



**A descriptive cross-sectional study of breast-feeding practice in Bhilwara, Rajasthan**

Om Prakash Agal, M.D. Pediatrics, M.G. Hospital Bhilwara, Rajasthan, India

**Correspondence Author:** Om Prakash Agal, M.D., Pediatrics, M.G. Hospital Bhilwara, Rajasthan, India

**Type of Publication:** Original Research Paper

**Conflicts of Interest:** Nil

**Abstract**

**Background:** Breast-feeding practices play an important role in reducing the child mortality and morbidity.

**Materials and Methods:** This cross-sectional study was conducted at the M.G.hospital Bhilwara, Rajasthan for the period of 6 months. Mothers who came to the immunization center for vaccination with infants aged less than 1 year were included in the study. A total of 500 mothers were included in this study.

**Result:** A total of 500 mothers participated in the study. Of them 97% breast fed their children and 3% did not. Breast feeding was initiated within an hour among 60 %. Prolactal feeds given in 40%. Of them 35% gave buffalo milk, 30% gave honey, 20% gave sugar water and 15% gave infant formula. 80.00% received breast milk within 24 hrs. 52% practiced exclusive breastfeeding. 32% reported having used bottle feeding.

**Conclusion:** Breast feeding practices were adequate with initiation within one hour was fine which needs to be increased by promoting importance of breast feeding. Practice of pre- lacteal feeds was high. There is a marked difference between exclusively breastfed percentage in different parts of India.

**Keywords:** Breast-feeding, weaning, infants, mothers, immunization.

**Introduction**

Extensive research in various countries has provided evidence that breast-feeding clearly has health benefits for infants as well as mother.

United Nations International Children’s Emergency Fund and World Health Organization recommended that children should be exclusively breast-fed during the first 6 months of life. Breast milk is uncontaminated and contains all the nutrients necessary for the children in the first few months of life.

The first breast milk is known as colostrum, which is highly nutritious and has antibodies that protect the newborn from diseases.

Breast-feeding is one of the most important determinants of child survival, birth spacing, and prevention of childhood infections. The importance of breast-feeding has been emphasized in various studies. The importance of immunological and nutritional value of breast milk has been demonstrated in other studies.<sup>1,2</sup>

The beneficial effects of breast-feeding depend on breast-feeding initiation and its duration. Breast-feeding practices vary among different regions and communities in India, breast-feeding practices in rural areas appear to be shaped by the belief of a community, which are further influenced by social, cultural, and economic factors<sup>3</sup>.

**Materials and Methods**

This cross-sectional study was conducted at the immunization center of M.G.hospital Bhilwara , Rajasthan, India for the period of 6 months. Mothers who came to the immunization center for vaccination with infants aged less than 1 year were included in the study. A total of 500 mothers were included in this study. Verbal

consent was obtained. Those who were not willing to participate were excluded.

The pretested questionnaire included various factors that had a potential effect on the initiation and duration of breast-feeding practice. The questionnaire included socioeconomical and sociodemographical data and details on the initiation and duration of breast-feeding.

### Statistical Analysis

Data analysis was done according to the descriptive statistics. Results were given in percentages.

### Results

Table no.1.socio-demographic profile

Variants	No. of patients	Percentage
Age		
<21 Yrs	120	24
21-25 Yrs	275	55
26-30 Yrs	70	14
>30 Yrs	35	7
Education		
Literate	315	63
Illiterate	185	37
Parity		
primiparous	190	38
Multiparous	210	62

Total 500 mothers participated in our study. Percentage distribution of study population by demographic characteristic showed that the majority of the mothers were between the ages of 21 and 25 years (55%). About 37% of mothers were illiterate. 38% mothers were primiparous.

A total of 500 mothers participated in the study. Of them 97% breast fed their children and 3% did not. Breast feeding was initiated within an hour among 60 %. Prelacteal feeds given in 40%. Of them 35% gave buffalo milk, 30% gave honey, 20% gave sugar water and 15% gave infant formula. 80.00% received breast milk within

24 hrs. 52% practiced exclusive breastfeeding. 32% reported having used bottle feeding.

### Discussion

Women have a very positive attitude toward the initiation of breast-feeding. In this study, almost all the women had initiated breast-feeding and continued to breast-feed beyond 6 months. Benakappa et al<sup>4</sup>.and Chandrashekar et al<sup>5</sup>.also showed similar pattern.

Breast milk should be initiated within half hour of delivery.<sup>5</sup>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, it was observed that the initiation of breast-feeding was done within 30 min of childbirth, which is a good practice.

Prelacteal feeds should not be given but still the majority of mothers gave either sugar water or honey. Discarding the colostrum is still practiced widely. The colostrum is rich in vitamins, minerals, and immunoglobulin, which protects the child from infections<sup>6</sup> Discarding the colostrum and feeding the child with honey or sugar water makes the child vulnerable to infections. Sharma and Kanani <sup>7</sup>have also found similar practices in the community and it is largely influenced by the relatives and the primary care providers during childbirth.

Exclusive breast-feeding should be continued for 6 months.It protects the child from malnutrition, infection, and helps the overall development of child. Prematurely weaning the child may lead to development of infection and may have a long-term effect on the physical growth of the child. The main reason given by the mothers to start early weaning was insufficient milk, which may be due to their early marriage (those who were younger than 19 years old) and early child birth. Studies indicate that adolescents breast-feed less often than adults and they

hold positive and negative attitude toward breast-feeding, which influence decision making and breast-feeding<sup>8,9</sup>.

### **Conclusions**

Breast feeding practices were adequate with initiation within one hour was fine which needs to be increased by promoting importance of breast feeding. Practice of pre-lacteal feeds was high. There is a marked difference between exclusively breastfed percentage in different parts of India.

### **References**

1. Iskander MB, Costello C, Nasution Y. Initiation and duration of breast-feeding in Indonesia. *Asia Pac Popul J* 1990;5(1):89–112.
2. Bautista LE. Factors associated with initiation of breast-feeding in the Dominican Republic. *Pan Am J Public Health* 1997;2(2):107–14.
3. Arifeen S, Black RE, Antelman G, Baqui A, Caulifield L, Becker S. Exclusive breastfeeding reduces acute respiratory infection and diarrhea deaths among infants in Dhaka slums. *Pediatrics* 2001;108(4):E67.
4. Benakappa DG, Raju M, Shivana A, Benkappa AD. Breast-feeding practice in rural Karnataka (India) with special reference to lactation failure. *Acta Paediatr Jpn* 1989;31(4):391–8.
5. Chandrashekar TS, Joshi HS, Binu V, Shankar PR, Rana MS, Ramachandran U. Breast-feeding initiation and determinants of exclusive breast-feeding: a questionnaire survey in an urban.
6. Iarůkov A, Nin’o A, Iarůkova N, Dořcheva E, Kolev D. [The early breast feeding of newborn infants]. *Akush Ginekol (Sofia)* 1992; 31(1):13–5.
7. Sharma M, Kanani S. Grandmothers’ influence on child care. *Indian J Pediatr* 2006;73(4):295–8.
8. Kramer MS, Kakuma R. The Optimal Duration of Exclusive Breastfeeding: A Systemic Review. Geneva, Switzerland: WHO, 2001.
9. Hop LT, Grossr R, Giay T, Sastroamidjojo S, Schultink W, Lang NT. Premature complementary feeding is associated with poor growth of vietnamese children. *J Nutr* 2000;130(11):2683–9.