

A DESCRIPTIVE CROSS-SECTIONAL STUDY OF BREAST FEEDING PRACTICE

¹Dr Poonam Meena, ^{2*}Dr Satish Meena, ³Dr Ashok Meena, ⁴Dr R N Sehra

¹Medical Officer Government Hospital Dausa

²FNB fellow, Pediatric Hematology and Oncology, Apollo Hospital Chennai

³Medical Officer Government Hospital Dausa

⁴Senior Professor, Department of Paediatrics, S M S Medical College Jaipur

Article Info: Received 10 October 2021; Accepted 21 November 2021

DOI: <https://doi.org/10.32553/ijmbs.v5i12.2331>

Corresponding author: Dr Satish Meena

Conflict of interest: No conflict of interest.

Abstract

Background: This study was describe the breastfeeding practices and factors affected initiation and duration of breastfeeding

Methods: The cross sectional study was conducted on mothers with infants less than 1 year who came to immunization center for vaccination was included in the study. Total 1000 mothers include in this study.

Results: Only 35.40% of the mothers did the exclusive breastfeeding until 6 months and started weaning after 6 months. A total 55.00% of mothers in our study prematurely started weaning.

Conclusions: The study emphasizes the need for breastfeeding intervention programs especially for the mothers during antenatal and postnatal check-ups.

Keywords: Breastfeeding, Immunization, Infants.

Introduction

Breastfeeding is one of most important determinants of child survival, birth spacing, and prevention of childhood infections. The importance of breastfeeding has been emphasized in various studies. The importance of immunological and nutritional value of breast milk has been demonstrated.¹

The beneficial effects of breastfeeding depend on breastfeeding initiation, its duration. Breastfeeding practices vary among different regions and communities in India, breastfeeding in rural areas appear to be shaped by the belief of a community, which are further influenced by social, cultural, and economic factors.²

Materials and methods

The cross sectional study was conducted on mothers with infants less than 1 year who came to immunization center for vaccination was included in the study. Total 1000 mothers include in this study. Verbal consent was obtained. Those who are not willing to participated were excluded.

The pre-tested questionnaire included various factors that had a potential effect on the initiation and duration of breastfeeding practice. The questionnaire included socio-economic and demographical data, details on the initiation and duration of breastfeeding. A pre-test run was done to validate questionnaire for socio-economic status, a standard of living index³ was used that can be used for both urban and rural backgrounds.

Statistical analysis used: data analysis was done according to descriptive statistics. Result are given in percentages.

Results

In our study, the majority of the mothers were between the ages of 20 and 25 years old.

Initiation of breast feeding

Most of the mothers initiates breast feeding (97%) and the others (3%) were not able to initiate due to separation from mother or due to advice from the mother-in-law.

Table 1: Duration of breastfeeding

Duration	Number	Percentage
<6 months	550	55.00%
>6 months and started weaning	354	35.40%
>6 months and not yet started weaning	87	8.70%

Only 35.40% of the mothers did the exclusive breastfeeding until 6 months and started weaning after 6 months. A total 55.00% of mothers in our study prematurely started weaning.

Discussion

Women have a very positive attitude towards initiation of breast feeding. In this study almost all the women had initiated breastfeeding and continued to breastfeed beyond

6 months. Benakappa DG *et al*⁴ and Chandrashekhar TS *et al*⁵ also show similar pattern.

Breast milk should be initiated within half hour of delivery⁶. The delay in initiation will lead to a delay in the development of oxytocin reflexes, which are very important for the contraction of the uterus and the breast milk reflex. In our study, initiated breastfeeding within 30 minutes of childbirth, which is a good practice.

Pre lacteal feeds should not be given but still the majority of mothers gives either sugar water or honey. discarding the colostrums is still practiced widely. the colostrums is rich in vitamins, minerals, and immunoglobulins that protects the child from infectins⁷. Discarding the colostrums and feeding the child with honey or sugar water makes the child vulnerable to infection. Sharma M *et al* have also found similar practices in the community and it is largely influenced by the relatives and the primary care providers during childbirth.⁸

Conclusions

The study emphasizes the need for breastfeeding intervention programs especially for the mothers during antenatal and postnatal check-ups. The information regarding the advantage and duration of breastfeeding need to be provided for the community as a whole.

References

1. Dewey KG, Cohen RL, Brown KH, Rivera LL, effects of exclusive breastfeeding for four versus six months on maternal nutritional status and infant motor development. result of two randomized trial in Honduras. *J Nutr* 2001;131:262-7
2. Victora CG, Smith PG, Vaughan JP, Nobre LC *et al.* Evidence of protection against infant death from infectious disease in Brazil. *Lancet* 1987;2:319-22
3. Standard of living index, N FHS-3 report, 2004, P-47-48
4. Benakappa DG, Raju M, Shivana A, Benkappa AD. Breastfeeding practice in rural Karnataka (India) with special reference to lactation failure. *Acta Paediatr Jpn* 1989;31:391-8
5. Chandrashekar TS, Joshi HS, Binu V, Shankar PR, *et al.* Breastfeeding initiation and determinants of exclusive breastfeeding. A questionnaire survey in an urban public health. *Nutr* 2007;10:192-7
6. WHO and UNICEF, ten steps to promote successful breastfeeding. Mother and child health division Geneva:1989
7. Iarukov A, Nino A, Iarukov N, *et al.* The early breastfeeding of newborn infants. *Akush Ginekol (Sofia)* 1992;31:13-5.
8. Sharma M, Kanani S, Grandmothers influence on child care. *Indian J Pediatr* 2006;73:295-8.