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the FELIX Letter

A COMMENTARY ON NUTRITION

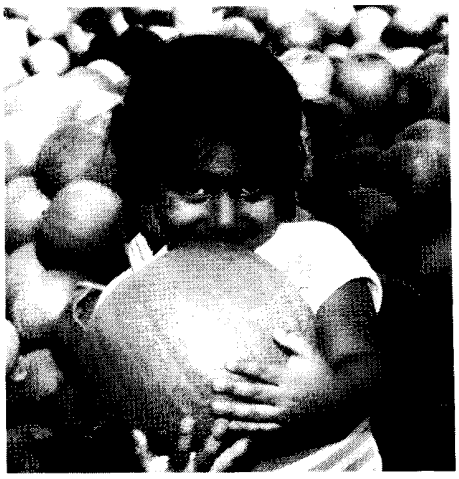
OCTOBER 1982

MOTHERS' MILK

The breastfeeding issue is a remarkable microcosm — a miniature universe involving science, motherhood, and capitalist economics. The boycott against Nestle began as a humanitarian grassroots effort to stem the giant Swiss-based corporation's aggressive marketing of infant formula in underdeveloped countries. Five years later, with 70 American member organizations, including many church-affiliated ones, the International Nestle Boycott Committee is still actively monitoring the situation, even though Nestle has somewhat altered its selling techniques.

Nestle, the leading supplier of infant formula to the Third World, had been accused of widespread use not only of mammoth advertising campaigns to push bottlefeeding in underdeveloped nations, but of underhanded methods such as sending Nestle employees dressed as nurses to "educate" new mothers in hospital maternity wards, dispense samples, and set up "milk banks" where new mothers could purchase Nestle formula at a discount for the first few weeks. Because supplementary feeding tends to diminish lactation, the mothers often had no alternative but to continue purchasing formula for their babies at prices far beyond their means. Linda Kelsey of television's former "Lou Grant" series returned from a tour of five Asian capitals and, at a news conference last year, described a Bangladesh family of 13 with a total monthly income of $34 that had been "sold" on bottlefeeding their new baby at a monthly cost of *$28*. The selling and advertising of formula in underdeveloped countries began in the '60s and '70s creating an entirely new, profitable market in these traditionally breastfeeding lands, with Nestle's sales now about $300 million annually.

Without sterile water in its preparation or refrigeration, contaminated formula has brought dysentary and tragedy to hundreds of thousands of babies. Infant malnutrition has resulted when, because of poverty, many mothers dilute the formula to make it go further. Additionally, with bottlefeeding, protective factors in breast milk against tropical infections deadly to infants are lost. The United Nations estimates that over one million babies a year die because improperly used formula has replaced breastfeeding.



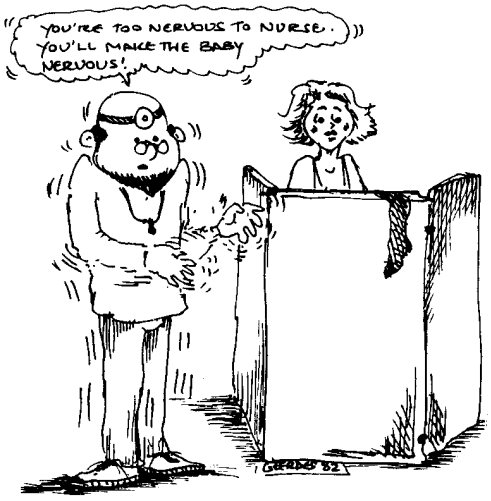
The Code

The issue culminated dramatically in May of last year in Geneva at the World Health Organization Assembly. One hundred and eighteen nations voted for a voluntary international "Code of Marketing Breastmilk Substitutes," calling for the outlawing of all advertising and promotion of baby formula as substitutes for breastfeeding. Only the United States opposed it, unleashing a worldwide storm of criticism at the Reagan administration's decision. Religious leaders were among the angriest, the auxiliary bishop of the Roman Catholic Archdiocese of Baltimore saying the U.S. vote was "an act of subtle violence against the human rights" of infants and mothers. Two officials of the Agency for International Development, pediatrician Stephen C. Joseph and nutritionist Eugene Rabb, resigned in protest of the U.S. vote.

Investigating Nestle

A favorite former professor of mine, Sheldon Margen, M.D., of U.C. Berkeley's School of Public Health, is one of a seven-member commission headed by former Senator and Secretary of State Edmund Muskie that was formed by Nestle in May this year to examine complaints about the firm's practices. The Nestle Infant Formula Audit Commission, although funded by Nestle, is designed to be independent and, according to Muskie, has the authority to say anything it wants to say. Critics have been openly skeptical of the commission's freedom to discharge its stated function, but if Dr. Margen whom I know to be a fighter and independent thinker is typical of the panel members, the commission is not going to be a rubber stamp group. In an interview in the October 13, 1982, *Daily Californian,* Dr. Margen described investigations they've conducted of Nestle violations of the Code, one in Costa Rica and the other in the Philippines, with resolution of the problems by Nestle ranging currently from good to unsatisfactory. They are actively demanding changes in sections of a new set of instructions that the corporation issued in March to implement the World Health Organization's Code. Dr. Margen feels that Nestle's new guidelines still contain "problems, ambiguities, and questions," and the panel members are struggling to get Nestle to alter its instructions in keeping with the spirit of the Code.

The boycott against buying Nestle's varied and far-ranging products still continues, because while the huge firm has eaten a little crow, it is using large sums of money (according to *Multinational Monitor* of September, 1982) for high-handed public relations techniques including Red-baiting to divide its critics, while still continuing "to aggressively market infant formula."



A New Mother

One of the nagging areas of chagrin in my life is that I didn't breastfeed my three children long enough. Especially did I shortchange my first child, a strapping little boy with a big appetite. The only persons who could advise me, since we lived in the late 1940s on my parents' isolated farm in California's Simi Valley, were my mother and my doctor, and they didn't know beans about it — my doctor because his training neglected it and my mother because she had simply forgotten. They both told me I was too nervous to nurse ("the baby's hungry") . . . the baby had colic because of my milk . . . ("the baby's not getting enough") . . . my milk was too blue, it wasn't rich enough . . . don't feed from both breasts, there won't be enough milk for the next feeding . . . ("the baby's hungry") . . . my milk was too watery . . . ("the baby's starving!). The doctor told me to give him plenty of supplemental feedings. The only literature I found in that pre-Spock era was a government pamphlet sternly warning against variation from a strict 4-hour schedule. Newborns, it said, should sleep 22 hours of 24. Mine was awake at least 10, and I knew I was a failure! The baby and I *both* cried a lot those first few months.

Freedom Through Technology

The demise of breastfeeding in our country is not a simple case of medical or corporate villainy. When Americans began to leave their farms to industrialize new communities, a lot of natural things were left behind. "Synthetic infant food came into a world that was riding the crest of high hopes for technology's wizardry."[1] In all of human history before the present century, only women of aristocracy or wealth could eschew breastfeeding if they wished, by giving the task to a wetnurse. There was no question about the rightness of breastfeeding; loss of a mother's milk together with the unavailability of a wetnurse were regarded as disasters.

Now, modern science was giving all women the right to be "free" of the heavy burden, just as the privileged rich had been. Women in the 1940s could be mothers and "career women", too. Bottlefeeding became the progressive, the *modern* thing to do. By the late '40s and '50s, only about ten percent of mothers were breastfeeding. From a rare emergency measure, formula feeding, in a generation or so, had become the norm. It was now thoroughly entrenched in medical and hospital procedures. Obstetric and pediatric care was premised on it, and mothers who wanted to nurse had to buck the whole system.

Better Than Breast

Few were motivated because of the widespread affirmation in both medical and lay circles that cow's milk formula was at least as good as, if not superior to human milk. I remember my own ambivalence with my firstborn: nursing felt lovely and right, but they were telling me I was doing a bum job — the baby was always hungry. Formula was safer, reliable, guaranteed to work. After six weeks of uncertainty, I gave up and placed him totally on diluted evaporated milk and Karo (corn sugar) syrup, soon followed by "solids": Pablum and canned baby fruit.

At two months, he had his first cold. "Diaper rash" became an almost constant affliction, no matter how carefully I washed and rinsed his diapers in my mother's old washing machine with its wringer rollers, or bathed and oiled his little raw bottom. He cried as much as before, had frequent spells of colic, and seemed as hungry as when I was using my low-confidence breasts. His tiny nose was now always stuffy or runny; his allergies had begun.

By the time his brother was born two years later, I was so determined to nurse that I pumped my breasts for three weeks, waiting at home while my Cesarean-born premature newborn slowly gained enough weight to be released from the hospital. (No one dreamed of suggesting, least of all myself, that I come in to nurse him every day, as some doctors now recommended with "preemies.") Although he had known only bottlefeedings, when we carried him triumphantly home — at the grand weight of five pounds! — he latched on to my nipples

Mama's milk: species-specific!

like a pro. I had only an ounce of milk in my breasts, but eventually I was able to nurse him fully for another four months. Their sister, born two years later, was breastfed for five and a half months until I "ran dry."

Is it coincidence that only my first-born developed allergies, eczema, and a lifelong struggle with obesity beginning in babyhood? I never dreamed of a connection, until many years later, when the emerging literature on the superiority of human milk for human babies over formula began to accumulate with unmistakable impact.

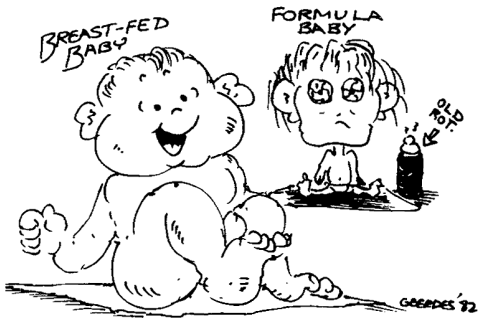
The Incredible Fluid

The turnaround we are now seeing, with the strong re-establishment of breastfeeding in the U.S., has its basis in a contradiction: the 'back to natural roots' and ecology movement of the '70s that nurtured it grew out of disillusion with scientific and technological advance achieved at the cost of environmental and human values. Yet the growth towards reinstitution of breastfeeding has, in fact, been strengthened and reinforced by technological advances in *nutrition science* that have made possible exquisite evaluations of the "simple" fluid. Breast milk is beginning to be thought of with awe, finally, in medical circles.

Its proteins, minerals, amino acids, and vitamins are now known to be very different from cow's (or other animal's) milk in either composition or concentration. Now that its biochemical mysteries are being unravelled, researchers are marvelling at the delicate balance of its nutrients — so precisely and *uniquely* designed for the *human* baby. As an example, taurine, a sulfur-containing amino acid, is highly concentrated in breastmilk but not in cow's milk.

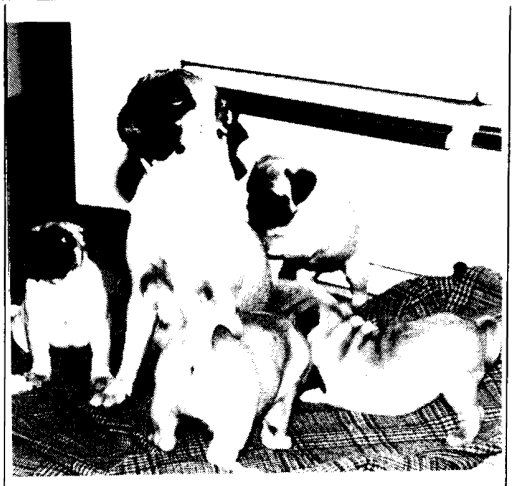
> *The greatest need for taurine appears to be in the newborn, since the infant may not be able to synthesize enough taurine for the growth and development of brain, muscle, and retina of the eye. The neonatal enigma, 'sudden infant death syndrome,' might conceivably result from cardiac arrhythmia related to taurine deficiency.*[2]

Breastmilk, beginning with colostrum secreted the first five days after birth, affords the best protection an infant can have against all manner of infectious diseases. It is now known that, in addition to carrying antibodies that the mother developed in her lifetime against numerous illnesses, which protect the baby until his own immune system develops, breast milk, like blood, actually has white blood cells — leukocytes — that continue to manufacture specific immunoglobins in the baby's intestinal tract after the baby has fed, some of these in direct response to a germ that is attempting to invade the infant's system.



A Group of Breastfeeders

There is no way that another animal's milk or the best synthetic formula can do this for a human child. The nicest gift I could have received when I was struggling to gain enough confidence to nurse my first son would have been the assurance that only I (or a wetnurse) could give him the intricately balanced nutrients and immunity against disease that he needed. Nothing could have stopped me then! Well, the nutrition scientists are providing just this invaluable information. Getting obstetricians and pediatricians to implement it is another story, even though there was always a minority of doctors who argued for a return to natural feeding. One of the best things that's happened to mothers and babies is La Leche League International.[3] It started in Illinois in 1956 — when "breastfeeding was a lost art" — with an informal group of young women who "banded together to share the joys of breastfeeding with other young mothers . . ."[1] They are now international in scope and doing a remarkable service with their literature, public information, and supportive groups — an example of an earlier grassroots movement that also sprang up to fill a need.

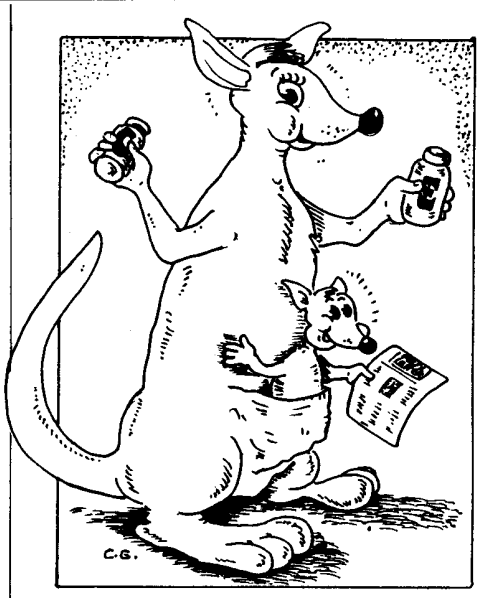


A few weeks ago, I contacted the local La Leche League (their number was in the phone book) and got a cartonful of books and pamphlets from them on loan. The material is medically up-to-date, meticulous, and *fascinating.* Did you know (I didn't) that a woman who has never had a child may be able to nurse her adopted baby, using the right techniques and a lot of patience? The League's great book, *The Womanly Art of Breastfeeding,*[1] gives how-to's on this and other special circumstances, as well as providing down-to-earth information for every conceivable question that may come up about nursing. It may come as a surprise to some, the book notes, but modern women are not at all too nervous to nurse, given step-by-step instruction and example by other experienced mothers to get them over the rough spots — even to the restoring of lactation in mothers who have "gone dry", as I did with my two younger babies. I recommend La Leche's book, along with nutritionist Margaret Salmon's fine *The Joy of Breastfeeding,*[2] to every parent, would-be parent, and grandparent.

Early Health Insurance

To point up what has been now totally confirmed in the scientific literature: breastfed babies are much less prone to infections, allergies, and obesity. I *had* cheated my first child, through lack of confidence and misinformation. There was plenty of good hard evidence for this even in 1951, when biochemist and nutritionist Adelle Davis's first edition of *Let's Have Healthy Children*[4] appeared, but the medical hierarchy wasn't interested. I don't know if her early books touched the lives of the young mothers who founded La Leche League in 1956, but I know the impact they had on mine. Of all the "if only's!" in those years, my most fervent was to have had the right to undertake pregnancies and early infant rearing *after* I had discovered her books. They were revolutionary in their time, a period when breastfeeding and nutritional awareness were both at an all-time low; and they caused a great number of young mothers to take the initiative for the health of their families *passionately* — to the consternation of much of the medical fraternity. It was she who wrote early about the endless biochemical marvels being discovered in breast milk by researchers, and she was the first major nutritionist to openly castigate doctors and hospitals for their absurd allegiance to the poor substitute for breastmilk they were foisting on most American babies.

My "preemie" Joshua & friend



The ever-widening circles of young mothers of La Leche League and the physicians who supported them; the great "healthfood" movement that sprang up in the '60s in the wake of Davis's books; the powerful ecology push of the '70s: all of these forces are responsible for the changes we are seeing in medical attitudes toward birthing and in the resurgence of breastfeeding in this country. Without them, the continuing research contributions of nutrition scientists on the miraculous properties of breastmilk would, I fear, be gathering dust in medical library stacks.

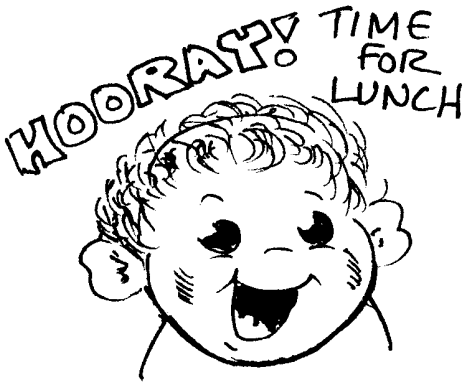
A Big Turnaround

In 1980, the Committee on Nutrition of the American Academy of Pediatrics strongly recommended breastfeeding for infants, and urged hospitals to allow mother and baby to be together in the first 24 hours after birth, because of its beneficial effect on establishing successful nursing. Their recommendation was at least twenty years overdue, but plenty welcome.

In San Francisco's new Moscone Center this October, 6,500 doctors from 90 nations at the World Congress of Gynecology and Obstetrics heard evidence of the great value of breastfeeding and the importance of a mother being allowed to nurse from the very first hours after birth. Too many hospital maternity centers, the doctors said, still supply new mothers with bottles and formulas. (Shades of Nestle!) Instead, hospital staffs should make it easy for mothers to nurse their babies from the very beginning.

Bravo! It's happening at last. Ponderously and very late in the game, medicine is making an about-face. A grassroots movement of nursing mothers, ecology buffs, and 'natural foodists' forced the issue. Will developing nations, because of faceless corporate profit-and-loss sheets in Western countries, undergo generations of the same attrition — with even deadlier effects — before their babies' birthrights are restored?

Breastmilk is indeed powerful stuff. ■



1. *The Womanly Art of Breastfeeding,* 1981, La Leche League International.
2. *The Joy of Breastfeeding,* 2nd Edition, by Margaret Belais Salmon, 1980, Techkits, Inc., P.O. Box 105, Demarest, NJ 07627.
3. La Leche League International, 9616 Minneapolis, Franklin Park, IL 60131. Tel: (312) 455-7730. Look for local listing in your phone book.
4. *Let's Have Healthy Children* by Adelle Davis. 1951, 1959, 1972 by Harcourt Brace Jovanovich, Inc. Posthumous edition 1981, revised by Marshall Mandell, M.D., New American Library, 1633 Broadway, New York, NY 10019.

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