

Economic Benefits of Breastfeeding



Years of research have confirmed the importance of breastfeeding and breast milk for the optimal health of infants, children, mothers, and society. The *absence* of breastfeeding, however, not only affects short- and longterm health outcomes but also exacts a financial toll on the U.S. economy.

- For private and government insurers, a minimum of \$3.6 billion must be paid each year to treat diseases and conditions preventable by breastfeeding.¹
- For families, the purchase of infant formula can amount to \$1,200-\$1,500 or more for the baby's first year.²
- For the nation's employers, formula feeding results in increased health claims, decreased productivity, and more days missed from work to care for sick children.

Breastfeeding and the provision of breast milk exclusively for the first 6 months, and in conjunction with appropriate foods thereafter, promises the United States improved health of both its citizens and its economy.

Medical Costs of Not Breastfeeding

The medical costs of not breastfeeding are substantial:

- Excess use of health care services attributable to formula feeding costs an HMO between \$331 and \$475 per never-breastfed infant for lower-respiratory illness, otitis media, and gastrointestinal illness.³
- Costs for hospitalization from lower-respiratory infections among 1,000 never-breastfed babies range from \$26,585 to \$30,750 more than for 1,000 infants exclusively breastfed.³
- \$200,000 is spent for each case of necrotizing enterocolitis,⁴ with a 10.1 percent occurrence in formula-fed babies and a 1.2 percent rate in breastfed babies.
- Additional health care costs for respiratory syncytial virus due to not breastfeeding are \$225 million.⁵
- Additional health care costs for insulin-dependent diabetes melli-

tus (IDDM) in formula-fed children, assuming a 2–28 percent IDDM rate attributable to not breastfeeding: a low estimate of 1,185,900,000 and a high estimate of 1,301,100,000.5

Nonmedical Costs of Artificial Feeding

The nonmedical costs of not breast-feeding are substantial as well:

- \$2 billion per year is spent by families on breast milk substitutes such as formula.
- Costs to support a breastfeeding mother in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) are about 55 percent of those for a formula-feeding mother.
- \$578 million per year in federal funds is spent by WIC to buy formula for families who could be breastfeeding.
- Every 10 percent increase in breastfeeding rates among WIC recipients would save WIC \$750,000 per year.

- If a parent misses 2 hours of work for the excess illness attributable to formula feeding, greater than 2,000 hours—the equivalent of 1 year of employment—are lost per 1,000 never-breastfed infants.
- 110 billion BTUs of energy (\$2 million) used each year in the United States for processing, packaging, and transporting formula.

Other Costs of Not Breastfeeding

Not breastfeeding also carries intangible costs—those not associated with specific dollar amounts in research findings. Such costs include:

- Illness and death from bacteria associated with feeding powdered infant formulas, which is not sterile⁶
- 3- to 11-point IQ deficit in formula-fed babies⁷
- Less educational achievement noted with both formula-fed children⁸ and throughout adulthood⁹
- Longer hospital stays in premature infants who do not receive human milk
- Slower brainstem maturation¹⁰ and IQs 8–15 points lower in premature infants who do not receive human milk¹¹

Breastfeeding's Health Benefits

Breastfeeding is universally endorsed by the world's health and scientific organizations as the best way of feeding infants. Studies have found that not breastfeeding increases the risk for and incidence of the illnesses and conditions listed below.

For children

- respiratory syncytial virus
- sudden infant death syndrome (SIDS)
- asthma
- allergies
- lymphomas and leukemia
- autoimmune thyroid disease
- type I and type II diabetes
- ulcerative colitis and Crohn's disease
- multiple sclerosis
- poorer school performance
- lower developmental and cognitive scores
- childhood overweight and obesity

For mothers

- premenopausal breast cancer
- ovarian cancer
- thyroid cancer
- osteoporosis
- lupus

- Better vision,¹² fewer cavities in teeth,¹³ and less malocclusion requiring braces¹⁴ in children who have been breastfed
- 550 million formula cans, with 86,000 tons of metal and 800,000 pounds of paper packaging, added to U.S. landfills each year

Supporting Optimal Breastfeeding Is Worth the Investment

As a preventive measure, breastfeeding promotes improved health outcomes and is cost-effective.

The U.S. government has recognized the importance of breastfeeding with three recent major policy statements on breastfeeding. These take into account the relationship between improved breastfeeding practices and our national health.

- Healthy People 2010
- HHS Blueprint for Action on Breastfeeding
- Breastfeeding in the United States: A National Agenda

What's Needed

Achieving our national goals for increasing the incidence and duration of breastfeeding will require:

- continued full authorization of the WIC program with improved breastfeeding support services
- inclusion of breastfeeding care and services in government health strategic plans
- coordination of breastfeeding programs among government agencies
- worksite breastfeeding protection and support incentives for employers
- insurance coverage for lactation care and services

- development of legislation that supports exclusive breastfeeding for the first 6 months of life, with gradual introduction of solids foods after 6 months
- inclusion of breastfeeding language in child health acts
- implementation of the provisions of the International Code of Marketing of Breast Milk Substitutes
- education and support for families
- education for health professionals

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Goals of the United States Breastfeeding Committee

protecting | promoting | supporting

The mission of the United States Breastfeeding Committee (USBC) is to protect, promote, and support breastfeeding in the United States. The USBC exists to ensure the rightful place of breastfeeding in society.

The USBC works to achieve the following goals:

Goal I

Ensure access to comprehensive, current, and culturally appropriate lactation care and services for all women, children, and families.

Goal II

Ensure that breastfeeding is recognized as the normal and preferred method of feeding infants and young children.

Goal III

Ensure that all federal, state, and local laws relating to child welfare and family law recognize and support the importance and practice of breastfeeding.

Goal IV

Increase protection, promotion, and support for breastfeeding mothers in the work force.

Visit us at www.usbreastfeeding.org.

This paper was funded in part by the Health Resources and Services Administration's Maternal and Child Health Bureau and the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

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