

# Research paper on breastfeeding research

[Health & Medicine](#), [Addiction](#)



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## **Breastfeeding Research**

### **Introduction**

Breastfeeding is the process where infants feed on breast milk from humans as opposed to other formulations or milk from other animals (WHO, 2009). From the moment of birth, infants have an unconscious system that enables them to draw milk from breasts hence the reason why it is recommended that the milk be the only feed for the first six months (WHO, 2009; Gleeson, 2006). The reason is that breast milk from lactating mothers has been proved to be beneficial both to the mother and the infant. Liu et al, 2006, in their research concluded that breast milk from lactating mothers provides nutrients for strengthening the immunity of an infant. “ Exception of breastfeeding should be in cases when the mother is on drugs or infected with diseases such as Tuberculosis, HIV virus, or human T-lymphotropic virus (Gleeson, 2006)”. Therefore it is important that infants be breast fed so as to strengthen their immunity from common harmful agents such as second-hand smoke from tobacco cigarette.

The purpose of this paper is in proving that breast milk is protective against the effects of passive smoke from tobacco. The research will take place by summarizing an article by Yilmaz et al, 2009, reviewing it in the process to ascertain the positive effects of breast feeding in infants. The study is very important in the sense that second-hand smoke is extremely detrimental to children compared to adults. EPA, 2010, listed the detrimental effects in children as: asthma development; higher SIDS (Sudden Infant Deaths); higher chances of diseases such as bronchitis and pneumonia; and higher chances of middle ear infections.

## **Research**

The research titled the effects of passive tobacco smoke on breast fed infants and non-breast fed infants was carried out by six researchers who are paediatricians from Turkey. Researchers are Yilmaz Gonca, Hizli Samil, Karacan Candemir, Yurdakok Kandriye, Coskun Turgay, and Dilmen Urgur. The main objective of the study was to prove the negative effects of passive smoke on infants and to analyse whether breast-milk would reduce the harmful effects.

The study type employed was cross-sectional and the number of infants involved in the study was 254 between the ages of 6-7 months the age at which children depended on milk only. Questionnaires were given to mothers and they contained blanks to be filled on infant's head circumference, height, body weight, and urine levels. The results of the study were proved by a comparative analysis of factors influencing lower tract infection that recorded an increase rate of 9.1 amongst smoking mothers; a 3.3 decrease rate in infections amongst those breastfeeding; a 15.2 rate increase in

infants ingesting formula milk; and a 40.1 increase rate where there is another smoker apart from the mother. In the same study but this time analysing high tract infection factors, recorded results were 23 for that of smoking mothers; breast feeding rate decreased by 5; early formula feeding rate increased by 23; and other smokers in the family rate increased by 15. Furthermore, the comparative analysis of factors causing Otitis media were analysed and it was found that rate of parents smoking increased by 7.78, and with breast feeding the rate was 5.4.

The researchers concluded their study by ascertaining that, secondary-smoke on infants had negative results on infants in terms of tract infections, Otitis media, and in growing-up (Yilmaz et al., 2009). However, breast feeding protected infants that were exposed from infections proving that if it is impossible to keep children away from secondary tobacco smoke, then breast feeding is the best option.

## **Analysis**

The study was credible and factual in the sense that the researchers were well qualified professionals working in environments that would facilitate conclusive results. The researchers were paediatricians working to attain results that would prove beneficial to mothers intending protect their infants from infections. Credibility is further enhanced by using numerous study specimens which were 254 infants, hence eliminating biases that are associated with few specimens. Furthermore, dividing the infants into four groups, and questioning the mothers in the presence of a physician who had the specific infant's record further improved the credibility and accuracy of the study. The conclusion of the researchers was also coherent with the

expected outcome as was proved by other researchers who performed similar experiments (Gleeson et al., 2006).

It can therefore be concluded that the study was a success and proved that indeed breast feeding was beneficial to an infant more so those below the six month age. The milk is very healthy increasing the immune of infants and as a result decreasing the chances of infants developing infections due to secondary smoke. However, the questions still remain unanswered as to what minimum daily frequency of breast-feeding is essential for an infant below the age of six months to enable them ward off the effects of secondary smoke.

The flaws that can be identified in the study are: possible inaccurate exposure levels of the infants due to Gas Chromatography analysis of urine which is a time consuming and inaccurate procedure; and that it is impossible to distinguish cause and effect from simple association where in this study breastfeeding is associated with lower rates of infections amongst infants but does not concretely prove that lack of the procedure would increase or reduce infections. Therefore it can be recommended that further study on the daily rate of breast feeding required by infants in the ages of between 0-6 months should be done so that a factual data is obtained as to how often smoking and non-smoking mothers should breast feed their infants to properly reduce infections.

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