

Breastfeeding OUTLOOK



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Editor

Force-Fed Foolishness

When the American Academy of Pediatrics (AAP) issued its recent statement on Sudden Infant Death Syndrome (SIDS), they apparently expected parents and providers to read the statement and swallow it whole. Most did. Me? I'm still choking. Now, I'm going to chew it up a little.

The AAP folks admit that the cause of SIDS is unknown, but that doesn't stop them from telling us what to do to prevent it. Fortunately for them, the name "SIDS" stuck a few decades ago. It sounds like a diagnosis. And we all know who does diagnosis and treatment: doctors. If we went back to calling it "crib death" – a name without any medical ring to it – the AAP would have a harder time force-feeding us their culturally-biased statement that parents "must" put kids in cribs. It would even imply that the crib is the culprit or, at least, one of the culprits. (Our belief about their crib mandate shaken, perhaps we would challenge them on pacifiers, too.)

Infants have slept with mothers since the dawn of time; they slept on their backs and breastfed throughout the night. How do I know? Well, Maslow's Hierarchy of Needs sensibly identifies the most basic human needs, namely *survival* (food, oxygen, warmth), followed by *safety*, then *love* and *affection*. I don't see how cribs and pacifiers meet any of these needs. On the other hand, breastfeeding and co-sleeping can easily meet all of them. Although I am neither a doctor nor an anthropologist, I shamelessly posit that the species would never have survived if cribs and pacifiers were needed to avoid death.

Failing to recognize that the needs of breastfed infants are different from formula-fed infants is an ongoing problem. For years, pediatricians have based their weight-gain expectations for breastfed infants on expectations derived from other infants. Now, the AAP justifies its SIDS recommendations by citing cohort studies without true "cohorts." Take a look at the studies that they cite. Did pacifiers reduce the risk of SIDS for *breastfed* infants? Did sleeping in cribs reduce the risk of SIDS for *breastfed* infants? And why don't they recognize the growing body of evidence that sleep patterns, heart rates and metabolism are changed when infants are fed formula¹, ² or cow's milk³? Might that explain why formula-fed infants sleep more soundly (and may be at greater risk of SIDS)?

The AAP is going to have a tougher time feeding me its next statement. I'm still choking on this one.

1. Butte NF, et al. Sleep organization and energy expenditure of breast-fed and formula-fed infants. *Pediatr Res.* 1992;32:514-519.
2. Butte NF, et al. Heart rates of breast-fed and formula-fed infants. *J Pediatr Gastroenterol Nutr.* 1991;13:391-396.
3. Haisma H, et al. Complementary feeding with cow's milk alters sleeping metabolic rate in breast-fed infants. *J Nutr.* 2005;135:1889-1895.

