

# BREASTFEEDING AND CONSUMPTION OF SWEETENED FOODS

Aleitamento materno e consumo de alimentos adoçados

Maíra Ribas Goulart<sup>a</sup>, Lúcia Campos Pellanda<sup>a,\*</sup>

Porto Alegre, July 17, 2018.

To: Ruth Guinsburg, Editor of Revista Paulista de Pediatria

Dear Editor,

I would like to make some observations about the article “Influence of breastfeeding on consumption of sweetened beverages or foods,” by Adriana Passanha,<sup>1</sup> published in this journal. The authors’ goal was to verify whether breastfeeding is associated with a lower prevalence of consumption of sweetened beverages or foods among infants. First, I commend the author and collaborators, as both breastfeeding and food introduction are extremely important to the development of infants.<sup>2</sup> I believe that, if the authors had included the age group between zero and six months in the analysis, it would have enriched the work. We know that exclusive breastfeeding is recommended during this period; however, in clinical practice, the reality is different: babies with few weeks of life are given teas, juices, and other sweetened beverages. Since the study has a representative number of infants, including this age group would provide the reader with a comprehensive overview of the prevalence of consumption of sweetened beverages or foods. I also suggest adding the duration of exclusive breastfeeding, as it might not reflect the current recommendations.<sup>3</sup> I believe that some of the data in Table 1 should have been discussed. For instance, infants assisted by the public health system consume almost 10% more sweetened foods or beverages than infants with private insurance, even though, currently, health professionals of the public system have access to complete and easy-to-understand materials about food introduction.<sup>4</sup> According to the author’s findings, the orientation for mothers on food introduction for infants still has flaws. My question is: where are we failing as public health professionals? We know that only imparting knowledge is not enough to change the patient’s life.

Still on the discussion, the text would be clearer if the authors started it by addressing its main result: the prevalence of consumption of sweetened beverages and foods. This result was only mentioned in the fifth paragraph. Before that, the authors lingered on the prevalence of overweight in the population under study. Although very relevant,<sup>5</sup> I believe these data should have been used to reinforce the importance of breastfeeding and proper food introduction. However, only after discussing the main finding. Lastly, I would have liked to read about the possibility of generalizing the results (external validity).

Dra. Lúcia Campos Pellanda

## REFERENCES

1. Passanha A, Benício MHD, Venâncio SI. Influência do aleitamento materno sobre o consumo de bebidas ou alimentos adoçados. *Rev Paul Pediatr* [Internet]. 2018;36:148-154 [cited 2018 Jul 17]. Available

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\*Corresponding author. E-mail: [pellanda.pesquisa@gmail.com](mailto:pellanda.pesquisa@gmail.com) (L.C. Pellanda).

<sup>a</sup>Instituto de Cardiologia, Fundação Universitária de Cardiologia, Universidade Federal de Ciências da Saúde de Porto Alegre, Porto Alegre, RS, Brazil.

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2. World Health Organization/United Nations Children's Fund. Global nutrition targets 2025: breastfeeding policy brief (WHO/NMH/NHD/14.7). Geneva: World Health Organization; 2014.
3. Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde. Departamento de Atenção Básica. Saúde da criança: nutrição infantil: aleitamento materno e alimentação complementar. 2ª ed. Brasília: Secretaria de Atenção à Saúde; 2015. 112p.
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## AUTHOR'S RESPONSE LETTER

Adriana Passanha<sup>a,\*</sup>

São Paulo, August 9, 2018.

To: Dr. Lúcia Campos Pellanda

Dear Dr. Lúcia,

**W**e would like to thank you for your interest in our work and the observations made about our article.

In answer to your questions, we chose to study only the age group corresponding to the second semester of life because the article belongs to a doctoral dissertation that included other studies conducted with this same population. We agree that it is important to know about the consumption of sweetened foods and beverages in the first semester of life, considering the early food introduction among infants, and we can say in advance that other studies are being carried out with infants in the age group between zero and six months.

Regarding the duration of exclusive breastfeeding, the methodology used did not allow us to obtain this information individually since the survey consisted of closed questions (yes/no) on the feeding of infants in the previous day. This option followed the recommendations of the World Health Organization (WHO) on how to carry out surveys on infant feeding practices, which indicate the collection of information about the current feeding status through questions on the food given to the infant in the previous 24 hours. This strategy aims to avoid the informant's memory bias, especially with respect to the duration of exclusive breastfeeding.<sup>1</sup>

In relation to the discussion of the findings, we chose to address the influence of breastfeeding on the consumption of sweetened foods and beverages as the main focus of the session. Another article, at the design stage, will discuss in greater depth the influence of other variables on the food intake of infants, including a variable related to the location of outpatient follow-up.

Regarding the prevalence of consumption of sweetened foods and beverages being described only in the fifth paragraph, we understand the argument that such information could be at the beginning of the session, but we chose to discuss other aspects beforehand. Also, the reviewers, when analyzing the article, made no remarks about this issue. Concerning external validity, we pointed out in the discussion that the Survey on the Prevalence of Breastfeeding (*Pesquisa de Prevalência de Aleitamento Materno*) was conducted with a representative sample, which reinforces the external validity of the findings.

We thank you once more for the attention to this work and the contributions made, which certainly invite a careful reflection on how to tackle the early offer of sweetened foods and beverages to Brazilian children.

## REFERENCE

1. World Health Organization. Indicators for assessing infant and young child feeding practices – part 1: definitions. Geneva: WHO; 2008.

\*Corresponding author. E-mail: [adriana.passanha@gmail.com](mailto:adriana.passanha@gmail.com) (A. Passanha).

<sup>a</sup>Universidade de São Paulo, São Paulo, SP, Brazil.

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In the manuscript “Breastfeeding and consumption of sweetened foods”, DOI: 10.1590/1984-0462/;2018;36;4;00019, published in the Rev Paul Pediatr. 2018;36(4):524-525, page 524:

**Where it reads:**

Lúcia Campos Pellanda<sup>a,\*</sup>

<sup>a</sup>Instituto de Cardiologia, Fundação Universitária de Cardiologia, Porto Alegre, RS, Brazil.

**It should read:**

Maíra Ribas Goulart<sup>a</sup>, Lúcia Campos Pellanda<sup>a,\*</sup>

<sup>a</sup>Instituto de Cardiologia, Fundação Universitária de Cardiologia, Universidade Federal de Ciências da Saúde de Porto Alegre, Porto Alegre, RS, Brazil.