# Breastfeeding Status and Marketing Practices of Baby Food Manufactured in Nursing Homes

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A Bill on Infant Foods entitled "The Infant Milk Substitutes, Feeding Bottle and Infant Foods (Regulation of Production, Supply and Distribution) Bill 1992" was passed by the Parliament(1). This Bill prohibits free and low cost supply of infant formula to maternity units. The present study was undertaken to find out the breastfeeding status and marketing practices of baby food manufacturers in Private Nursing Homes.

#### Material and Methods

This study was conducted in 7 private nursing homes of Kanpur between January 26 and 28, 1993. Information was collected on a pretested proforma.

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#### Results

On an average 615 new born infants were born in seven nursing homes every month. After birth, babies were given back to the mothers immediately in 2 nursing homes, within 4 hours in 2 nursing homes and between 4 and 24 hours in 3 nursing homes. During separation period, babies were kept nil orally in two nursing homes, while plain water, glucose water and formula milk were used as prelacteal feeds in other 5 nursing homes.

In the nursing homes, 52.4% mothers (45.1% mixed feed and 7.3% bottle fed) were giving infant formula. Most common brands of milk formula used were Lactogen-I and Milk Care followed by Raptakos special infant food, Dexolac Special Care and Lactodex.

Six out of seven nursing homes were not aware of government policy and recent bill that prohibits free or low cost supplies to hospitals. Administration of all the seven hospitals did not communicate this Government policy in writing to the Department responsible for buying infant formula. Four nursing homes were accepting low cost supplies of infant milk formula from companies and in other three nursing homes, parents had to purchase it from medical stores situated either inside or outside the nursing homes. Average use of milk formula in nursing homes ranged from 2-50 kg/month.

Four nursing homes were accepting Lactogen-I, Milk Care and Dexolac Special Care from companies at low cost. Lactogen-I and Dexolac Care was supplied at about half (48.3-50.1%) the market price, while Milk Care was supplied at 86.7% and 51.7% of the market price in two nursing homes. One nursing home was buying Milk Care from market at the market price. Nestle

(Lactogen-I) and Dalmia Industries Ltd. (Milk Care) had monopoly in formula milk prescription in four and three nursing homes, respectively. In three nursing homes, Raptakos Special Infant Food, Dexolac Special Care and Lactodex were given to babies in addition to Lactogen-I or Milk Care.

Milk formula was in stock in five nursing homes at the time of study, while in other two nursing homes there was no system to keep the formula in stock. On an average, there was no difference in stock in last two months in these five nursing homes. No nursing home was supplying free or low cost infant formula to mothers at the time of discharge. Most common technique used by companies to maintain market share, other than low cost supply, was increased number of the calls to the hospitals and doctors by company personnel.

#### **Discussion**

Although infant food manufacturers claim that they are committed to improve the infants' health but they are primarily interested to promote sale of their products and earn maximum profits. Therefore, they do not care for international Code of Marketing of Breastmilk Substitutes(2), Indian National Code for Protection and Promotion of Breastfeeding(3) and other provisions(4). In the 39th World Health Assembly (WHA) resolution, it is explicitly mentioned that "to ensure that the small amounts of breastmilk substitutes needed for the minority of infants who require them in maternity wards and hospitals are made available through the normal procurement channels and not through free or subsidized supplies" (5). "The State of the World's Children 1993" report, which states that the International Association of Infant Formula Manufacturers, of which Nestle as a member, agreed that its members will stop all marketing to hospitals and maternity homes by the end of 1992(6). But Nestle India Ltd., Dalmia Industries Ltd. and Wochardt Ltd. were supplying low cost infant formula to nursing homes. Hospital practices now-a-days also frequently are not conducive to breastfeeding and in fact detrimental to it. Doctors have allowed the manufacturers of infant foods to influence the way in which they work and also think(7). The indifferent and casual attitude of health professionals combined with confused attitude of mothers (whether to breastfeed or bottle feed) results in a prescription of infant formula.

So far promoting and supporting breastfeeding and to control wrong marketing practices of companies multisectoral efforts should be made. Government should increase the awareness about the Bill on Infant Foods(1), International Code(2), Doctor's Declaration for Breastfeeding(7), Innocenti Declaration(8), and Ten Steps to Successful Breastfeeding and the concept of Baby-Friendly Hosptial(9), through mass media. Doctors and nursing homes should not cooperate in any act which may discourage successful breastfeeding especially during the first week after birth. This period is very crucial for successful mother infant bonding and initiation of exclusive breastfeeding. Because once bottle feeding is started it is very much difficult to change it into exclusive breastfeeding. We, therefore, request that health professionals should prescribe top feeding whenever it is absolutely necessary and that too not bottle feeding but feeding the baby with cup(7) and nursing homes should not accept low cost supply of infant formula.

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工工管理部分的 海流原数 植虫

## **Lactational Failure**

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HOTELWAR

Many concerned workers report a declining trend in breastfeeding in urban India(1-3). Instigated by a similar trend in our hospital we surveyed the causes of

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Received for publication: September 1, 1992; Accepted: May 25, 1993 lactational failure by interviewing 90 mothers who had initiated top feeding before completion of four months. We report some of the significant sociodemographic factors that may have been influential in causing lactational failure.

#### Material and Methods

Five hundred mothers who attended the hospital outpatient services either for immunization or for any ailment of their infants were studied. Of the 500 mothers, 90 mothers who had either stopped breastfeeding or had initiated top feeding in babies before four months of age were taken as subjects and interviewed. Their answers were recorded in standardized questionnaires. The number of infants in the study were ninety two as two mothers had twins. The time of cessation of breastfeeding and reason for stopping breastfeeding were noted. All the mothers were offered proper lactational advice and