06 - ANALYSIS OF THE PREVALENCE OF EXCLUSIVE AND MIXED BREASTFEEDING IN INFANTS YOUNGER THAN 4 MONTHS ATTENDED IN PRIMARY CARE IN MACAÉ, IN 2013

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doi: 10.16887/85.a1.6

INTRODUCTION

Breast milk (BM) is the ideal food to be offered exclusively to the first 6 months of life in infants (CAMINHA et al., 2010), since it increases the immunity of the child to infections, especially gastrointestinal, respiratory and urinary tract infections, which are most frequent in newborns.

Moreover, the practice of exclusive breastfeeding promotes the prevention of anemia, caries, allergies, and in the long term, provides benefits in declining the risk of a child developing chronic non communicable diseases (CNCD) in adulthood, such as obesity, diabetes mellitus and hypertension (PAULA et al., 2010) and strengthens the bond between mother and son.

According to Paula et al. (2010), a woman's decision to breastfeed her child is connected to her life history and emotional, family, social, cultural and economic aspects. As the decision of early weaning, which is related to social and cultural representations and subjectivity of women.

However, it is recommended by the Ministry of Health that children under six months receive breast milk without any other type of solid or liquid food. From six months onwards, it should be introduced foods that are complementary to breastfeeding, which can be continued until a couple of years of life (BRASIL, 2012; MARINHO et al., 2014).

Mixed or partial breastfeeding is already defined when the child receives breast milk along with other types of milk. The practice of mixed breastfeeding is often adopted due to the presence of maternal doubt or insecurity on the food choice (BRASIL, 2010a).

Human milk (HM) compared to cow milk (CM) shows large differences, especially in protein content. The cow milk has three times more protein than human milk, which overloads the renal function and increases the excretion of calcium in urine. In addition, the cow milk has a potentially allergenic protein, beta-lactoglobulin.

Noteworthy are the industries that seek to create infant formulas similar to human milk. However, none of them is so nutritious and beneficial as human milk (BRASIL, 2012).

According to Caminha et al. (2010), due to changes in global framework that have emerged since the mid-twentieth century as the inclusion of women in the labor market and the expansive growth of food industries, among others, contributed to the replacement of breast milk for industrial baby food.

Data of the Second Survey of the Prevalence of Breastfeeding in the Brazilian capitals and the Federal District, indicate that prevalence of exclusive breastfeeding (EBF) in infants under 6 months was 41.0% for the whole of Brazil and the Federal District capitals. The average duration of EBF was 54.1 days (1.8 months) and the average duration of breastfeeding (BF) 341.6 days (11.2 months) in all Federal District capitals in Brazil. It was found early introduction of water, tea and other sorts of milk - with 13.8%, 15.3% and 17.8% of children receiving these liquids respectively - in the first month of life (BRASIL, 2009a).

In Brazil, policies and programs to encourage the practice of breastfeeding are contributing to the increasing rates of breastfeeding (BRASIL, 2009a) and the decrease in infant mortality rates. Worldwide, breastfeeding reduces up to 13% deaths in children <5 years from preventable causes (BRASIL, 2009b).

The present study describes the prevalence of mixed breastfeeding in children <4 months attended in the Family Health Strategies of the municipality of Macaé - Rio de Janeiro in 2013.

CASUISTRY AND METHODS

A quantitative, descriptive study was conducted with primary base of support Coordination of Technical Area of Food and Nutrition - Catan, Macaé, Rio de Janeiro between January and December 2013, with children <4 months attended in Primary Health Care of Macaé.

The database from DATASUS/SIAB to collect the following variables were used: children <4 months exclusive breastfeeding (EBF); children <4 months with mixed breastfeeding (MBF); total number of children <4 months attended in the Family Health Strategies, months of 2013.

Initially, absolute data were collected and subsequently calculated monthly percentage of the variables on MBF and EBF selected by the total number of children <4 months. We used the Microsoft Excel 2010 software for the data analysis.

RESULTS AND DISCUSSION

Data from 3752 children <4 months attended in Primary Health Care in the city of Macaé during the year 2013 were analyzed.

According to figure 1, it can be seen that in January (n=295), the prevalence of EBF and MBF were 73.9% and 24.4%, respectively. In February (n=282), 72% and 24.8%, respectively. In March (n=279), 73.5% and 26.5%, respectively. In April (n=291), 73.2% and 24.7%, respectively. In May (n=334), 77.2% and 22.5%, respectively. In June (n=358), 77.1% and 20.4%, respectively. In July (n=363), 76.3% and 22.6%, respectively. In August (n=333), 72.7% and 26.4%, respectively. In September (n=285), 73.0% and 26.3%, respectively. In October (n=309), 76.1% and 23%, respectively. In November (n=276), 88.6% and 9.8%, respectively. In December (n=275), the prevalence of EBF and MBF were 87% and 10.7%, respectively.

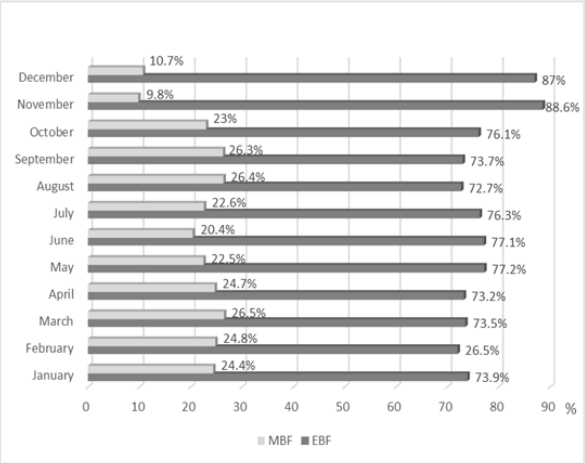

Figure 1. Percentage distribution of exclusive breastfeeding (EBF) and mixed breastfeeding (MBF), by month, of children under 4 months attended in Primary Health Care in the city of Macaé, 2013.

In Brazil, the increase in breastfeeding rates contributed to the decrease in infant mortality rates. Worldwide, breastfeeding reduces up to 13% deaths in children <5 years from preventable causes (BRASIL, 2009a).

In our study we found that the practice of exclusive breastfeeding during the year 2013, increased by 16.6% between the month of lower adherence (February, 2013 to 72%) and the month with the highest adherence (November, 2013 to 88.6%), reaching levels around 70%, however the desired goal is 100% (BRASIL, 2010a).

The analyzed data are from infants <4 months since the health information system DATASUS/SIAB, the available data from breastfed children are aged under four months, which prevents them from knowing the reality of EBF in children under 6 months. Another focus is the coverage of Family Health Strategies, which corresponds to 40% of the total population of the city attended in primary health care and cannot extrapolate these results to the entire population of infants under 4 months.

However, it is noteworthy that the municipality Macaé has encouraged the practice of exclusive breastfeeding, such as the National Breastfeeding Week, which takes place annually in the city to bring the population clarification and knowledge on the topic. Therefore, it is essential to continue the incentive of exclusive breastfeeding for the indicators to reach high levels.

Carvalhaes et al. (2007) conducted a cross-sectional study with data obtained in the first stage of the campaign Multi vaccination 2004, with children younger than 4 months who came accompanied by their mothers residing in Botucatu-SP. The study aimed to identify factors associated with exclusive breastfeeding (EBF) and the reasons given by mothers to introduce complementary feeding in the first 4 months of life. A total of 380 mothers, representing 92.2% of vaccinated children under 4 months were interviewed. The authors found that the EBF was performed in 38.0% of children; 33.4% consumed cow milk; 29.2%, tea, and 22.4% water.

Silva and Guedes (2011) in their exploratory and longitudinal research conducted in the city of Maceió, between August 2008 and November 2009, investigated the duration of exclusive breastfeeding of preterm and full term infants. In their findings, they found that 61.6% of the studied children were weaned at younger than 06 months. Furthermore, 43.9% (n=36) of preterm newborns, and only 33.3% (n = 30) of full term newborns received EBF for 06 months or more.

The survey of prevalence of breastfeeding in Brazilian municipalities, developed by the Ministry of Health, in 2008, held in 227 municipalities with the participation of approximately 120,000 children younger than one year across the country, found that in Rio de Janeiro, 65.6% (n=2461) of newborns in the first hours of life, 40.7% (n=1269) of children under 6 months of age and 58.3% (662) of children 9-12 months received EBF (BRASIL, 2010b).

It is consensus that the practice of exclusive breastfeeding until six months of life provides numerous benefits to the child and the mother. According to UNICEF (2014), EBF until six months of life can prevent approximately 1.3 million annual deaths of children under five years of age. There is a large basis of the recommendation of the World Health Organization (WHO) to follow EBF until 6 months and continuing breastfeeding up to 2 years or more, accompanied by complementary food. However, despite national efforts and health professionals operating on the network, EBF rates are below recommended.

The Second Survey of the Prevalence of Breastfeeding in Brazilian Federal District Capitals found that over a quarter of children between 3 and 6 months already consuming salty food (20.7%) and fruits (24.4%) (BRAZIL, 2009a), which is not recommended at this stage.

Thus, several actions have been proposed with the aim of rescuing and enhance the practice of breastfeeding, either directly or indirectly as some women's rights such as maternity leave (Federal Constitution of 1988, Article 7, Paragraph XVIII) which ensures that the pregnant employee can stay at home for 120 consecutive days without any loss, right to pause to breastfeed her child until six months of life even during the workday, and other public policies that aim to encourage the practice of breastfeeding (BRASIL, 2009a).

Currently, the encouragement of primary care breastfeeding occurs through the Breastfeeding and Alimentary network. The Strategy of Breastfeeding and Feeding Brazil (EABB), is a strategy of the Ministry of Health (BRASIL, 2014), resulting from the integration of Brazil Breastfeeding Network and the National Strategy for Healthy Complementary Feeding (Enpacs) (BRASIL, 2010a), in 2012, to strengthen and encourage the promotion of breastfeeding and healthy eating for children under two years under the Unified Health System (SUS), through the qualification of professionals working in Basic Health Units (BHU).

In this sense, it is important that actions to the practice of exclusive breastfeeding and the introduction of complementary feeding are timely incorporated by health professionals from Macaé to make it possible to get to 100% of this practice in our society.

CONCLUSION

The practice of exclusive breastfeeding during 2013 reached levels close to 70%, but still far from the desired goal which is 100%. It is understood that it is fundamentally important to continue encouraging the practice of breastfeeding in the population, so that the indicators reach desirable levels for public policies facing the topic studied.

THANKS

We thank the coordinator of Catan, the nutritionist Carine Lima, for authorizing the collection, analysis and dissemination of results and their technical team of nutritionists, Carolina Pires da Costa, Marcia Silver Pires Maria Ramalho, Carine Santos Tavares de Lima, Michelle Escobar for supporting the work.

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ANALYSIS OF THE PREVALENCE OF EXCLUSIVE AND MIXED BREASTFEEDING IN INFANTS YOUNGER THAN 4 MONTHS ATTENDED IN PRIMARY CARE IN MACAÉ, IN 2013.

ABSTRACT

Feeding practices of children in their first months of life are crucial for the construction of eating habits, and breast milk the essential nourishment for the growth and development of infants up to 6 months. This study aimed to describe the prevalence of mixed breastfeeding in children <4 months attended in Family Health Strategies of the municipality of Macaé - Rio de Janeiro, in 2013. We conducted a descriptive, quantitative study of secondary basis, between January and December 2013, with children <4 months attended in Family Health Strategies. The database from SIAB/SUS – DATASUS were used to collect the following variables: children <4 months exclusive breastfeeding (EBF); children <4 months with mixed breastfeeding (MBF); children <4 months attended in Family Health Strategies; and months of the year. We used the Microsoft Excel 2010 software for data analysis. Data from 3752 children <4 months attended in Family Health Strategies of the municipality of Macaé during the year 2013 were analyzed. In January, the prevalence of EBF and MBF were 73.9% and 24.4%, respectively. In December, the prevalence of EBF and MBF were 87% and 10.7%, respectively. The practice of EBF during 2013 reached near 70%.

KEYWORDS: Breastfeeding, Exclusive Breastfeeding, Child Health.

ANALYSE DE LA PRÉVALENCE DE L'ALLAITEMENT MATERNEL EXCLUSIF ET MÉLANGÉS DANS NOURRISSONS DE MOINS DE 4 MOIS DE FRÉQUENTATION EN SOINS PRIMAIRES EN MACAÉ, EN 2013.

RÉSUMÉ

Les pratiques d'alimentation des enfants dans leurs premiers mois de vie sont cruciales pour la construction d'habitudes alimentaires, et le lait maternel de la nourriture essentielle pour la croissance et le développement des nourrissons jusqu'à 6 mois. Cette étude visait à décrire la prévalence de l'allaitement mixte chez les enfants <4 mois assisté dans les stratégies de santé familiale de la municipalité de Macaé - Rio de Janeiro, en 2013. Nous avons effectué une étude descriptive, quantitative de base secondaire, entre Janvier et Décembre 2013, avec les enfants <4 mois suivis dans les stratégies de santé de la famille. La base de données de SIAB/SUS - DATASUS ont été utilisés pour recueillir les variables suivantes: les enfants <4 mois d'allaitement exclusif; enfants <4 mois avec l'allaitement mixte; enfants <4 mois de fréquentation dans les stratégies de santé de la famille; et mois de l'année. Nous avons utilisé le logiciel Microsoft Excel 2010 pour l'analyse des données. Les données de 3752 enfants <4 mois suivis dans les stratégies de santé familiale de la municipalité de Macaé cours de l'année 2013 ont été analysées. En Janvier, la prévalence de d'allaitement exclusif et l'allaitement mixte étaient de 73,9% et 24,4%, respectivement. En Décembre, la prévalence de d'allaitement exclusif et l'allaitement mixte étaient 87% et 10,7%, respectivement. La pratique d'allaitement exclusif en 2013 a atteint près de 70%.

MOTS-CLÉS: L'allaitement maternel, L'allaitement Maternel Exclusif, La Santé des Enfants.

ANÁLISIS DE LA PREVALENCIA DE LA LACTANCIA MATERNA EXCLUSIVA Y MIXTOS EN BEBÉS MENORES DE 4 MESES ATENDIDOS EN ATENCIÓN PRIMARIA EN MACAÉ, EN 2013.

RESUMEN

Las prácticas de alimentación de los niños en sus primeros meses de vida son cruciales para la construcción de hábitos alimenticios y la leche materna el alimento esencial para el crecimiento y desarrollo de los bebés de hasta 6 meses. Este estudio tuvo como objetivo describir la prevalencia de la lactancia mixta en niños <4 meses atendidos en Estrategias de Salud de la Familia del municipio de Macaé - Río de Janeiro, en 2013 se realizó un estudio descriptivo, cuantitativo de título secundario, entre enero y diciembre de 2013, con niños <4 meses atendidos en las Estrategias de Salud Familiar. La base de datos del SIAB/SUS - DATASUS se utilizaron para recopilar las siguientes variables: niños <4 meses de lactancia materna exclusiva (LME); niños <4 meses con lactancia mixta (LM); niños <4 meses atendidos en las Estrategias de Salud Familiar; y los meses del año. Se utilizó el programa Microsoft Excel 2010 para el análisis de datos. Se analizaron los datos de 3.752 niños <4 meses atendidos en las Estrategias de Salud Familiar del municipio de Macaé durante el año 2013. En enero, la prevalencia de la lactancia materna exclusiva y LM fueron 73,9% y 24,4%, respectivamente. En diciembre, la prevalencia de la lactancia materna exclusiva y LM eran 87% y 10,7%, respectivamente. La práctica de la lactancia materna exclusiva durante 2013 alcanzó cerca de 70%.

PALABRAS CLAVE: La Lactancia Materna, La Lactancia Materna Exclusiva, La Salud Infantil.

PREVALÊNCIA DE ALEITAMENTO MATERNO EXCLUSIVO E MISTO NA ATENÇÃO BÁSICA DE MACAÉ, EM 2013.

RESUMO

As práticas alimentares da criança nos seus primeiros meses de vida são fundamentais para a construção dos hábitos alimentares, sendo o leite materno oferecido de forma exclusiva, o alimento essencial para o crescimento e desenvolvimento do lactente até os 6 meses. Objetivou-se descrever a prevalência de aleitamento materno e misto em crianças menores de 4 meses assistidos nas Estratégias de Saúde da Família do município de Macaé - Rio de Janeiro, no ano de 2013. Realizou-se um estudo descritivo, quantitativo, de base secundária, no período entre janeiro e dezembro de 2013, com crianças menores de 4 meses assistidas nas Estratégias de Saúde da Família. Utilizou-se a base de dados do SIAB/SUS – DATASUS/Ministério da Saúde, para coletar as seguintes variáveis: crianças menores de 4 meses em aleitamento materno exclusivo (AME); crianças menores de 4 meses em aleitamento materno misto (AMM); crianças menores de 4 meses assistidas nas Estratégias de Saúde da Família; e meses do ano. Utilizou-se o software Microsoft Excel 2010 para a análise dos dados. Foram analisados dados de 3.752 crianças menores de 4 meses assistidas nas Estratégias de Saúde da Família do município de Macaé ao longo do ano de 2013. No mês de janeiro, as prevalências de AME e AMM foram de 73,9% e 24,4%, respectivamente. Em dezembro, as prevalências de AME e AMM foram de 87% e 10,7%, respectivamente. Conclui-se que a prática do AME ao longo do ano de 2013 alcançou percentuais acima de 70%.

PALAVRAS-CHAVE: Aleitamento Materno, Aleitamento Materno Exclusivo, Saúde da Criança.