week over the years.

World Health Organization. (2006). Retrieved February 4, 2009, from <u>http://www.who.int/</u><u>making_pregnancy_safer/publication/</u><u>neonatal.pdf</u>.

World Health Organization. (1998). Evidence for the Ten Steps to Successful Breastfeeding. *Division of Child Health and Development*.