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Original Article

Knowledge of breastfeeding practices in doctors and nurses: A questionnaire-based survey

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ABSTRACT

Background: As the primary physicians and nurses in hospitals are the first contact with the mothers, we carried out a questionnaire-based survey to assess the knowledge of the MBBS nonspecialist doctors and general duty nurses regarding breastfeeding of normal newborns. **Methods:** Thirty-four MBBS, nonspecialist doctors and ninety-seven general duty nurses were enrolled in the study between August 2016 and September 2016 in a tertiary care teaching hospital, and a questionnaire comprising of 10 questions on breastfeeding was provided to each.

Results: All doctors (100%) and nurses (100%) agreed that breastfeeding must be started within 1 h of birth and all nurses (100%) agreed that breastfeeding alone is sufficient for a newborn baby during the first 2–3 days of life. However, 58.8% of the doctors and 25.7% of the nurses believed that after 6 months of life, the mother must give her infant cow's milk or formula for better growth. Only 52.9% of doctors and 40.2% of nurses agreed that breastfeeding should be advised to be continued for 2 years and beyond. Among doctors only 67.6% believed that breastfeeding for a normal newborn should be on demand only and not by clock.

Conclusion: There is scope of improvement regarding knowledge of breastfeeding in both doctors and nurses. All healthcare providers must provide correct information to mothers to help them in successful breastfeeding.

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Introduction

Breastfeeding is the best form of nutrition for a newborn, offering in addition protection from infectious diseases and promoting optimum growth and development.¹ However, over the years, there is not much of progress in breastfeeding rates

as evident by the National Family Health Survey (NFHS-3) data, which show less than half of the infants under 6 months of age to be exclusively breastfed with exclusive breastfeeding rate dropping to 28% for infants of the age group 4–5 months. The rate of early initiation of breastfeeding is as low as 24.5%.² As the primary physicians and nurses in hospitals are the first contact with the mothers, it was imperative to know about the

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Table 1 – Questionnaire on knowledge of breastfeeding practices in doctors and nurses.

Question no	Question	Doctors (agree) N = 34	Nurses (agree) N = 97
1	Breastfeeding must be started within 1 h of birth	34 (100)	97 (100)
2	Breastfeeding alone is sufficient for a newborn baby in the first 2–3 days of life	32 (94.1)	97 (100)
3	Should mothers who underwent cesarean section feed formula or cow's milk in addition to breast milk on the first day of life	3 (8.8)	6 (6.1)
4	For twin babies, formula or cow's milk must be fed to the babies in addition to breastfeeds	4 (11.7)	17 (17.5)
5	After 6 months of life, the mother must give her infant cow's milk or formula for better growth	20 (58.8)	25 (25.7)
6	Breastfeeding should be advised to be continued for 2 years and beyond	18 (52.9)	39 (40.2)
7	In the first 6 months of life of an infant, water per mouth can be given in addition to breastfeeds	5 (14.7)	3 (3)
8	Breast milk contains all micronutrients including adequate Vit D3 and iron	18 (52.9)	70 (72.1)
9	Breastfeeding for a normal newborn should be on demand only and not by clock	23 (67.6)	93 (95.8)
10	It is okay to avoid breastfeeds at night and introduce bottle when a baby cries at night	01 (2.9)	05 (5.1)
Values expressed as n (%).			

knowledge they themselves have about breastfeeding practices so that they can impart the same knowledge to the mothers.

Material and methods

Thirty-four MBBS, nonspecialist general duty doctors and ninety-seven general duty nurses posted in a tertiary care teaching hospital of eastern India were enrolled between August 2016 and September 2016. The approval of the study was taken from the institutional ethics committee. An objective questionnaire comprising of 10 statements were given to each individual, and 10 min were given to fill the form by ticking on the answers based on whether they agreed to each statement or not. The filled questionnaire was analyzed to assess the knowledge of doctors and nurses regarding optimum breastfeeding practices.

Results

All doctors (100%) and nurses (100%) agreed that breastfeeding must be started within 1 h of birth (Table 1). All nurses (100%) and 94.1% of doctors agreed that breastfeeding alone is sufficient for a newborn baby during the first 2–3 days of life. However, 8.8% of doctors and 6.1% of nurses felt that in case of cesarean sections, newborns should be given milk in addition to breastfeeds on the first day of life. 11.7% of doctors and 17.5% of nurses felt that formula or cow's milk must be fed in addition to breast feeds to the twin babies. 58.8% of doctors and 25.7% of nurses believed that after 6 months of life, the mother must give her infant cow's milk or formula for better growth. Only 52.9% of doctors and 40.2% of nurses agreed that breastfeeding should be advised to be continued for 2 years and beyond. As many as 14.7% of doctors and 3% of nurses were of the opinion that in the first 6 months of life of an infant, water per mouth can be given in addition to breastfeeds. More than half of the doctors (52.9%) and about

three-fourths (72.1%) of the nurses felt that breast milk contains all micronutrients including adequate Vit D3 and iron. Though almost all nurses agreed that breastfeeding for a normal newborn should be on demand only and not by clock, only 67.6% of the doctors believed it. 2.9% of doctors and 5.1% of nurses felt that it is okay to avoid breastfeeds at night and to introduce bottle when a baby cries at night.

Discussion

According to Infant and Young Child Feeding Guidelines 2016, breastfeeding should be promoted as the gold standard feeding option. Breastfeeding should be initiated as soon as possible after birth, preferably within 1 h. Exclusive breastfeeding should be followed in the first 6 months of life. Adequate and appropriate complementary feeding should be given after completion of 6 months in addition to breastfeeds. Breastfeeding should be continued for a minimum of 2 years and beyond.³

In a study done among healthcare providers in Haryana to assess the knowledge and practices regarding essential newborn care and resuscitation, early and exclusive breastfeeding including colostrum was advised by all, which was similar to our study.⁴

In a study from Iraq (n = 50), as observed in primary healthcare physicians, 92% knew that breastfeeding should start in 30 min after birth. 72% of the primary care physicians in their study knew that breastfeeding should be on demand, which was similar to 67.6% of physicians in our study. However, 92% of the respondents in the Iraqi study felt that weaning must start in 4–6 months and only 8% felt that weaning should start after 6 months. In cesarean sections, in the same study, 66% knew breastfeeds should start after 12 h and another 22% knew it should start after 1 day, whereas 92% of the physicians in our study felt that breastfeeding alone is adequate even in the first day of life.⁵

In a study from Brazil, which studied responses from 89 nurses and physicians, about half (51.7%) felt that breastfeeding

should be done every 3 h. 92% of all respondents felt that exclusive breastfeeding should be implemented in the first 6 months. 83% of the study population were of the opinion that breastfeeding should be continued for 24 months and more, and this was contrary to our results of almost half not agreeing.⁶

In a questionnaire-based survey from Pakistan, the findings in a study population of 197 doctors and 97 nurses, about 90% believed that breastfeeding must start within half an hour. 9% of doctors and 19% of nurses felt that prelacteal feed should be given, which is in contrast with our findings. Only 8% of doctors and 68.7% of nurses believed in on-demand breastfeeding in the study from Pakistan as compared to 67.6% of doctors and 95.8% of nurses in our study. In the Pakistan study, almost half of all doctors and nurses were of the opinion of weaning even before 6 months of age, and only 9.6% of doctors and 21.2% of nurses felt that breastfeeding should be continued for 24 months and beyond. Relatively early weaning by 4–6 months of age may be due to the National breastfeeding policy of Pakistan.⁷ In another study from Lahore, Pakistan, the respondents were resident doctors and nurses from Obstetric and Pediatric departments, respectively. In this study, overall only 79% were aware that breastfeeding needed to be started within half an hour as compared to 100% in our study. Even the awareness of on-demand breastfeeding was also 52% overall in their study, with doctors in the pediatric department fairing worse at 38% compared to 67.6% of doctors and 95.8% of nurses in our study.⁸

Overall, the awareness about early initiation of breastfeeding irrespective of mode of delivery and breastfeeding on demand in the first 6 months was good in our study as compared to other studies in the recent past. The reason may be strict adherence to Baby-Friendly Hospital Initiative (BFHI), which is based on ten steps of successful breastfeeding, a program summarizing the best practices, which the maternity ward of our center adopts to support breastfeeding.⁹ However, only about half of the doctors and even lesser percentage (40.2%) of nurses were aware that breastfeeding needs to be continued up to 2 years and beyond. About half of the doctors and one-fourth of the nurses felt that an infant needs non-human milk after 6 months for better growth, which is contrary to the initiation of appropriate complementary feeds at the same period.

The strength of the study is that it was a questionnaire-based study with close-ended questions and all participants were asked objective questions independently and by maintaining uniformity of questions. The limitations of the study were that the number of participants was less, particularly the study population of doctors. The respondents of the study were from services only. For the brevity of the study, the number of questions was decided to be ten only and this could

have prevented assessing knowledge regarding many other aspects of breastfeeding, particularly the practical aspects.

Conclusions

The knowledge of doctors and nurses regarding breast feeding practices need improvement particularly for proper weaning after 6 months and continuation of breast feeds up to 2 years and beyond. Ongoing health education with a view to promote the required quality of this essential health practice is warranted.

Conflicts of interest

The authors have none to declare.

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