Breastfeeding could reduce commons infections among Indigenous infants

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Image: Wikipedia.

Promoting breastfeeding could lead to a substantial reduction in common infections and even deaths that are more common in Indigenous infants than non-Indigenous infants, a new study suggests.

Indigenous infants in Canada experience gastrointestinal infection, lower respiratory infection (such as pneumonia) and ear infections "in excess frequency" and are "disproportionately affected" by sudden infant death syndrome, according to a paper published today by Dr. Kathryn McIsaac of the Centre for Research on Inner City Health of St. Michael's Hospital.

Breastfeeding is known to reduce a baby's risk of acquiring infections, asthma or allergies, as breast milk contains antibodies that fight off viruses and bacteria. While 87.4 per cent of all Canadian mothers breastfeed, Indigenous moms in Canada are less likely to do so (77.8 per cent). However, some studies have shown that when Indigenous mothers do breastfeed they do so for longer than non-Indigenous women.

"Interventions that promote, protect and support breastfeeding may prevent a substantial proportion of infection and mortality in Indigenous infants," Dr. McIsaac, a post-doctoral fellow in epidemiology, wrote in the *Canadian Journal of Public Health*.

Dr. McIsaac said it was important that any program implemented to promote breastfeeding among Indigenous mothers be developed in consultation with Indigenous women and, where possible, delivered by Indigenous women.

"One approach may be to promote breastfeeding to the women themselves," she said. "However, we recommend shifting the bulk of the responsibility for failure to breastfeed away from the woman and onto the health care system, where hospitals and community-based health programs should take the lead."

Dr. McIsaac's paper found that between 5.1 per cent and 10.6 per cent of ear infections, 24.3 per cent to 41.4 per cent of gastrointestinal infections, 13.8 per cent to 26.1 per cent of hospitalizations from lower respiratory tract infections (such as pneumonia), and 12.9 per cent to 24.6 per cent of sudden infant death could be prevented in Indigenous infants if they received breastfeeding.

Dr. McIsaac noted that non-Indigenous Canadian infants would also benefit from higher rates of breastfeeding. While there would be proportionately fewer instances of ear infections (3.5 per cent), gastrointestinal infections (17.8 per cent), hospitalizations for lower respiratory tract infections (9.7 per cent) and SIDS (9.1 per cent), the absolute numbers would be higher because the non-Indigenous population in Canada is larger than the Indigenous population.

Dr. McIsaac's data on breastfeeding prevalence came from the Canadian Community Health Survey and the First Nations Regional Health Survey. She also reviewed existing literature to determine the

relative risk of not being breastfed on four separate health outcomes - SIDS, gastrointestinal infection, respiratory tract infection and ear infections.

Provided by St. Michael's Hospital