ICCN Poster Presentations

Food and the child

Increasing breastfeeding rates in Australia

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Breastfeeding is acknowledged as providing the best start in life. In 2003, a review by the National Health and Medical Research Council of Australia's dietary guidelines for infants, children and adolescents endorsed the recommendation of the World Health Organization that exclusive breastfeeding of infants continue until around six months of age. Further, it recommended as national targets for breastfeeding an initiation rate in excess of 90 per cent and for infants aged 6 months that 80 per cent be breastfed. Breastfeeding rates in Australia fell to a low in the 1960's with initiation rates as low as 50%. Since that time rates have increased again and in 1996 the Australian Government introduced a National Breastfeeding Strategy. In 1992-1993, the first Perth Infant Feeding Study, a cohort of 556 mothers, reported that 83.8 per cent (95% CI = 80.7 – 86.9) of infants were breastfed on discharge from hospital. In 2002-2003, the Perth Infant Feeding Study was repeated using the same hospitals and survey tools. The second Perth Infant Feeding Study used a cohort of 587 mothers and found 93.8 per cent (95% CI = 91.9–95.7) of infants were breastfed on discharge from hospital. The 10 per cent increase in breastfeeding initiation in the past decade has achieved the national breastfeeding targets. A comparison between the results of the first and second Perth studies found that significant increases in breastfeeding prevalence had occurred at the 5 per cent level across all socio-demographic groupings: maternal age, maternal education level and maternal country of birth. The largest increases were seen in mothers born outside of Australia, younger mothers and mothers who had completed high school but were not tertiary educated. Known demographic shifts in the Australian population for maternal age and education level may account for 2-3 per cent of the increase while changes in the migration patterns may also have contributed to the increase. Breastfeeding promotion must now concentrate on increasing duration.

Iron bioavailability of some Cameroon traditional complementary foods

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Iron "in vitro" bioavailability was assessed in main Cameroonian traditional complementary foods identified during enquiries amongst mothers with weaning babies up to 30 months by and "in vitro extrinsic tag method. Total iron levels were generally ranged between 4.68 ± 0.5 (in fermented maize gruel) and 51.51± 3.73 mg/ 100g dry matter (in maize meal with a vegetable, *Corchorus olitorius* based sauce). Non haem iron values were high compared to haem iron values calculated by difference (between total and non hem iron) and ranged from 3.11±0.09 (in sweet potato with pear) to 47.64 ± 4.68 mg/ 100g dry matter (in maize meal with a vegetable, *Corchorus olitorius* based sauce). Dialysable iron values expressed in % of non hem iron ranged between 0.89 ±0.13 and 18. 68 ± 2. 11 % (in mashed Irish potato with fish) were enhanced with lime juice and significantly reduced by legumes (beans, soy, and peanut), egg and egg yolk. An Irish potato-based diet was the best source of dialyzable Iron. Iron intakes were sufficient for most balanced diets to cover iron recommended daily intakes from 7 months of age.