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WORDS KAYE MAGSANOC

ALL MOMS DREAM of breastfeeding their kids. Who doesn't? That moment of latching, of linkage, of looking into the eyes of your baby ... it's a peaceful moment full of faith and love, symbolizing the strongest bond of all --- the bond between mother and child. Many consider breastfeeding a phenomenal human practice, since it not only strengthens the bond between mother and child, it is also said to be the perfect source of the perfect food, the perfect medicine and the perfect source of height and IQ-boosters: breastmilk.

But not all moms are lucky enough to be given this chance. I wasn't. Basti was left in the NICU for two weeks after being born with pneumonia. Even though I did my best, I wasn't there every moment of each day that he stayed there. When I wasn't there breastfeeding him, he would be given my expressed milk in feeding bottles. This happened more often than our breastfeeding-and-bonding time. By the time I took him home, he simply refused to latch on, no matter how hungry he was.

I felt bad. I felt like a bad mom, a mom who didn't breastfeed her child. How else can I give him excellent nutrition if I didn't breastfeed him?

Good thing there was formula milk to turn to. Although made from cow's milk, it is fortified to suit human needs, and to perform the same functions of human milk as much as possible. Based on experience, I've learned that, more than any other effect fortified milk may have on our babies, the immune-boosting effect is the most important of all.

A few weeks ago, I had the chance to meet Professor Sunil Sazawal, an Associate Professor at the Department of International Health, Bloomberg School of Public Health in John Hopkins University. With him was Rebecca Cannan, a nutritionist whose key interest surrounds the central role of nutrition in promoting the healthy growth and development of children.

Over lunch, Professor Sazawal enlightened me about a study he conducted in India that proves that fortified milk powder prevents childhood diseases. This study was published by the British Medical Journal last November 2006.

Prof. Sazawal, tell us about the study you conducted.

Dr. Sazawal: First of all, let me stress that, for the first six months of life, breastmilk should be the only food all children must have. It is only after six months that supplementary feeding may be introduced.

I conducted my study in Delhi. We call it a double-blind controlled trial, a very stringent method of evaluating an intervention. The 633 children aged between 12 to 36 months who were involved in the trial, did not know which child was getting which intervention. That was the essence of it.

What was the objective of the study?

Dr. Sazawal: We wanted to evaluate the effect of fortifying milk or adding micronutrients like zinc, iron and selenium. Zinc and iron are the most common micronutrients that children lack globally, but are important in



preventing childhood diseases like diarrhea and pneumonia. These two diseases cause the highest morbidity in this age group.

I was told that pneumonia is the number one cause of death among Filipino children, and diarrhea is number three.

It is said that mother's milk adjusts miraculously to the nutritional needs of her child. If so, won't she be producing these same micronutrients if her child needs them?

Dr. Sazawal: Mothers can breastfeed their children for as long as possible, but introduction of other sources of nutrition after six months is a must. Breastmilk will no longer be sufficient at this point. The amount of breastmilk goes down as the lactation period increases, no matter what the mother takes. Breastmilk production is driven by hormones from the pregnancy, so if you are no longer pregnant, the production starts to slow down.

But the volume of milk that the child needs is still increasing. A mother's breastmilk production may not be able to keep up with the increase in the amount of her child's breastmilk consumption.

There are moms who have problems with making their child latch on to their breast. Is this an excuse to give the child formula milk earlier than six months?

Dr. Sazawal: It is more advisable for the mom to extract her milk and feed her milk to her baby through a feeding bottle. She should do this for as long as she can.

But it is understood that, sometimes, in very rare situations, even this is not possible. This is why instant formulas are out there.

But it is very important to note that, for the first six months of life, breastmilk is the best for baby. It is not affected by the fact that the mother or the baby is sick. **Continue breastfeeding nonetheless. Only if everything else fails can the mother turn to formula milk.**

Do the iron and zinc in fortified milk come from natural sources?

Dr. Sazawal: There is no such thing as synthetic iron or zinc because these are minerals. There are no synthetic ways of producing them. Thus, iron and zinc are natural. Even if they are metals, they are very important in the body. Zinc is a complement of 200 enzymes in the body, starting with the DNA application. If you have no zinc in your body, your cells won't grow or multiply. And remember that your body can't make zinc. You need sources for it. Iron is the most important component of hemoglobin. It helps bring oxygen to the heart. Without this, a human can't live.

Rebecca: Children's bodies absorb iron and zinc and these two help their bodies fight diseases and infection. There's no need for mothers to worry.

Can obese babies still take fortified milk? Or should they resort to drinking non-fat milk?

Dr. Sazawal: Fortified is different from non-fat. A fortified milk formula can be non-fat. Fat and micronutrients are not synonymous.

At the moment, there is not scientific evidence that if you give non-fat milk to your children, they will not be obese when they grow up. Fat plays an important role in soluble vitamin-absorption.

Rebecca: The fat in fortified milk is so low. It's only three percent. It's better to give an obese child regular fortified milk, and increase his physical activity. This will stimulate your child's metabolism.

Things you don't know about your formula milk

Among children aged 1 to 3 years, the clinical study of Sazawal found that consumption of fortified milk was associated with:

- 18% lower incidence of diarrhea

- 26% lower incidence of acute lower respiratory infections (like pneumonia)
- 15% fewer days sick with severe illnesses
- 4% lower use of antibiotics

Among children aged 1 to 2 years, the study found that consumption of fortified milk was associated with:

- 16% lower incidence of diarrhea
- 47% lower incidence of acute lower respiratory infections (e.g. pneumonia)
- 36% fewer days sick with severe illness

Among children aged 2-3 years the study found that consumption of fortified milk was associated with:

- 20% lower incidence of diarrhea



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