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**SUPPORT NEEDED FOR NON-BREASTFEEDING PARENTS**  
*AMA Infant Feeding and Parental Health 2017 Position Statement*

New parents who are unable or choose not to breastfeed their infant need support and help to ensure their child receives optimal nutrition, the AMA said today.

Releasing the AMA’s *Infant Feeding and Parental Health 2017 Position Statement*, AMA President, Dr Michael Gannon, said that breastfeeding is the optimal infant feeding method, with current Australian guidelines recommending exclusive breastfeeding until six months.

But mothers and other caregivers who cannot or choose not to breastfeed must have access to appropriate care and assistance to formula-feed their child, Dr Gannon said.

“There’s no doubt that breast is best, and in Australia, 96 per cent of new mothers start out breastfeeding their baby,” Dr Gannon said.

“Babies who are breastfed are at less risk of infection, sudden infant death syndrome, and atopic diseases like asthma, eczema, and hay fever.

“The maternal antibodies in breastmilk help to protect infants before they are old enough for their first childhood vaccinations.

“Babies who are breastfed are less likely to become obese or develop type 2 diabetes as children and teenagers, and are less at risk of high blood pressure.

“Breastfeeding helps mothers bond with their babies, recover from childbirth, and regain their pre-pregnancy body weight, and it is also associated with reduced risk of some cancers.

“Yet we know that many mothers do not persist with breastfeeding. Only 39 per cent of infants are exclusively breastfed to four months, and just 15 per cent to six months.

“This highlights the need for more support to allow mothers to extend the duration of their breastfeeding.

“Women can be discharged from hospital as early as six hours after giving birth, long before their milk has come in. Women should only be discharged when they are physically and emotionally ready to return home, recognising that each family will have unique needs.”

While breastfeeding is the optimal feeding choice, it may not be the best choice for all families, and there must be a balance between promoting breastfeeding and supporting mothers who cannot or choose not to breastfeed.

“Mothers may feel a sense of guilt or failure, and it is important that their GPs and other medical practitioners reassure them about the efficacy and safety of formula feeding, and work to remove any stigma,” Dr Gannon said.

“Although it is different in composition, infant formula is an adequate source of nutrients. Parents seeking to bottle feed their infants need support and guidance about how much and how often to feed their infant, how to recognise when to feed their infant, and how to sterilise and prepare formula.

“Hospital-based milk banks provide a valuable source of nutrients for infants with a clinical need for donor human milk, such as those who are premature or underweight.

“Informal breastmilk sharing arrangements that occur without medical oversight pose significant risks to infant health, including the transmission of harmful bacteria or communicable diseases.

“Parents should be educated about the potential harms of sourcing unpasteurised and untested milk for their infants, to ensure they are able to make informed decisions.”

The Position Statement calls for doctors, medical students, and other health professionals to be appropriately trained and educated about the benefits of breastfeeding, including how to support mothers who experience difficulties with breastfeeding.

It also notes that parents should be aware that anatomical difficulties, such as colic, tongue tie, or feeding and swallowing disorders, occur in both breast- and formula-fed infants. Parents should consult their general practitioner for support and referral to appropriate medical care.

The Position Statement says that postnatal depression is estimated to affect one in seven new mothers in Australia, and women who are unable to breastfeed in line with their intentions may be at increased risk.

However, there is limited access to specialised mother and baby units, and women who are waiting to access these services need to be monitored and supported in the interim.

The AMA’s *Infant Feeding and Parental Health 2017 Position Statement* can be read in full at <https://ama.com.au/position-statement/infant-feeding-and-parental-health-2017>

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