

UNICEF UK BABY FRIENDLY INITIATIVE

STATEMENT ON BRITISH SOCIETY OF PAEDIATRIC DENTISTRY INFANT FEEDING POSITION STATEMENT



Update 19 April 2018: Since this document was published, Public Health England has [released a statement](#) clarifying its position on infant feeding and tooth decay, confirming that, “There is no evidence that from 12 months of age reducing breast feeding on demand and at night time will result in the prevention of tooth decay.”

March 2018

Unicef UK has received a number of queries about the recently published British Society of Paediatric Dentistry (BSPD)'s Position Statement on Infant Feeding. This statement includes the following recommendation:

“From 12 months of age, mothers who wish to continue breastfeeding should work closely with their health practitioners to minimise the potential risk of dental decay. This may include the recording of a detailed diet diary identifying sugar in complementary foods and drinks, and discussing the optimal use of fluoride. Consideration should be given to reducing on demand and night time feeds in light of the emerging evidence-base suggesting a potential link between these practices and complementary feeding after 12 months of age and dental decay.”

The World Health Organization (WHO) recommends exclusive breastfeeding for six months and continued breastfeeding alongside complementary foods for two years and beyond.^{1,2} These recommendations are based on extensive evidence that breastfeeding saves lives and has profound implications for child, maternal and lifelong health.^{3,4,5,6,7} In the UK few babies are fed according to these recommendations,^{8,9,10} and so a great deal of effort is going into improving mothers' experience of breastfeeding in order to improve public health.^{11,12,13,14,15,16} This work is challenging in the UK, as breastfeeding remains a contentious issue, with many seeing it as unnecessary and difficult to achieve.¹⁷ Given this context, we would argue that this BSPD recommendation is unhelpful. Further, while it is acknowledged that there is some evidence that prolonged breastfeeding may be associated with dental decay, this evidence is far from conclusive and little is known about the true causes or mechanisms,^{18,19,20,21,22} while the evidence for the benefits of breastfeeding is irrefutable.³ Any guidance for health professionals or parents should make clear the disparity in the evidence base so that informed decisions can be made.

With specific reference to the BSPD recommendation, the following points are for consideration:

- The implication that breastfed babies are particularly vulnerable and require close supervision and extra measures such as keeping a food/drink diary suggests that breastfeeding after 12 months is dangerous. This is misleading, undermines breastfeeding and could cause unnecessary alarm for parents, without conferring any clear advantage to their child.

- Reducing on demand and night time feeds could cause a great deal of distress to both parents and child and could also lead to the early cessation of breastfeeding.²³ These risks, along with the inconclusive nature of the evidence related to dental decay and the known benefits of breastfeeding, should be discussed with parents to allow them to make informed decisions about what is best for them, their child and family.

The conclusions in the BSPD statement undermine WHO guidelines and cause confusion to health professionals and mothers who, by breastfeeding for longer, are in fact improving the health and wellbeing of their children.

Further reading

- [The Lancet Breastfeeding Series](#)
- [The Impact of Breastfeeding on Maternal and Child Health: Acta Paediatrica](#)
- [Impact of Prolonged Breastfeeding on Dental Caries: A Population-Based Birth Cohort Study, 2017](#)
- [British Society of Paediatric Dentistry Position Statement on Infant Feeding](#)

¹ WHO (2018) Nutrition: Exclusive breastfeeding

http://www.who.int/nutrition/topics/exclusive_breastfeeding/en/

² WHO (2003) Global Strategy for Infant and Child feeding (Geneva:WHO/Unicef)

³ Victora CG, Bahl R, Barros AJD, Franca GVA, Horton S, Krasevec J, Murch S, Sankar MJ, Walker N, Rollins NC (2016) Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect. *Lancet* 387 10017: 475–490. <http://www.thelancet.com/series/breastfeeding>

⁴ Rollins NC, Bhandari N, Hajeebhoy N, Horton S, Lutter CK, Martines JC, Piwoz EG, Richter LM, Victora CG (2016) Why invest, and what it will take to improve breastfeeding practices? *Lancet* 387:10017: 491–504. <http://www.thelancet.com/series/breastfeeding>

⁵ Horta BL, Loret de Mola C, Victora CG (2015) Long-term consequences of breastfeeding on cholesterol, obesity, systolic blood pressure and type 2 diabetes: a systematic review and meta-analysis. *Acta Paediatrica*, 104: 30–37. <https://www.ncbi.nlm.nih.gov/pubmed/26192560>

⁶ *Acta Paediatrica* (2015) Special Issue: Impact of Breastfeeding on Maternal and Child Health, December, Volume 104, Issue Supplement S467, pp. 1–134
<http://onlinelibrary.wiley.com/doi/10.1111/apa.2015.104.issue-S467/issuetoc>

⁷ Renfrew MJ, Pokhrel S, Quigley M, McCormick F, Fox-Rushby J, Dodds R, Duffy S, Trueman P, Williams T (2012) Preventing disease and saving resources: the potential contribution of increasing breastfeeding rates in the UK, Unicef UK Baby Friendly Initiative
<https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/advocacy/preventing-disease-and-saving-resources/>

⁸ McAndrew F, Thompson J, Fellows L, Large A, Speed M, Renfrew MJ (2012) Infant Feeding Survey 2010, Health and Social Care Information Centre
http://doc.ukdataservice.ac.uk/doc/7281/mrdoc/pdf/7281_ifs-uk-2010_report.pdf

⁹ <https://www.england.nhs.uk/statistics/wp-content/uploads/sites/2/2014/03/STATISTICAL-COMMENTARY-Q4-201617.pdf>
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/677853/2017_2018_Q1_Breastfeeding_Statistical_Commentary.pdf

¹⁰ Scottish Government (2018) Scottish Maternal and Infant Nutrition Survey (2017)
<http://www.gov.scot/Publications/2018/02/7135/350600>

¹¹ Commissioning Infant Feeding Services (2016) PHE & Unicef UK Baby Friendly Initiative
<https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/advocacy/launch-of-commissioning-guidance-for-infant-feeding/>

¹² PHE (2016) Health Matters: Giving every child the best start in life
<https://www.gov.uk/government/publications/health-matters-giving-every-child-the-best-start-in-life/health-matters-giving-every-child-the-best-start-in-life>

-
- ¹³ The Scottish Government (2017) The best start: five-year plan for maternity and neonatal care <https://beta.gov.scot/publications/best-start-five-year-forward-plan-maternity-neonatal-care-scotland/>
- ¹⁴ Welsh Government (2015) Early years outcomes framework <http://gov.wales/topics/people-and-communities/people/children-and-young-people/early-years/early-years-outcomes-framework/?lang=en>
- ¹⁵ Northern Ireland Government (2013) Breastfeeding - a great start: a strategy for Northern Ireland (2013-23) <https://www.health-ni.gov.uk/publications/breastfeeding-strategy>
- ¹⁶ Unicef UK (2012) The evidence and rationale for the Unicef UK Baby Friendly Initiative standards <https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/advocacy/the-evidence-and-rationale-for-the-unicef-uk-baby-friendly-initiative-standards/>
- ¹⁷ Unicef UK (2016) Protecting health and saving lives: A Call to Action <https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/advocacy/call-to-action/>
- ¹⁸ Glazer Peres K, Nascimento G, Peres MA et al (2017) Impact of Prolonged Breastfeeding on Dental Caries: A Population-Based Birth Cohort Study *Pediatrics*. Jul;140(1). pii: e20162943. doi: 0.1542/peds.2016-2943. <http://pediatrics.aappublications.org/content/140/1/e20162943>
- ¹⁹ Richards D (2016) Breastfeeding up to 12 months of age not associated with increased risk of caries. <https://www.ncbi.nlm.nih.gov/pubmed/27767121>
- ²⁰ Tham R, Bowatte G, Dharmage SC et al (2015) Breastfeeding and the risk of dental caries: a systematic review and meta-analysis. *Acta Paediatrica* <https://www.ncbi.nlm.nih.gov/pubmed/26206663>
- ²¹ Avila WM, Pordeus IA, Paiva SM et al (2015) Breast and Bottle Feeding as Risk Factors for Dental Caries: A Systematic Review and Meta-Analysis. <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0142922>
- ²² Mohebbi SZ1, Virtanen JI, Vahid-Golpayegani M, et al (2008) Feeding habits as determinants of early childhood caries in a population where prolonged breastfeeding is the norm. *Community Dentistry and Oral Epidemiology*. Volume 36, Issue 4 August. Pages 363–369. <http://onlinelibrary.wiley.com/doi/10.1111/j.1600-0528.2007.00408.x/full>
- ²³ Durham University Infant Sleep Information Service <https://www.dur.ac.uk/sleep.lab/projects/current/isis/>