

## **Breastfeeding good for mum's blood pressure later in life**

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(Medical Xpress)—Breastfeeding is not only good for baby but also good for mums with a new study by the University of Western Sydney finding breastfeeding reduces the chances of mums developing high blood pressure even decades later.

The UWS School of Medicine(opens in new window)Opens in a new



window researchers also found the longer a woman breastfed, the lower her odds of developing <u>high blood pressure</u> before the age of 64.

The published study is featured as the Editor's Choice in the *American Journal of Obstetrics and Gynecology*, an international peer-reviewed scientific journal.

The researchers investigated the relationship between breastfeeding history and the prevalence of high blood pressure in 74,785 Australian <u>women</u> who were aged 45 years and over.

Data for the research was drawn from the 45 and Up Study - a large scale study of healthy ageing involving over 260,000 men and women in NSW, and the largest study of its kind in the <u>southern hemisphere</u>.

Principal researcher on the study, Dr Joanne Lind(opens in new window)Opens in a new window from the UWS School of Medicine, says the findings reinforce the importance of breastfeeding for both child and mother.

"Hopefully this research will add to the discussion between women and their physicians and midwives. Whenever possible, women should be encouraged to breastfeed as long as possible as the protective effect of breastfeeding increases with the length of time breastfeeding," says Dr Lind, a senior lecturer in <u>molecular biology</u> and genetics.

She says that this is the first study to show the link between breastfeeding and high blood pressure within Australian women.

Dr Lind says the reasons for the reduced likelihood of having high blood pressure in women who breastfeed are still unknown, however it is possible that hormones released while breastfeeding provide long term benefits to the mother's <u>cardiovascular system</u>.



"Despite us not fully understanding the <u>protective mechanism</u>, breastfeeding history should now be considered when assessing a patient's likelihood of having high blood pressure in later life," she says.

"Even when we took into account potentially contributing factors such as family history and lifestyle - physical activity and BMI, history of smoking, drinking alcohol - we still found an association between breastfeeding and a lower likelihood of having high blood pressure."

She says the current World Health Organisation (WHO) recommendations encourage breastfeeding for a minimum of six months per child.

"This study provides further support for the WHO recommendations, as both the total amount of time a woman spends breastfeeding in her lifetime, and the length of time she spends breastfeeding each child, are associated with a significant reduction in the likelihood of having high blood pressure," says Dr Lind.

Key findings from the research reveal:

- Women who had breastfed had a lower likelihood of having high blood pressure compared with women who had never given birth, and lower odds of having high blood pressure compared with women who had given birth and not breastfed
- Women aged 45 to 64 years, who had breastfed for more than 6 months in their lifetime, or more than 3 months per child, had a lower likelihood of having high blood pressure
- The longer a woman breastfeeds, the lower her likelihood of having high <u>blood pressure</u> later in life
- The benefits of <u>breastfeeding</u> are diminished after 64 years of age



- 88.9 percent of women who had given birth reported they had breastfed
- Women who were born in Australia, had a present day income greater than \$30,000, consumed greater than 1 alcoholic drink per week, never smoked, had sufficient physical activity levels and had a current BMI in the healthy range, were more likely to have breastfed

**More information:** Lupton SJ, Chiu CL, Lujic S, et al. Association between parity and breastfeeding with maternal high blood pressure. *American Journal of Obstetrics Gynecology* 2013; 208. <u>www.ajog.org/article/S0002-9378</u>%2813%2900155-5/abstract

Provided by University of Western Sydney

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