

PRESS RELEASE

Breastfeeding might prevent asthma symptoms in 20% of infants



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Breastfeeding has multiple proven benefits for infants and mothers, including health, psychosocial, economic and environmental advantages. Therefore the WHO currently recommends exclusive breastfeeding for 6 months and partial breastfeeding for the first year and beyond. One potential effect of breastfeeding which is debated among scientists concerns a possible role in the development of asthma and allergies. While some studies suggested that breastfeeding might protect against asthma, other scientists warned that breastfeeding might even further the development of asthma in children, especially if the mother herself was asthmatic.

Press Office
ers@cedosinternational.com
Communications
communications@ersnet.org

The authors studied this question in a large cohort of children with detailed prospectively collected information on breastfeeding and on development of wheeze and asthma. They examined if the duration of breastfeeding influenced the development of wheezing disorders during infancy and childhood.

The study was performed on 8700 children who had been sampled at random from all children living in the county of Leicestershire, UK. Information on duration of breastfeeding and on asthma and wheeze outcomes was collected prospectively through repeated questionnaires to the parents.

In this cohort, 42% of all children had not been breastfed at all, while 28%, 12% and 18% had been breastfed for a duration of 1-3, 3-6 and >6 months respectively. Main health outcome was the occurrence of wheeze (the key symptom for asthma) when the children were aged 1 year, 3-5 years and 6-8 years. Adjusting statistically for other risk factors and confounders, the authors found that breastfeeding >6 months was associated with a reduced risk of wheeze at age 1 (OR 0.65, 95% CI 0.53-0.78) and at age 3-5 years (0.75 (0.59-0.94) but not at age 6-8 years (1.05 (0.83-1.33)). These results were similar for children of healthy mothers and children of asthmatic mothers. Assuming that the relationship between breastfeeding and asthma found in this study is causal, the authors estimated that wheezing illness could be prevented in about 22% of infants and 12% of toddlers, while the protection did not seem to extend into school age.

In conclusion, this study supports a modest protective effect of breastfeeding against wheeze during infancy and early childhood. Importantly, it showed no evidence for a detrimental effect of breastfeeding in children of asthmatic mothers. Previous studies suggesting this might have suffered from so-called reverse causation: asthmatic mothers, having been taught all the potential benefits of breastfeeding by their midwives and paediatricians, might have tended to extend the duration of breastfeeding as a reaction (rather than a cause) of early asthma symptoms in their child.

Original abstract title and authors

Breastfeeding and the risk of childhood asthma: a population-based cohort study

MPF Strippoli¹, BD Spycher¹, M Silverman² and CE Kuehni¹.

¹Institute of Social and Preventive Medicine, University of Bern, Bern, Switzerland and ²Department of Infection, Immunity & Inflammation, University of Leicester, Leicester, United Kingdom.

Contact

Claudia E. Kuehni

University of Berne - Institute of Social and Preventive Medicine

Finkenhubelweg 11 - 3012 Berne, Switzerland

Phone: +41 (0)31 631 35 07, Fax +41 (0)31 631 35 20

kuehni@ispm.unibe.ch

www.ispm.ch