

Breastfeeding research improves lives and advances health, but faces conflicts

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COVID-19 has highlighted both the importance and fragility of breastfeeding support systems. Credit: Shutterstock

Breastfeeding and breast milk provide <u>big opportunities to support</u> <u>maternal, infant and population health</u>. This is especially true during the



current pandemic because breastfeeding can help alleviate food insecurity, and research shows the breast milk of women who have recovered from COVID-19 offers a source of COVID-19 antibodies.

Breastfeeding <u>saves lives</u> and prevents illness. It is <u>environmentally</u> <u>friendly</u> and profoundly important to children's long-term development. After all, <u>breast milk</u> is the *only* food that has evolved specifically to feed humans.

Breastfeeding matters

Beyond supplying nutrition, breast milk provides personalized <u>immune</u> <u>protection and shapes the developing microbiome</u>. Scientists have discovered enzymes, hormones, antibodies and live cells in <u>breast milk</u>, and these bioactive components could hold the key to <u>developing new therapies</u>—not only for COVID-19, but also autoimmune diseases, diabetes and cancer.

Yet, remarkably, we still don't fully understand the composition of breast milk, or the biological basis for its many <u>health effects</u>. In fact, more <u>scientific papers</u> have been published on <u>headaches</u> than <u>breastfeeding</u>, and more federal research dollars from <u>Canadian Institutes of Health</u> <u>Research</u> and the <u>Natural Sciences and Engineering Research Council of Canada</u> have been invested to <u>study corn</u> than <u>breast milk</u>.

The act of <u>breastfeeding</u> also <u>supports mother-infant bonding</u> and helps to prevent <u>breast and ovarian cancer in mothers</u>. Unfortunately, most mothers <u>do not even meet their own breastfeeding goals</u>, let alone <u>achieve recommendations</u> of exclusive breastfeeding for six months, followed by 18 months of breastfeeding along with other foods.

This is particularly concerning during this pandemic, when mothers infected with COVID-19 may be separated from their newborns (despite



World Health Organization guidance to the contrary) and breastfeeding support is often unavailable because public health visits are being canceled and lactation services have been suspended in many places.

Tensions abound

Every parent knows that infant feeding is a complex issue, often evoking strong emotions based on personal experience. Difficult or negative breastfeeding experiences can fuel a defensive "breastfeeding denialism" attitude.

Conversely, some breastfeeding advocates refuse to acknowledge that for some families, formula is necessary for medical, personal, societal or socioeconomic reasons. These extreme attitudes cause a tense and unproductive environment for researchers working to generate inclusive evidence-based guidance for infant feeding.

Industry partnerships also cause tension in this field because the infant feeding industry frequently violates the World Health Organization code for marketing of breastmilk substitutes, and transgressions have worsened during the pandemic. However, due to lack of funding for breastfeeding research, scientists are often faced with choosing between industry funding or no funding at all.

Unfortunately, these tensions often detract from the energy and resources that breastfeeding advocates, researchers, health professionals and <u>policy-makers</u> could be using to advance their shared goal of supporting maternal and child health.

What can be done

Of course, members of the diverse breastfeeding advocacy and research communities will not always agree—but we should aim to find common



ground and work together. There are many stakeholders involved, each with a role to play:

- Governments and nonprofit funding organizations should acknowledge the importance of breastfeeding and breast milk and invest more resources into this field.
- Researchers should build interdisciplinary teams to study breast milk as a biological system and think broadly about "breastfeeding challenges" in the context of complex <u>social</u> <u>systems</u>—including social inequities, parental leave policies, lactation difficulties and donor breast milk.
- Companies, researchers and advocacy groups should co-develop a conflict of interest framework for research on breastfeeding and breast milk and reporting of results.

Messaging is key to achieving these goals. All groups need to communicate effectively with each other, and with the health-care, research and public sectors. This means <u>providing or sharing clear resources</u> to convey scientific evidence free of conflict of interest, targeted to each audience, such as fact sheets for policy-makers, engaging videos for the public and infographics for <u>health</u>-care providers.

Stakeholders also need to actively discredit unfounded claims and misinformation, such as <u>unsubstantiated health claims made by infant nutrition companies</u>, or rumors about the transmission of COVID-19 via breastfeeding, when <u>there is no evidence of this occurring</u>.

Looking forward

Progress in breastfeeding, breast milk and lactation research is being hampered by tensions among researchers, advocates and industry.



As breast milk scientists, breastfeeding researchers and lactation specialists, we are concerned about these tensions and their potential to impede or delay discoveries in our field. Last year, we <u>held a workshop</u> to discuss these concerns and develop solutions.

Our <u>workshop paper</u> was written before the pandemic, but its recent publication is timely. The pandemic has brought researchers together in ways that seemed impossible before.

Breast milk research that would normally take years has been completed in months with unprecedented efficiency. A global network of human milk banks was established in a matter of days to share information about safe operations during the pandemic. Milk scientists and breastfeeding researchers are meeting monthly with the WHO to speed up the transition from discovery to policy.

We hope these trends will continue beyond the pandemic and become the new standard for doing and sharing research.

COVID-19 has also emphasized both the importance and fragility of breastfeeding support systems, which <u>have suffered considerably due to current restrictions</u>. The pandemic has also highlighted the potential of breast milk to inform new avenues of biomedical research, such as <u>milk antibodies</u> as potential therapeutics.

We hope this added urgency will encourage researchers, advocates, funders and policy-makers to work together to accelerate progress in supporting breastfeeding and breast milk research.

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