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National Childbirth Trust on EU Green Paper

"Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases",

The National Childbirth Trust welcomes this Green paper which brings together many of the factors that will affect the development of chronic diseases in European countries.

In addition to the measures already suggested, we would like to see an official endorsement in Europe that protection, promotion and support of exclusive and continued breastfeeding is the best nutritional strategy for ensuring best possible standard of health and development of infants and young children.

This would mean that all the policies and practices of the European Commission, EU Governments and the commitments made in the EU Platform for Action, are in line with

- 1) the **Global Strategy on Infant and Young Child Feeding**¹, which includes the *International Code of Marketing of Breast-milk Substitutes* and subsequent, relevant World Health Assembly Resolutions,
- 2) the **European Blueprint for Action on the Promotion, Protection and support of breastfeeding**²,
- 3) the **Global Strategy on Diet, Physical Activity and Health**³ and
- 4) the **Convention of the Rights of the Child**

In addition the sections of the above documents which all contain safeguards regarding the need to avoid potential conflicts of interest are fully recognised and implemented so that the food industry is not involved in the production of educational materials intended for use in schools and health care systems.

Rationale:

As recognised on page 18, not being breastfed is one of the factors that are likely to be associated with the future development of obesity. Mothers who breastfeed for more than the first few months may also be at reduced risk of becoming overweight following the birth of their babies⁴.

Epidemiological evidence strongly suggests that breastfeeding represents an ideal window of opportunity for obesity prevention. Several studies and systematic reviews, many of which have been carried out in Europe, show a small but significant and dose/duration dependent effect of breastfeeding for the prevention of overweight and obesity⁵. Moreover, if a large majority of mothers breastfed, an increase in its exclusivity and duration could have a

substantial impact on the prevalence of overweight and obesity at population level, even if the effect is small at an individual level.

Breastmilk is also thought to influence the development of taste receptors which fosters a preference for lower energy diets later on in life.

Systematic reviews demonstrate that breastfeeding acts as a protective factor in a dose-dependent and causal fashion.⁶ Although the relative risk may be low (probably in the order of 1.1 to 1.3), the fact that breastfeeding and appropriate complementary feeding can be universal, i.e. the exposure to the protective factor may have an impact on the whole population; means that the protection, promotion and support of breastfeeding one of the interventions with the largest potential impact.

Scientific research shows that many biological factors associated with obesity and chronic diseases may be programmed very early in life or even during pregnancy, hence the importance of ensuring appropriate maternal nutrition⁷ as well as encouraging exclusive breastfeeding and timely, suitable complementary feeding for babies and young children⁸.

The protection, promotion and support of optimal infant and young child feeding, including breastfeeding and nutrition during pregnancy and lactation, have the potential to greatly reduce health inequalities, as shown by disparities in breastfeeding rates among countries⁹ and within countries, by social class (e.g. surveys in Italy and UK).^{10,11}

The protection, promotion and support of optimal infant and young child feeding, including breastfeeding and nutrition during pregnancy and lactation, is one of the public health interventions with the best ratio of benefit to cost.¹²

References:

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