
SUMMARY POLICY BRIEFING PAPER – JUNE 2005

Impact of early initiation of breastfeeding on neonatal mortality: Implications for meeting the millennium development goals for child survival

The latest research paper from the longstanding collaboration between Kintampo Health Research Centre (KHRC) and the London School of Hygiene and Tropical Medicine (LSHTM)

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Background:

- Breastfeeding promotion (early initiation / exclusive breastfeeding) are key child survival strategies.
- Evidence is lacking about impact on neonatal mortality (deaths in babies aged 1-28 days).
- Only 1 study has shown that exclusive breastfeeding was associated with reduced neonatal deaths.
- No studies have assessed the impact of timing of initiation of breastfeeding on neonatal mortality.

Methods:

- This study took advantage of the 4-weekly surveillance system from a large ongoing trial of vitamin A and maternal mortality in rural Ghana (ObaapaVitA trial, funded by DFID) involving all women of childbearing age and their babies.
- The analysis is based on 10,947 breastfeeding babies born between July 2003 and June 2004 who survived to day 2.

Key findings:

- 30% of the study population initiated breastfeeding after day 1 (late initiation) and 30% were not exclusively breastfed in the neonatal period
- Exclusive breastfeeding was associated with a 4 fold reduction in risk of death when compared to infants who were fed solids or other milk. This confirms previous findings.
- An additional 2.5 fold reduction in risk of death was demonstrated in babies who survived to day 2 who initiated breastfeeding on the first day of life (early initiation) compared to infants who initiated after the first day of life (late initiation). This type of effect of early initiation has never been reported.
- Translating these benefits to the whole population of neonates (breastfed and not breastfed) means that 16% neonatal lives can be saved if all babies were breastfed from day 1, and 22% if breastfeeding started within the first hour
- Neonatal mortality was also shown to increase markedly as delay in initiation increased.

Key messages:

- Interventions to improve early infant feeding can save newborn lives in less developed settings.
- Exclusive breastfeeding is important in the neonatal period.
- Early initiation of breastfeeding has now been shown to have a major additional impact in reducing neonatal deaths. This type of effect has never been reported.
- In less developed settings, promotion of early initiation of breastfeeding should be a key component of neonatal survival programmes; in addition to the promotion of exclusive breastfeeding.
- More effective intervention programmes are needed. We need to understand more about the constraints to early initiation and appropriate delivery channels for intervention.

Funding source:

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 - DFID has had long standing involvement with KHRC. DFID assisted the MoH in Ghana in establishing KHRC in 1994 and has had a major role in the ongoing research programme at KHRC since that time.
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