

UNICEF East Asia and Pacific Regional Office

Facts on breastfeeding

- Infants aged 0–5 months who are not breastfed have seven-fold and five-fold increased risks of death from diarrhoea and pneumonia, respectively, compared with infants who are exclusively breastfed.¹ At the same age, non-exclusive rather than exclusive breastfeeding results in more than two-fold increased risks of dying from diarrhoea or pneumonia.² 6–11-month-old infants who are not breastfed also have an increased risk of such deaths.³
- Artificially-fed infants are at increased risk of the following diseases or conditions: allergies, asthma and respiratory disease, gastro-intestinal diseases, overweight and obesity, diabetes, dental caries, deficient response to childhood immunizations, hypertension and high cholesterol levels and Sudden Infant-Death Syndrome.⁴
- Artificially fed infants also have: a different brain composition than breastfed babies, lower cognitive development observed from 6 months through 16 years of age and lower IQs and mental development scores.⁵
- An analysis of low-cost, highly effective child survival interventions calculated that exclusive breastfeeding in the first 6 months of life and continued breastfeeding for 6–11 months, if increased to 90%, could prevent 13% of deaths among children younger than 5. In comparison to another vital intervention needed to prevent under-5 mortality, only 7% of deaths could be prevented by use of insecticide-treated materials.⁶
- Globally, as many as 1.45 million lives are lost due to suboptimal breastfeeding in developing countries. WHO analysis of childhood death causes qualified suboptimal breastfeeding as one of ‘the most powerful shared risk factors’ and estimated that 1.3 million deaths could be prevented in 42 high-mortality countries by increased levels of breastfeeding among infants.⁷

¹ Victora CG, Smith PG, Vaughan JP et al. Infant feeding and deaths due to diarrhoea: a case-controlled study. *Am J Epidemiol* 1989; 129: 1032-41

² Arifeen S, Black RE, Antelman G, Baqui A, Caulfield L, Becker S. Exclusive breastfeeding reduces acute respiratory infection and diarrhoea deaths among infants in Dhaka slums. *Pediatrics* 2001; 108: E67

³ WHO Collaborative Study Team on the Role of Breastfeeding on the Prevention of Infant Mortality. Effect of breastfeeding on infant and child mortality due to infectious diseases in less developed countries: a pooled analysis. *Lancet* 2000; **355**: 451–55.

⁴ Multiple scientific studies, often more than one reference per disease/condition; available upon request.

⁵ Multiple scientific studies; available upon request.

⁶ *Child Survival II: How many child deaths can we prevent this year?* G. Jones et. al. in the *Lancet Child Survival Series*, 2003

⁷ Deaths and years of life lost to suboptimal breast-feeding among children in the developing world: a global ecological risk assessment – Lauer et al. *Public Health Nutrition*: 9(6), 673-685