

Breastfeeding can reduce risk of childhood obesity

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Children of diabetic pregnancies have a greater risk of childhood obesity, but new research from the Colorado School of Public Health shows breastfeeding can reduce this threat.

Epidemiologist Tessa Crume, Ph.D., MSPH, and fellow researchers tracked 94 <u>children</u> of diabetic pregnancies and 399 of non-diabetic pregnancies from birth to age 13. They evaluated the influence of breastfeeding on the growth of <u>body mass index</u> (BMI), an indicator of childhood obesity.

"There are critical perinatal periods for defining obesity risk, pregnancy and early infant life," Crume said. "We looked at children exposed to over-nutrition in utero due to a diabetic pregnancy to determine if early life nutrition could alter their risk of childhood obesity."

Children of diabetic pregnancies who were breast-fed had a slower BMI growth as they grew older than those who nursed less than six months. A similar pattern emerged for children of non-diabetic pregnancies.

According to Crume, researchers know that children exposed to diabetes or obesity during gestation are at higher risk for childhood obesity and metabolic diseases. Now they know there is a second critical opportunity to normalize BMI growth by encouraging mothers to breast-feed for at least six months, the time recommended by the Academy of Pediatrics.

"Breast-feeding support represents an important clinical and public



health strategy to reduce the risk of <u>childhood obesity</u>," said Crume. She hopes the research will further encourage mothers to breast-feed, especially those who experienced a diabetic pregnancy.

"We can work with pediatricians, obstetricians and the public health community to give these women targeted support immediately following birth," she said.

The research, "The impact of neonatal breast-feeding on growth trajectories of youth exposed and unexposed to diabetes in utero: the EPOCH Study," appears in the latest edition of the <u>International Journal of Obesity</u>. It was conducted as a partnership between the Colorado School of Public Health and Kaiser Permanente of Colorado.

Provided by University of Colorado Denver

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