

Twenty risks of infant formula

PROF DR MD EKHLASUR RAHMAN

Breastfeeding tops the list of effective preventive interventions for child survival. Together with appropriate complementary feeding, this has more impact even than immunisation, safe water and sanitation. There is no food including formula more affordable, beneficial and sustainable than breast milk. Rather formula has several drawbacks when compared to breast milk that might put your baby at risk of developing several diseases and loss of protection given by breastfeeding.

Formula risks for infants:

- 1. Asthma:** Exclusive breastfeeding (EBF) provides protection in early childhood up to age 6.
- 2. Lethargy:** EBF appears to provide some protection in development of allergies in infants, regardless of familial history of allergies.
- 3. Ear infections:** Infants fed formula during the first 6 months of life have more ear infections.
- 4. High blood pressure and heart disease:** Small-for-gestation and normal-weight infants who gained weight quickly on formula had higher risk of developing hypertension later in life than did breastfed infants.
- 5. Respiratory infections:** Formula fed infants suffer more frequently and more severely from respiratory infections, both viral, and bacterial.
- 6. Reduced IQ & cognitive development:** Formula fed infants consistently score lower on IQ and cognitive tests.
- 7. Obesity:** Formula feeding in infancy is associated with increased incidence of childhood and adolescent obesity and



higher BMI in adults.

8. Iron deficiency anemia: Formula fed infants have higher rates of iron-deficiency anemia due to low bioavailability of ferrous sulfate in cows milk based formulas.

9. SIDS (Sudden Infant Death Syndrome): Formula feeding increases the risk of dying from SIDS by up to 50% throughout the first year of life.

10. Diabetes (both types 1 & 2): Formula fed infants have greater risk for developing both type 1 and type 2 diabetes irrespective of parents diabetic status.

11. Digestive problems: Diarrhoeal disease is twice as high in formula fed infants, in both industrialised and resource-dependent countries and the increased risk of diarrheal disease when formula fed extends through the first 2 year of life.

12. Childhood cancers: Formula fed infants are at greater risk for developing childhood cancers, and the benefits of breastfeeding are dose-dependent, increasing with length of duration and exclusivity.

13. Sleep apnea: Formula-fed infants are at higher risk for developing sleep-disordered breathing problems.

14. Dental problems: Formula fed children have a significantly higher chance of having dental malocclusions, particularly overbite and cross bite problems.

Risks for mothers:

15. Diabetes: Compared to women who do not have children, women who give birth but do not breastfeed their children have a significantly higher incidence (14%) of developing type-2 diabetes than women who breastfeed.

16. Overweight and obesity: Formula feeding mothers retain their pregnancy weight longer and are at risk to keep weight gain between pregnancies.

17. Osteoporosis: Formula feeding mothers are at greater risk to experience hip fractures and other problems related to osteoporosis in the postmenopausal period.

18. Breast cancer, ovarian cancer and uterine cancer: Formula feeding mothers have increased risk of developing breast, ovarian and uterine cancers later in life.

19. Hypertension and heart diseases: Formula feeding mothers have higher BP levels in the initial postpartum period. They are also at increased risk to develop hypertension, hyperlipidemia, and cardiovascular disease later in life.

20. Reduced natural child spacing: Formula feeding mothers are at increased risk of having less space between pregnancies, thereby placing both mother and children (already living as well as future pregnancies) at increased risk of mortality, morbidity and malnutrition.

This document has been prepared incorporating evidence based information from the World Alliance for Breastfeeding Action (WABA). The writer is the Director, Institute of Public Health Nutrition and Line Director, National Nutrition Services (NNS).

BREASTFEEDING



World Breastfeeding Week: 1-7 August 2013

World Breastfeeding Week is celebrated every year from 1 to 7 August in more than 170 countries to encourage breastfeeding and improve the health of babies around the world. It commemorates the Innocenti Declaration made by WHO and Unicef policy-makers in August 1990 to protect, promote and support breastfeeding.

Breastfeeding is the best way to provide newborns with the nutrients they need. WHO recommends exclusive breastfeeding until a baby is six months old, and continued breastfeeding with the addition of nutritious complementary foods for up to two years or beyond.

HEALTH TIPS

Mobile technology to ensure EPI coverage

STAR HEALTH REPORT

ICDDR,B, Johns Hopkins Bloomberg School of Public Health (JHSPH) and the JHU Global mHealth Initiative, with Dhaka-based social enterprise, mPower-Health have jointly announced a new collaboration under which research will be undertaken to test a sustainable mechanism to support the Bangladesh Expanded Program on Immunisation (EPI) through mobile technologies.

In a launching ceremony, speakers said that the main reasons for low immunisation coverage in hard-to-reach areas and among street children are the absence of effective systems to track newborn children and remind parents about immunisation sessions.

The study will assess the feasibility and effectiveness of above stated auto birth registration and patient reminder systems through use of mobile phones to improve child immunisation coverage among hard-to-reach children.

HealthPrior21 signs MoU with NIPSOM



A Memorandum of Understanding (MOU) has been signed between Healthprior21 Ltd. and Department of Public Health & Hospital Administration of The National Institute of Preventive and Social Medicine (NIPSOM) recently. Under this agreement, they will jointly introduce online courses for medical professionals through Healthprior21.com portal.

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HEALTH bulletin

Asthma: Myth and truth

LT COL (DR) MD AZIZUR RAHMAN

Asthma is one of the commonest diseases of the respiratory system. Despite being common, many people are still ill prepared to handle. A lot of misconception still persists in general population. That is why it is important that we all know the facts against the myths to combat asthma.

Myth: You are likely to develop asthma if someone in your family has it.

Truth: You have a 6% chance of having asthma if neither parent has the condition, a 30% chance if one parent has it and a 70% chance if both parents have it.

Myth: You can catch asthma from someone else who has it.

Truth: Asthma is not a contagious disease.

Myth: Asthma can be cured. So it is not serious and nobody dies from it.

Truth: There is no cure for asthma, but the disease can be controlled in most patients with good medical care. The condition should be taken seriously, since uncontrolled asthma may result in emergency hospitalisation and possible death.

Myth: People with asthma should not exercise.

Truth: With the proper medication and care, all asthmatics should be able to participate in sports and



exercise. Certain athletic activities may be better for children with asthma. Swimming is an optimal exercise for those with asthma. On the other hand, exercising in dry, cold air may be a trigger for asthma in some people.

Myth: Medications used to treat asthma are habit forming.

Truth: Asthma medications are not addictive.

Myth: Smoking does not trigger asthma attacks.

Truth: Smoking triggers asthma and makes asthma worse.

Myth: Inhaled asthma medications are dangerous and the last resort in asthma management.

Truth: Inhaled asthma medications are very safe, effective, scientific and surest way of drug delivery to the airways. They do not go to any other part of body except the airways. These steroids do not have those side effects of oral steroids. Doses required are sometimes 40% less than oral steroids.

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Fiber-rich grains tied to lower diabetes risk

People who eat a diet high in fiber-rich whole grains are less likely to develop diabetes or heart disease, according to a review of past studies published in the American Journal of Clinical Nutrition.

Eating fish while pregnant may lower anxiety levels

A new study published in PLOS ONE reveals that pregnant women who eat seafood frequently will likely have lower levels of overall anxiety than those who do not.

Knowing for better living

Take Sehri in time

Avoid salty & fried foods in Sehri

Take usual amount of meal in Sehri

Drink at least half a liter of water in Sehri

Consult your doctor

"Take meal a little before dawn, for there is a blessing in taking meal at that time."

Al-Hadith (Muslim, 2412)



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