

(unpublished data) between both inter- and intraraters with supine X-ray ($k=0.6$) and poor inter- and intra-rater agreement on lateral X-ray ($k=0.29$).

3. We agree with the reader regarding the possibility of migration of the catheter, and we did not collect data for this time duration. The average turnaround time

for chest X-ray is approximately 30 minutes in our unit, and all X-rays were taken within an hour of insertion.

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Commercializing Donor Human Milk – Nip it in the Bud

According to World Health Organization, if mother's own milk is unavailable or insufficient, the next best option is to use pasteurized donor human milk (DHM) [1]. Given the high rate of preterm births in the country and level of malnutrition that ensues in the postnatal growth of preterm infants, there is an urgent need to establish Human milk banks (HMBs) across the country, especially in large neonatal units. Though the first HMB of India was started in 1989 at Mumbai, the growth of HMBs has been at a much slower rate than the demand. Nevertheless, there has been renewed interest in this area over the past few years, and now more than 50 HMBs are operational in the country [2,3], and a majority of them are in the public sector. As per National Guidelines on Lactation Management Centers in Public Health Facilities, donation should be done freely and voluntarily without any monetary benefits to the donor and with an understanding that the donated milk may be used to feed the baby of another mother admitted in the hospital free of any cost [4].

In this context, it is disturbing that there is a move to commercialize DHM in the country. Certain companies are clandestinely trying to market DHM as mother's milk fortifier and also sell DHM for a price of 300 rupees for 15 ml [5]. The fact is that DHM is obtained free from mothers, and is pasteurized and marketed with vested commercial interest. At a phase when lactation management centers are being streamlined, this commercial perspective is an obstacle that can derail the

progress and functioning of HMBs across the country, which are solely based on the principle of voluntary human milk donation. If mothers start selling their milk or companies indirectly do so, HMBs will run dry and infant formula use will increase. There is also a risk that DHM may be used for non-scientific indications, excluding the needy preterm neonates. Stringent laws should be enacted urgently to stop commercialization of DHM. All stakeholders, including Ministry of Health and Family Welfare, Government of India, Indian Academy of Pediatrics, National Neonatology Forum, and Breastfeeding Promotion Network of India, should step-in and act.

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