THE EFFECT OF OBSTETRIC INTERVENTIONS ON BREASTFEEDING: A CROSS-SECTIONAL STUDY

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OBJECTIVES

This study aims to analyze the association between obstetric interventions, in particular synthetic oxytocin, and caesarean section regarding breastfeeding.

METHODS

A quantitative, cross-sectional study was carried out using an online questionnaire with anonymous and voluntary participation of Hungarian women. We surveyed gravidas via specific platforms between 26 March and 18 July 2021. With non-probability targeted sampling we included those who were biological mothers at the time of participation and cared for at least one child at their home. Exclusion criteria were non-biological motherhood, pregnancy with first child, insufficient or uninterpretable answers to the questionnaire and physical and/or mental disability of the child which made breastfeeding impossible. Socio-demographic data (type of residence, age, number of children etc.) and information regarding delivery, interventions during birth, breastfeeding, the way and period of how the child was fed. SPSS v25 was used for calculating descriptives, correlation analysis, χ^2 test, ANOVA and t test (p<0.05). Considering both exclusion and inclusion criteria, 2,172 women were eligible for our study.

RESULTS

There was a positive association between oxytocin induction and breastfeeding in the delivery room (p=0.004). 59.3% of those who did not have an induction (n=955) and 52.3% of those who did (n=293) breastfed their babies in the delivery room. Type of delivery and breastfeeding also correlated (p=0.001). 59.1% of parents who delivered naturally (n=800) breastfed their babies, while the largest proportion of parents who had a planned caesarean section (52.1%; n=139), did not breastfeed their babies. 67.4% of children born by planned caesarean section (n=180), 67.2% of children born by emergency caesarean section (n=370) and only 53.3% of children born naturally (n=721) had ever received formula (p<0.001). Naturally born infants were exclusively breastfed longer (M=5.02) than those born by planned caesarean section (M=4.55) (p=0.023).

CONCLUSIONS

Obstetric interventions could affect early or exclusive breastfeeding negatively.

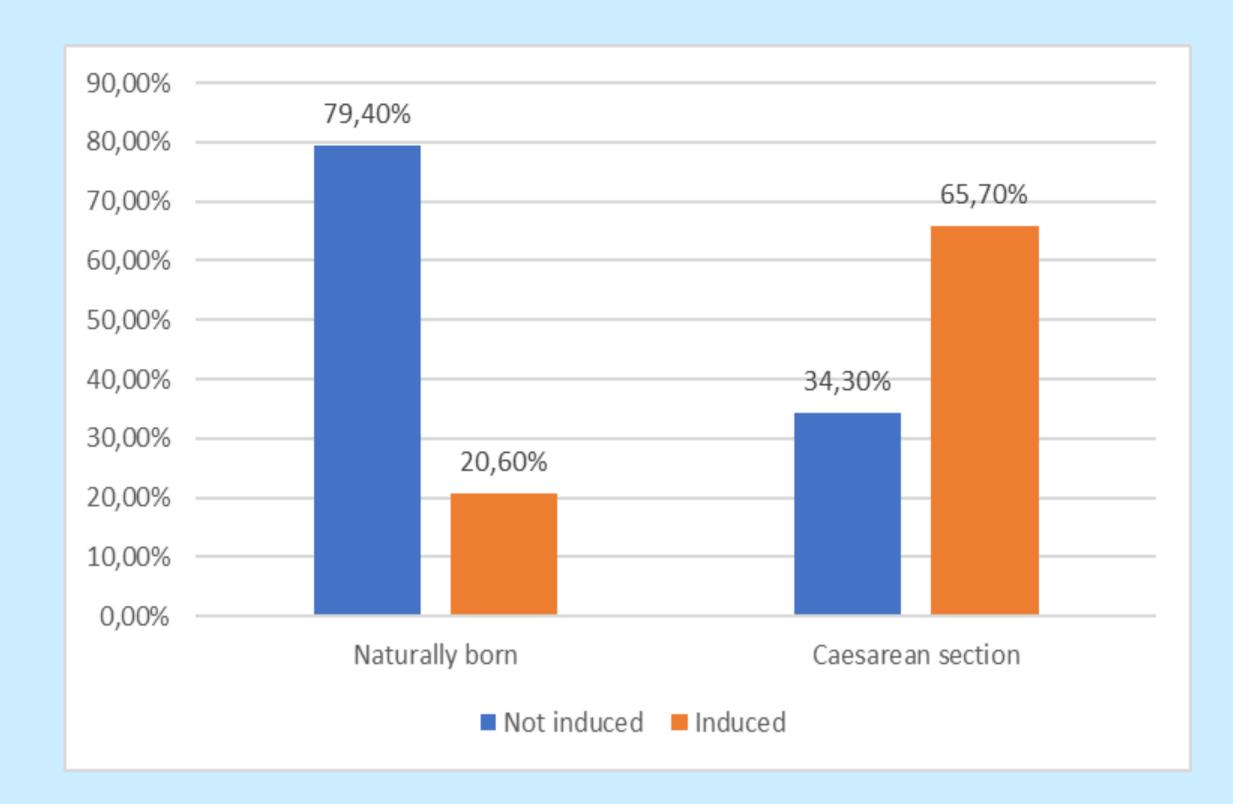
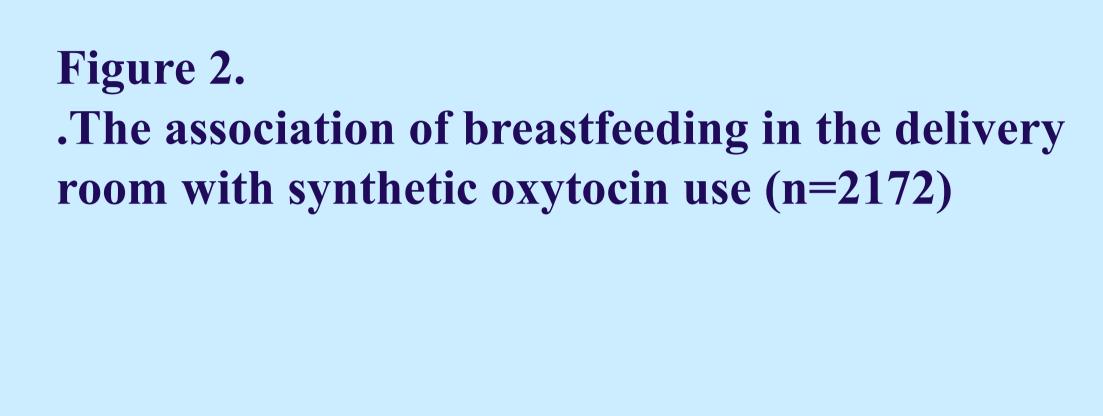


Figure 1.
Relationship between induction of labour with synthetic oxytocin and mode of delivery (n=2172)



Breastfed in the delivery room

Oxytocin used to induce labour

Not breastfed in the delivery room

Oxytocin was not used to induce labour

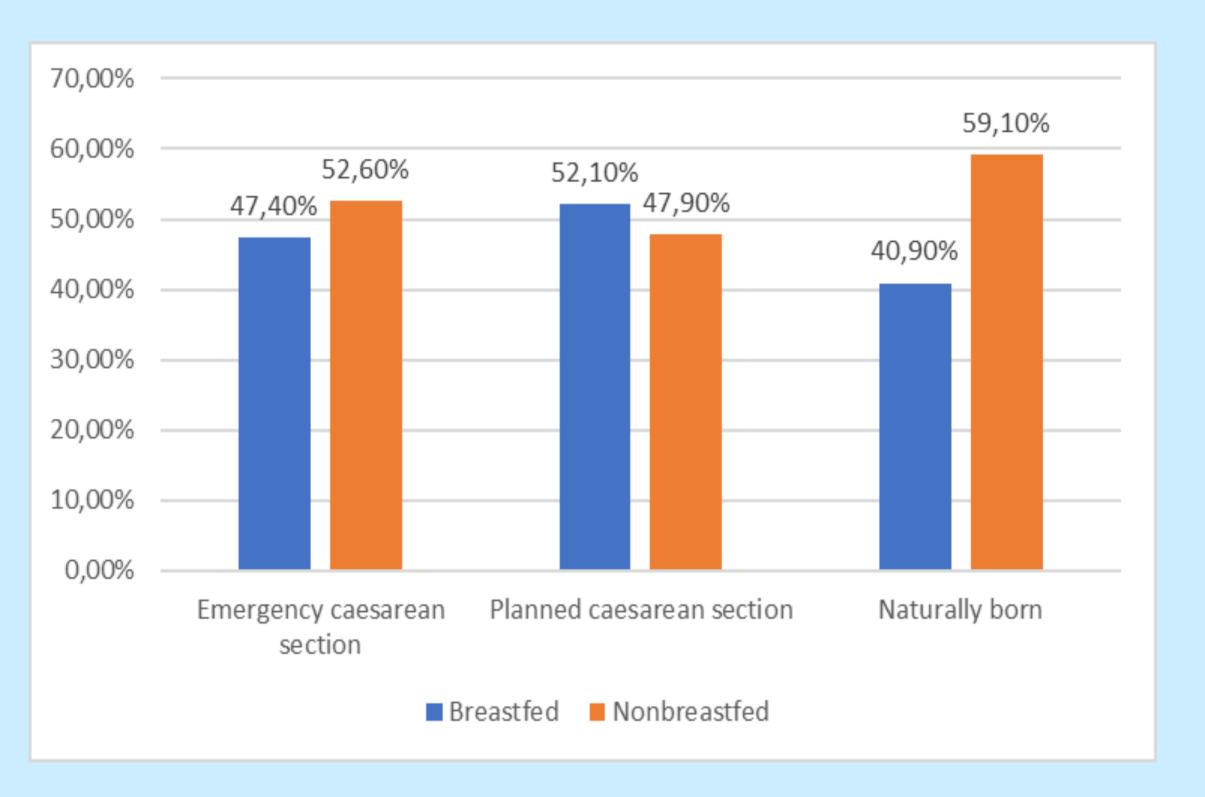


Figure 3.
Breastfeeding rates by mode of delivery (n=2172)

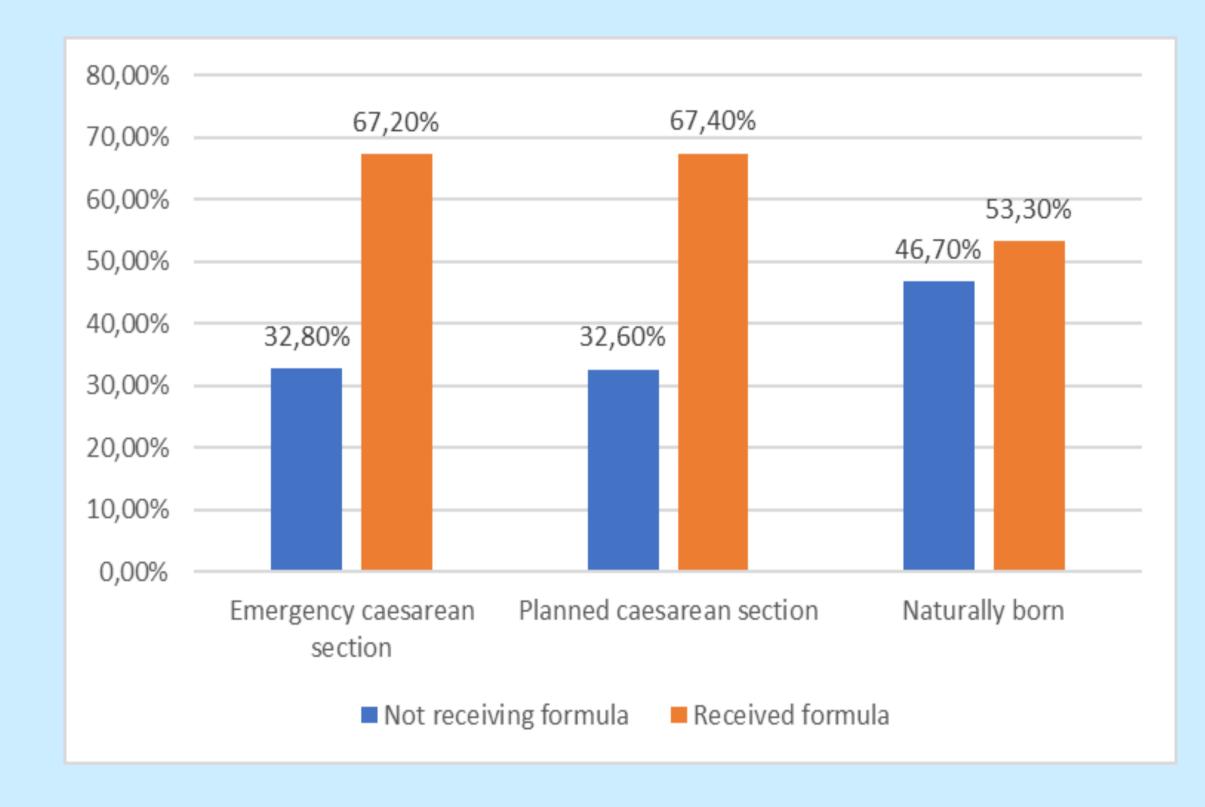
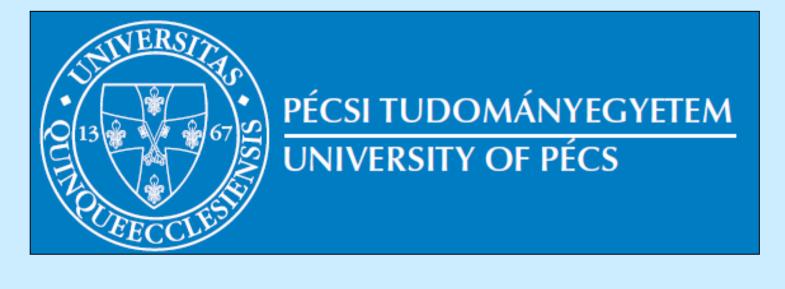


Figure 4.
Association of mode of delivery with the occurrence of formula feeding in the past (n=2172)





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