# **ORIGINAL ARTICLE**

# Exclusive Breast Feeding Habits among Mothers with Infants Under the age of five who were visiting an Outpatient Clinic (OPD) at a Tertiary Health Care Center

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# **ABSTRACT**

**Background:** The majority of mothers do not exclusively breastfeed young babies and squander colostrum. The purpose of our current research remained to evaluate exclusive breast-feeding habits among women with people under the age of five who were visiting an outpatient clinic at a tertiary care center. Appropriate breast-feeding habits are on the decrease.

**Methodology**: A cross-sectional research was conducted on 260 women who came to a Gynecological and Obstetrical OPD or ward with at least single baby aged 1 to 6. They were questioned about their demographics and breast-feeding habits.

**Results:** 117/260 (43%) of them breastfed exclusively, while the remainder utilized formula milk or cow's milk in addition to breast milk. Solitary 43/260 (18%) of the moms had provided colostrum to their babies, while 152/260 (60%) had administered Ghutra (a traditional pre-lacteal feed, mostly honey). Mothers who have been uniparous, housewives, lived in joint households, came from middle-class families, and gave birth vaginally had better breast-feeding habits than some others. Whenever breast feeding habits were graded and classified, 44/260 (19.7 percent) had excellent practice, 64/260 (30 percent) had acceptable practice, and 117/260 (43 percent) had bad practice. 220/260 (87.6%) of the mothers had breastfed their infants, whereas 28/260 (12.7%) had not.

**Conclusion**: The review highlights the need of improving exclusively breast feeding as well as colostrum administration techniques.

**Keywords:** Breast feeding, exclusive feeding, colostrum.

#### INTRODUCTION

The diet and feed that a newborn receives from the day he is given birth determines his health. The primary hour is the best time to start breast feeding; colostrum can save 23% of baby fatalities [3. 54 babies out of 1000 live births die from diarrhea, respiratory illnesses, and malnutrition]. It is related to a lack of or a delay in breast feeding, since longer wait, the greater the dangers of sickness and child mortality. Breast milk is also advantageous to mother's health. It functions as a naturally contraceptive for two years by releasing oxytocin, which stops conception and protects prevent ovarian and breast cancer [1]. According to previous research, Pakistan has poorest exclusive breast-feeding rates in South Asia. Only 34% of children receive exclusively breast milk up to 6 months of age, and 44% of moms utilize formula milk for their infants, which does not meet nutritional requirements and does not give illness protection. Breast feeding is stigmatized since it harms the mother's attractiveness and health and does not meet the nutritional needs of the infant [2]. This is attributable to formula milk advertising and a poor understanding amongst mothers. Social beliefs also influence breast feeding practices; upper-class women as well as those who work find it very hard to breastfeed their infants. Once a baby is born through C section, the hospital staff retains the baby for 24 hours, causing a delay in starting breast feeding and squandering colostrum [3]. The

goal of administering formula milk is to offer the mother rest and space to adjust; nevertheless, once the newborn is given baby formula, this is tough for the mother to start breast feeding. Hospital workers, particularly physicians, do not coach young mothers well about benefits of breast feeding and instead offer artificial milk, which reduces the practice even further. This study is intended to analyze mothers' breast-feeding habits and to aid in the development of a method to promote exclusive breastfeeding knowledge, mindset, and practice. Breast milk is an infant's major source of nutrition so that they can consume and digest solid foods. According to the WHO, a child should be breastfed exclusively from birth to 5 months of age [4]. Exclusively breast-feeding entails solely delivering breast milk and no other liquid, solid, or semi-solid substance, with the exception of medicine and vitamin Breast milk comprises lipids, proteins, carbohydrates, and minerals, it has an energy level of 65-75 kcal/100 ml. This provides all of the vital nutrients that a youngster needs up to the age of six months. This possesses anti-inflammatory and antibacterial qualities that prevent kids form illnesses such as polio, respiratory syncytial virus, perinatal death, otitis media, urinary incontinence, and newborn septicemia [5].

### **METHODOLOGY**

To avoid recollection bias, solitary people under the age of six were involved in research. Using the WHO sample size

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calculator, a sample size of 260 was generated based on sum of females who presented to the OPD each year in addition number of mothers amongst women, through a level of certainty of 96 percent and a margin of error of 4 percent. Data was obtained from women who presented to the hospital between May 2020 and April 2021. The selfstructured survey was piloted on six women to evaluate simplicity of presentation and comprehension of the queries, and the queries were again modified completely. The research did not provide the data of all these six ladies. Privacy of the information remained protected. Verbal informed permission was obtained in an appropriate manner, and all ethical implications were considered. The suggestion has been ethically vetted. The researcheradministration approach was used to fill out the questionnaires. It had 25 questions that addressed the necessary demographic factors such as age, family type, education, socioeconomic position, employment, domicile, gravidity, and plurality. All of the infants were asked about their breast-feeding methods, including the type of prolateral feed (exclusive, in addition to formula milk or cow's milk), timing, length, and frequently. A sample size of 200 forms were completed successfully, with 9 being deleted owing to insufficient data. For data collection and analysis, the Statistical Package for Social Sciences Software was utilized. Cross-sectional research was undertaken on mothers who presented to Gynecological and Obstetrical OPD or wards of Sir Ganga Ram Hospital, Lahore, with at least one kid under the age of six.

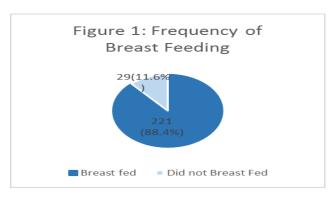
### **RESULTS**

29/260 (15.4 percent) were uneducated, whereas 59/260 (24.3 percent) were college graduates. 87.5 percent of the mothers were stay-at-home moms. 210/260 (82 percent) of the moms lived in cities.

Table 1: Sociodemographic profile of mothers:

Variables	• , ,	Frequenc	Percentag
		y (n=250)	e (%)
	18 to 25	29	11.6 34.8
Age	26 to 30	87	27.6
	31 to 35	69	26
	36 and above	65	
Type of	Nuclear Joint	99	39.6
Family		151	60.4
	Lower Class	75	30
Socioeco	Middle Class	170	68
nomic	nomic Upper Class 5		2
Status			
	Illiterate	28	11.2 10.4
	Secondary	26	22.8 14.4
Educatio	Matric	57	23.2
n	Intermediate	36	18
	Graduate	58	
	Masters	45	
	Housewife	215	86
Occupati	Private Sector	19	7.6
on	Govt. Sector	16	5.4
Residen	Rural Urban	60	20
ce		200	83
Gravidity	4 or less than 4	227 29	91
	5 or more		12

The bulk of the moms (152/260, or 61.5 percent) were from joint families, while the majority of the mothers (181/260) came from lower middle-class homes (69 percent). Only 228/260 (91%) moms had 5 or less offspring, whereas only 27/260 (12%) had 6 or more young kids. We evaluated the information and discovered that the age of moms spans from 19 to 42, with the majority of them falling between it ages of 27 and 32, 89/260. (35.9 percent).



The major goal of the study was to determine the number of mothers who breastfed their infants, 225 (89.5) percent) of the 260 women had breastfed their infants, whereas 28 (12.7 percent) had not. This indicated that the vast majority of the women had breastfed their infants. Most moms commence breast feeding but fail to complete it properly. In order to examine moms' breast-feeding methods, a variety of questions about their infants and feeding patterns were addressed. And what is the gestational age of students, 232/260 (92.7 percent) was complete and 17/260 (7.5 percent) have been pre-term, but now what is the method of delivery, 158/260 (62.7 percent) was vaginal and 97/260 (39.5 percent) had been caesarean? Whenever did the mother begin breast-feeding her child? 38/260 (15%) moms began immediately, 127/260 (57%) mothers began 3-20 hours later, and 44/260 (19%) mothers began 48 hours later. In terms of feeding periodicity, 136/260 (57.6 percent) fed their kid on request, 73/260 (32.7 percent) fed on a regular basis, and 24/260 (11.5 percent) fed arbitrarily. During 12 minutes, 65/260 (29.6 percent) moved to the other side, 135/260 (61.7 percent) after 12 to 23 minutes, and 19/260 (9.2 percent) after draining. So, what is the total period of breast feeding in months? 29/260 (11.9%) breastfed for less than 6 months, 62/260 (28.7%) for 6 to 12 months, 67/260 (27.9%) for 12 to 18 months, and 69/260 (31.8%) for up to 24 months. And what age did you start weaning at? The measures and characteristics used to examine mothers' practices include the time at which breast feeding was initially begun, incidence at which breast feeding is administered, overall breast-feeding length, and age of ablactation. Mothers with superior knowledge and perceptions practice more than someone who does not.

After looking at the data on mothers' breast-feeding practices, three gradings have been created based on prelacteal feed and kind of feed supplied up to 7 months. Mothers who delivered colostrum and subsequently exclusively breastfed their babies for 7 months were

considered to have Excellent practice. Good Practice was assigned to moms who provided formula milk, water, or ghutra as pre-lacteal feed and formerly exclusively breast milk for 7 months. Mothers who did not offer colostrum or exclusively breastfed were considered to have bad practice. This category aided in calculating the number and percentages of females who adhered to the conventional suggested practices and for those who did not. Data analysis revealed that 42 (19.6%) of females had excellent breast-feeding practice, 68 (34.3%) had good rehearsal, and 112 (51.4%) had poor breast-feeding rehearsal. According to the findings, semi of mothers had poor breast-feeding practices.

Table 3: Breast feeding practice of women:

Variables Frequency (250) Percentage						
- 1, 1 - 1, ( - 1 - 1, )			(%)			
	Term	229	91.6			
Gestational	Pre-Term	16	6.4			
Age	Post-Term	5	2			
Mode of	Vaginal C- Section	154 96	61.6			
Delivery			38.4			
Start of	Immediately	34	15.3 56.5 9.95			
Breast	2-24 hours	125	18.1			
feeding	24-48 hours	22				
	More than 48 hours	40				
Frequency of	On Demand	130	58.8 31.6			
feeding	Regularly	70	10.4			
	Randomly	23				
	Up to 15 mins	63	28.5			
Switching to	15-25 mins	134	60.6			
the other side	25-35 mins	8	3.6			
	After emptying	18	8.1			
	Less than 6 months	28	10.8 27.6 29.8			
Total duration	7 to 10 months	61	30.7			
of breast	10 to 24 months	66				
feeding	19 months to	68				
	24month					
Start of	3 to 5	121	48.4			
Weaning (In	6 to 8	123	49.2			
months)	9 to 11	6	2.4			

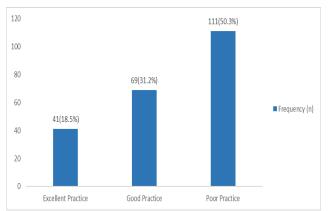


Figure 2: Grading of Breast-Feeding Practices:

The feeding was classified as the limited breast feeding, breast milk with formula, or breast milk through cow's milk. Statistics examination revealed that 113/260 (45 percent) used pure breast feeding, 93/260 (37 percent)

used breast feeding in conjunction using formula milk, and 18/260 (9.8 percent) used cow's milk.

The pre-lacteal feed is vital for wellbeing of a kid; ghutra, water, or formula milk should not be provided; nevertheless, lone 42 (17%) women administered colostrum to their infants.

Graph 3: Type of Feed Graph 4: Pre-lacteal Feed

To see if there was a link among breast feeding practice in addition demographic information, the mother's age and equality have been examined to the exclusive breast-feeding practice. 68/260 (27.9%) moms were uniparous, with 23/68 exclusively breastfeeding their infants. 188/260 (75.3%) moms were multiparous, and 92/186 (48%) provided exclusive feeding. 117/260 (47.5 percent) mothers were younger than 32 years old, with 76/118 (65.7 percent) providing limited breast feed and 98/260 (39.9 percent) providing limited feed. The Chisquare trial remains used, and a p value of fewer than 0.06 indicates that symmetry has symptom importance, whereas mother's age is negligible.

		Exclusive Breast Fed their child			
Parity		YES	NO	Total	p-Value
Age of mother	Uniparous	25	47	69	0.04
	Multiparous	92	97	187	
				260	
	Less than 30	55	67	119	
	More than 30	61	73	136	0.06
	Total	112	138	260	

#### DISCUSSION

Breast feeding provides both immediate and long-term health benefits for both the kid and the mother. It is critical that the infant get breast milk throughout his first six months of life, in addition that moms be fully informed about its benefits. The bulk of moms commence breast feeding; our study found that 89.5 percent of girls in the sample had breastfed their infants, while just 12.7 percent had not. In all other traditional communities, the majority of mothers decided to breastfeed their children throughout the first year of their lives [6]. Most mothers thought breast milk to remain finest source of nutrition for their infants, yet many people are unaware of the benefits of exclusive breast feeding. One key reason for not utilizing breast milk solely is that it is insufficient to meet the caloric needs of a kid. Most civilizations have low rates of limited breast feeding, and women often utilize formula milk in addition to breast milk [7]. It is attributable to a shortage of awareness; some mothers claim that their lactation is low and that the amount of milk produced is insufficient to meet the needs of their infants. Babies delivered by Caesarian section are not immediately turned over to their mothers and remain instead offered formula milk; this results in a decline in select feeding rates since women find it difficult to give breast milk after that [8]. Only 41/250 (16%) of the moms provided their infants colostrum. Along with its yellow appearance, most mothers throw it away, believing it to be hazardous and full of 'pus.' They reject the first "yellow milk" and replace it with clean white milk. A mother stated that she had a caesarian section and was unable to hold or see her kid until the third day [9]. As a result, she was

unable to donate colostrum or breastfeed her infant because the medical personnel had indeed started the baby on formula milk. Another woman stated that her nursing did not begin only until second day after the kid was born, even though it was standard white in color. As a result of moms' lack of understanding and medical employees' errors, the bulk of newborns do not obtain colostrum. The amount of breast milk secreted also varies on how long the baby feeds from one breast. To avoid full emptying of one breast, switching must still be done between 17-25 minutes. If the children's requirement is met but milk remains, a breast pump must be utilized to avoid leaky and waste. 64/260 (29.6%) females fed from one side for the first 12 minutes, 137/260 (62.7%) switched after 12 to 25 minutes, and 19/260 (9.2%) after empty [10].

# CONCLUSION

In our nation, the frequency of exclusive breast feeding is low, and many mothers lose colostrum. The public must still be educated about health issues. Doctors and medical personnel must demonstrate proper breast-feeding techniques and teach new moms on the benefits of exclusive breast feeding. The research underlines this need for improving women's breast-feeding methods.

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