

## ABSTRACT

Breastfeeding played a fundamental role on Human specie's survival. Even though it's the most ancient process of feeding an infant, it wasn't allways generally used.

Untill the latest XIX century, young children were mostly breastfeed by their mothers, or, in the impossibility, the resource to wet-nurses. After World War II, there was a strong reduction on breastfeeding's prevalence, intimately connected with profound socio-economic, cultural and especially behavioural modifications.

Both in USA and Europe, the decline on breastfeeding practice happened simultaneously to femalle profissionalization and breast milk substitutes industry proliferation. Many babies had to be fed with cow's milk more or less modified.

On the second half of the XX century, breastfeeding prevalence reached the lowest levels of the history of the Humanity. Since the 70's, several movements have appeared, intending to invert this situation. The values of breastfeeding prevalence have been rising since then, being however apart from the recomendations made by several institutions. In fact, WHO and UNICEF recommend exclusive breastfeeding during the first 6 months of life, and continuously with gradual introduction of complementary food into the second year of live and beyond. This recommendation is however far from being reached.

In general, all Humanity recognizes nowadays that, a suiteble nutrition in the first years of an infant's life, as well as the acquisition of healthy diet habits, contributes in a decisive and unmistakable form to the good level of the child's health and to the prevention of several pathologies in adult's life. Many studies have proved breastfeeding benefits for the child, the mother, the economy of both the country and the families, and also for the ecosystem. For this reason, many countries make breastfeeding promotion programs, and set specific objectives and targets. However, in order to design targets, one has to know the starting point, therefore, it's imperative to create studies that investigate breastfeeding prevalence trends and identify factors associated with premature weaning. To know the current setting on breastfeeding at HSJ's (S. João Hospital) influence area, we design a prospective and descriptive study. The aims of this study were: to determine breastfeeding and exclusive breastfeeding prevalence at discharge and at the end of the 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> and 6<sup>th</sup> month of life; to identify factors that may influence premature weaning. Therefore, 200 mothers were interviewed on the day of hospital's discharge, and then were submit to follow-up for 6 months, with partial mesurings at the end of the 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> and 6<sup>th</sup> month of life. On hospital's discharge day, breastfeeding prevalence was 99,5%, and exclusive

breastfeeding prevalence was 43%. Breast milk substitute's prevalence during hospital's stay was 57%. From the group of babies that were put at the breast after birth, 52,7% were put at the breast within the 1<sup>st</sup> hour of life.

It was possible to follow-up 131 women. The prevalence of breastfeeding was 84,7% at the 1<sup>st</sup> month, 61,5% at the 2<sup>nd</sup> month, 34,4% at the 4<sup>th</sup> month and 21,9% at the 6<sup>th</sup> month. Regarding exclusive breastfeeding prevalence, it was 54,2% at the 1<sup>st</sup> month, 36,1% at the 2<sup>nd</sup> month, 25,7% at the 4<sup>th</sup> month and 15,6% at the 6<sup>th</sup> month. Breast milk substitute's prevalence was 45,8% at the 1<sup>st</sup> month, 64,1% at the 2<sup>nd</sup> month, 74,6% at the 4<sup>th</sup> month and 84,6% at the 6<sup>th</sup> month.

The main factors associated with breastfeeding duration related to the mother were: age, marital status, experience of breastfeeding, perception of insufficient milk, mother's discharged before the baby and the use of nipple shield during hospital stay. The factors related to the newborn were: weight, being placed at the breast within the 1<sup>st</sup> hour of life and artificial milk's use during the 1<sup>st</sup> month of life.

The type of birth did not show to have an association with the duration of breastfeeding, however, the prevalence of artificial milk's introduction both in the 1<sup>st</sup> feed and during the hospital stay was significantly higher in the group of babies born by caesarian ( $p=0,003$  and  $p=0,001$  respectively).

Breastfeeding information given to the women during Prenatal-care did not show to influence breastfeeding duration.

The main reason mothers gave to justify premature weaning was "lack or insufficient milk supply" (65,5 %).

Artificial milk introduction during the first 6 months of life was due mainly by medical indication.

The percentage of women that initiated breastfeeding in this study was the highest found between all studies analysed in our work. Otherwise, exclusive breastfeeding prevalence at discharge was the lowest within the same group.

Breastfeeding and exclusive breastfeeding prevalence in the 1<sup>st</sup> month is considerably good in comparison with all analysed studies. During the follow-up period, these prevalence values progressively decrease, until the 6<sup>th</sup> month, when both, breastfeeding and exclusive breastfeeding prevalence reaches values that are below the one's found by other investigators.

Identifying breastfeeding and exclusive breastfeeding prevalence during the first 6 months of life within the studied population, as well as the factors contributing to premature weaning, will allow to design an intervention strategy to improve breastfeeding and exclusive breastfeeding prevalences during this period of infant's life.