

# Clinical study supports benefit of breastfeeding support for obese women

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Breastfeeding is best, but what happens when something goes wrong? And why do so many women struggle with this "natural" process even after carefully following all the well-meaning advice they've gotten from their health care providers? Not surprisingly, some women have more difficulty than others and there are many factors associated with experiencing breastfeeding problems - especially in the first week after birth. For example, being African-American, having less than a high school education, and being poor are all associated with suboptimal breastfeeding outcomes. Recent studies also consistently show that being overweight or obese increases the chance that a woman will suffer breastfeeding problems. With burgeoning rates of obesity and a continued public health effort to promote breastfeeding, researchers are scrambling to figure out why overweight women have trouble breastfeeding and what can be done to circumvent this predicament.

On April 25, two talks concerning the potential benefits of intensive [breastfeeding](#) support for [obese women](#) will be presented at the Experimental Biology 2010 meeting in Anaheim. These presentations are part of the scientific program of the American Society for Nutrition, the nation's leading nutrition research society. Scientists from the University of Connecticut, Hartford's Hispanic Health Council, the Hartford Hospital, and Yale University will speak. Their findings provide compelling evidence that peer counseling and support can substantially improve breastfeeding success among these at-risk ladies.

These studies, which were prompted by a sincere desire to "really

understand whether obese women could be more successful at breastfeeding if they have help," were spearheaded by Dr. Donna Chapman, Assistant Director of the Center for Eliminating Health Disparities among Latinos (CEHDL) in Hartford, CT and graduate student Katie Morel. Using a very powerful scientific method employing randomization and intervention groups, Chapman and Morel studied 154 women recruited during pregnancy. All of the women involved in the study were overweight or obese (body mass index  $> 27 \text{ kg/m}^2$ ) and hoping to successfully breastfeed. In general, the study's subjects were predominantly Puerto Rican, low-income, and had less than a high-school education. Whereas all of the participants received standard information concerning the benefits of breastfeeding, 76 of them were randomly chosen to also receive intensive, hands-on breastfeeding support from specially trained peer counselors. For instance, women in the "intervention" group were visited three times in their homes during late pregnancy and 11 more times in the first few months after birth. During these visits, the peer counselors offered helpful advice to offset immediate problems and were able to provide breast pumps to women needing them. The researchers then documented whether there were benefits of the specialized peer counseling on breastfeeding success, infant health and - in a subset of the women - breastfeeding techniques.

As they had hoped, Chapman and her colleagues found that peer counseling substantially improved breastfeeding success. Whereas 16% and 46% of the women in the "control" group had stopped breastfeeding by 2 and 8 weeks postpartum, respectively, only 7% and 33% of the women in the "intervention" group had stopped. They also documented important effects of personalized breastfeeding support on infant nursing behaviors. And to add even more bang for the buck, babies of mothers who received the extra counseling were 3.5 times less likely to be hospitalized during their first 3 months of life. This was mostly due to lower rates of respiratory infections and fever.

Chapman concluded "With help, obese women can be very successful at breastfeeding. And not surprisingly, the more intensive the support, the more successful they can be." This should be reassuring to both women and their care providers who are striving to do the right thing in terms of maternal and infant care- that is, support the myriad benefits of breastfeeding for both mom and baby.

Provided by Federation of American Societies for Experimental Biology

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