

Evidence Update

Maternal Health Series

Does additional support for breastfeeding help women to continue breastfeeding?

Support provided by professionals or lay people increases the duration of breastfeeding.

Inclusion criteria

Studies:

Randomized and quasi-randomized controlled trials.

Participants:

Women breastfeeding and pregnant or postpartum women intending to breastfeed their babies.

Intervention:

Support additional to usual care, delivered by health professionals or lay people, intending to promote continuation of breastfeeding.

Control: usual care.

Outcomes:

Primary: continuation of any breastfeeding.

Secondary: continuation of exclusive breastfeeding.

Results

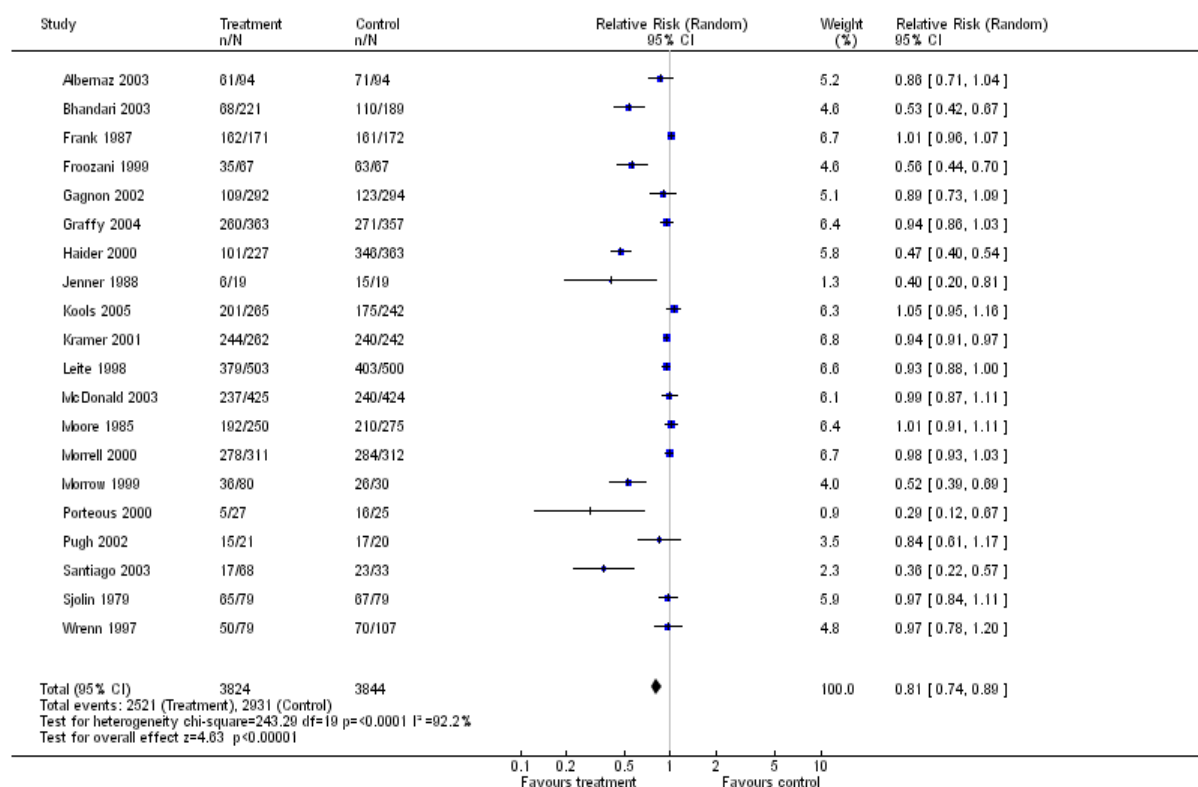
- Thirty-four trials involving 29,385 breastfeeding mothers from 14 countries were included; 15 trials adequately concealed allocation.
- Compared with usual care, women receiving any additional support (by a professional or lay person) were less likely to stop any breastfeeding (relative risk 0.91, 95% confidence interval 0.86 to 0.96; 9997 participants, 28 trials) or exclusive breastfeeding (RR 0.81, 95% CI 0.74 to 0.89; 7668 participants, 20 trials) at the last assessment up to six months after birth.
- Fewer women receiving professional support, compared to usual care, stopped exclusive breastfeeding by the last assessment (RR 0.91, 95% CI 0.84 to 0.98; 4133 participants, 12 trials), but the effect on any breastfeeding was not significant (5380 participants, 16 trials).
- Compared with usual care, women receiving lay support were less likely to stop any breastfeeding (RR 0.86, 95% CI 0.76 to 0.98; 3079 participants, 7 trials) or exclusive breastfeeding (RR 0.72, 95% CI 0.57 to 0.90; 3084 participants, 6 trials).
- Support given face-to-face appears more effective (RR 0.85, 95% CI 0.79 to 0.92; 5127 participants, 14 trials) than telephone support (1168 participants, 5 trials).
- Trials assessing postnatal support alone had similar results to those where the support also contained an antenatal component.



Adapted from Britton C, McCormick FM, Renfrew MJ, Wade A, King SE. Support for breastfeeding mothers. *Cochrane Database of Systematic Reviews* 2007, Issue 1. Art. No.: CD001141. DOI: 10.1002/14651858.CD001141.pub3. Evidence Update published in August 2008.

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All forms of extra support vs usual care: stopping exclusive breastfeeding at last study assessment up to 6 months



Authors' conclusions

Implications for practice:

Additional support for breastfeeding women, given by professionals or lay people, increases the number of mothers continuing breastfeeding for up to six months. Face-to-face support appears more effective than support given mainly by telephone. There is no evidence that including an antenatal component to the support package brings additional benefits.

Implications for research:

Further trials should seek to identify the optimal timing, delivery, and content of supportive interventions, the training required for those delivering the interventions, and the comparative effectiveness of interventions across settings. Trials should report on a range of outcomes, including health of the mother and baby, and satisfaction with care and costs.