

## Zambian study finds longer breastfeeding best for HIV-infected mothers

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A new study from Zambia suggests that halting breastfeeding early causes more harm than good for children not infected with HIV who are born to HIV-positive mothers. Stopping breastfeeding before 18 months was associated with significant increases in mortality among these children, according to the study's findings, described in the Feb. 1, 2010 issue of *Clinical Infectious Diseases*, and available online now.

The researchers' initial hypothesis, which proved to be incorrect, suggested that by 4 months of age, children would have passed the critical developmental point when breastfeeding is essential to their survival. However, stopping breastfeeding at 4 months, compared to usual breastfeeding as the child reaches 6 months to 24 months or older, did not decrease [mortality](#) or play a significant role in protecting the child from [HIV](#) transmission.

These findings were consistent with those for mothers not infected with HIV; longer breastfeeding is necessary to protect children against potentially fatal [infectious diseases](#), especially those prevalent in low-resource settings. To prevent postnatal HIV transmission, however, mothers with HIV should be on antiretroviral drugs.

"Our results help support the recent change in the [World Health Organization](#) (WHO) guidelines for prevention of mother-to-child HIV transmission," said study author Louise Kuhn, PhD, of Columbia University in New York City. "The new guidelines encourage postnatal use of antiretrovirals through the duration of breastfeeding to prevent

vertical [mother-to-child] transmission."

**More information:**

<http://www.journals.uchicago.edu/doi/abs/10.1086/649886>

Provided by Infectious Diseases Society of America

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