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Fact Sheet: Infant Formula Marketing in Doctors' Offices and Health Clinics

Many healthcare providers unwittingly serve as marketers for the infant formula industry by allowing formula samples and other marketing materials into their offices.¹ Formula makers use this insidious marketing tactic to encourage mothers to feed their babies formula instead of breastfeeding. Providing infant formula samples in health clinics suggests that staff endorse formula feeding over breastfeeding. Yet, extensive research proves that not breastfeeding exclusively for the first six months of life poses significant, short and long-term risks for children and mothers.

Infant formula marketing in doctors' offices is bad for babies and moms

- **Not breastfeeding is risky for babies.** All major medical organizations recommend exclusive breastfeeding for the first six months, followed by continued breastfeeding for the first year and beyond, with the gradual introduction of appropriate complementary foods to the infant's diet beginning around six months of age.² Despite these recommendations, in the U.S. only 14.8 percent of babies are exclusively breastfed for six months.³
- **Breastfeeding duration and exclusivity are reduced when samples and other formula industry marketing materials are distributed in doctors' offices.** Women with uncertain goals or breastfeeding goals of shorter periods of exclusivity are particularly affected by the presence of formula industry materials at prenatal visits. Women who receive formula company materials have been found to be more likely to stop breastfeeding before hospital discharge and before two weeks.⁴
- **When hospitals distribute infant formula samples to new moms, it leads to a decrease in breastfeeding.** Studies show that women who receive commercial discharge bags containing infant formula are more likely to stop breastfeeding sooner than those who don't receive these samples.⁵ Given this evidence, 33 percent of hospitals have stopped giving out samples.⁶ *All healthcare providers should follow the lead of ethical hospitals that have opted to end sample distribution.*

Healthcare professionals should not participate in formula marketing

- **Recognizing the dangers of formula marketing, the WHO established the International Code of Marketing of Breast-milk Substitutes in 1981.** The Code states that health workers should not provide samples of infant formula or related products to pregnant women and mothers.⁷
- **In 2012, the American Academy of Pediatrics adopted a resolution to counter this practice.** The AAP resolved to "advise pediatricians not to provide formula company gift bags, coupons, and industry-authored handouts to the parents of newborns and infants in office and clinic settings."
- **The Surgeon General has flagged the risks of formula marketing.** In her 2011 *Call to Action to Support Breastfeeding*, she emphasized that we "must ensure that health care clinicians do not serve as advertisers for infant formula" in order to avoid undermining breastfeeding.⁸

Breastfeeding saves lives and dollars

- **Health benefits for children:** Children that are not breastfed have an increased risk of acute otitis media, non-specific gastroenteritis, severe lower respiratory tract infections, atopic dermatitis, asthma, type 1 and 2 diabetes, childhood leukemia, SIDS, and necrotizing enterocolitis. One study found that breastfed children are 22 percent less likely to become obese than formula fed children.⁹
- **Health benefits for mothers:** Mothers who do not breastfeed have increased morbidity and mortality over those who do, including increased risk of type 2 diabetes, breast cancer, obesity, ovarian cancer, post-partum depression, and bladder infections.¹⁰
- **Benefits to the U.S. economy:** One study found that if 90 percent of families in the United States breastfed babies exclusively for six months, savings to the economy could amount to \$13 billion. If 80 percent of families met the six month exclusive breastfeeding goal, \$10.5 billion could be saved.¹¹
- **Economic benefits for families:** Breastfeeding saves families the costs of formula (\$800 to \$2800 per year) and the costs of added healthcare for the increased incidence of acute infections with formula feeding.¹²
- **Hospitals and other businesses win.** Women who breastfeed need fewer days off for child care because their children are healthier.¹³

Infant formula samples are not really “free”

- **The brand name formulas that are distributed in doctors’ offices and hospital discharge bags are up to 66 percent more expensive than store brands.** But mothers who start using one brand of formula often stick with it in the long run, making samples far from “free.”¹⁴ If they continue using the brand name formulas given for “free” in discharge bags, it will cost at least \$700 extra per year.¹⁵

For more information, visit <http://www.citizen.org/infant-formula>, email ebenishai@citizen.org, or call Elizabeth Ben-Ishai at 202.588.7746.

Notes

¹Dusdieker, L.B., C.I. Dungy, and M.E. Losch. "Prenatal Office Practices Regarding Infant Feeding Choices." *Clinical pediatrics* 45, no. 9 (2006): 841-45; Valaitis, R.K., J.D. Sheesl-ka, and M.F. O'Brien. "Do Consumer Infant Feeding Publications and Products Available in Physicians' Offices Protect, Promote, and Support Breastfeeding?" *Journal of Human Lactation* 13, no. 3 (1997): 203-08.

²American Academy of Pediatrics Section on Breastfeeding. "Breastfeeding and the Use of Human Milk (Policy Statement)." *Pediatrics* 115, no. 2 (2005): 496-506; American Academy of Family Physicians. "Family Physicians Supporting Breastfeeding (Position Paper)." Retrieved 9 February, 2012, from <http://www.aafp.org/online/en/home/policy/policies/b/breastfeedingpositionpaper.html>; Academy of Breastfeeding Medicine. "Position on Breastfeeding." *Breastfeeding Medicine*, no. 4 (2008), <http://online.liebertpub.com/doi/pdfplus/10.1089/bfm.2008.9988>; James, D. C., and B. Dobson. "Position of the American Dietetic Association: Promoting and Supporting Breastfeeding." *Journal of the American Dietetic Association* 105, no. 5 (2005): 810-18; American College of Obstetricians and Gynecologists Committee on Health Care for Underserved Women and Committee on Obstetric Practices. "Special Report from ACOG. Breastfeeding: Maternal and Infant Aspects." *ACOG Clinical Review* 12, no. 1 (suppl) (2007): 1S-16S; National Association of Pediatric Nurse Practitioners. "NAPNAP Position Statement on Breastfeeding." *Journal of Pediatric Health Care* 21, no. 2 (2007): A39-A40; World Health Organization and United Nations Children's Fund. "Global Strategy for Infant and Young Child Feeding." World Health Organization. Retrieved 9 February, 2012, from http://www.who.int/nutrition/publications/gi_infant_feeding_text_eng.pdf; U.S. Department of Health and Human Services. "The Surgeon General's Call to Action to Support Breastfeeding." U.S. Department of Health and Human Services, Office of the Surgeon General. Retrieved 14 February, 2012, from <http://www.surgeongeneral.gov/topics/breastfeeding/calltoactiontosupportbreastfeeding.pdf>.

³ Department of Health and Human Services, Centers for Disease Control and Prevention. "Breastfeeding Report Card--United States, 2011." Retrieved 3 February, 2012, from <http://www.cdc.gov/breastfeeding/pdf/2011BreastfeedingReportCard.pdf>.

⁴ Howard, C., F. Howard, R. Lawrence, E. Andresen, E. DeBlicke, and M. Weitzman. "Office Prenatal Formula Advertising and Its Effect on Breast-Feeding Patterns." *Obstetrics & Gynecology* 95, no. 2 (2000): 296.

⁵ Donnelly, A., HM Snowden, MJ Renfrew, and MW Woolridge. "Commercial Hospital Discharge Packs for Breastfeeding Women." *Cochrane database of systematic reviews* (2000); Dungy, C.I., J. Christensen-Szalanski, M. Losch, and D. Russell. "Effect of Discharge Samples on Duration of Breast-Feeding." *Pediatrics* 90, no. 2 (1992): 233; Rosenberg, K.D., C.A. Eastham, L.J. Kasehagen, and A.P. Sandoval. "Marketing Infant Formula through Hospitals: The Impact of Commercial Hospital Discharge Packs on Breastfeeding." *Am J Public Health* 98, no. 2 (2008):

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⁶ U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. "CDC National Survey of Maternity Care Practices in Infant Nutrition and Care (mPINC), 2009." *Table 5.2a: Distribution of infant formula discharge packs by facility type, size, NICU level, and region*. Retrieved 14 February, 2012, from http://www.cdc.gov/breastfeeding/data/mpinc/data/2009/tables5_1a-5_2a.htm.

⁷ World Health Organization. "International Code of Marketing of Breast-Milk Substitutes." Retrieved 10 October, 2011, from http://www.who.int/nutrition/publications/code_english.pdf.

⁸ U.S. Department of Health and Human Services. (2011). *The Surgeon General's Call to Action to Support Breastfeeding*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General. Retrieved 14 February, 2012, from <http://www.surgeongeneral.gov/topics/breastfeeding/calltoactiontosupportbreastfeeding.pdf>

⁹ Ip, S., M. Chung, G. Raman, P. Chew, N. Magula, D. DeVine, T. Trikalinos, and J. Lau. "Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries." Agency for Healthcare Research and Quality Publication, U.S. Department of Healthcare and Human Services. Retrieved 2 November, 2011, from <http://www.ahrq.gov/downloads/pub/evidence/pdf/brfout/brfout.pdf>; Arenz, S., R. Ruckerl, B. Koletzko, and R. Von Kries. "Breast-Feeding and Childhood Obesity—a Systematic Review." *International Journal of Obesity* 28, no. 10 (2004): 1247-56.

¹⁰ Ip et al., "Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries."; Labbok, Miriam H. "Effects of Breastfeeding on the Mother." *Pediatric Clinics of North America* 48, no. 1 (2001): 143-58.

¹¹ Bartick, M., and A. Reinhold. "The Burden of Suboptimal Breastfeeding in the United States." *Pediatrics* 125, no. 5 (2010): e1048-e56.

¹² Calculations based on prices of store and name brand formulas at Walgreens.com in Nov. 2011 and average consumption of 30 oz. of formula per day.

¹³ Cohen, R., M.B. Mrtek, and R.G. Mrtek. "Comparison of Maternal Absenteeism and Infant Illness Rates among Breast-Feeding and Formula-Feeding Women in Two Corporations." *American Journal of Health Promotion* 10 (1995): 148-48.

¹⁴ Reiff, M.I., and S.M. Essock-Vitale. "Hospital Influences on Early Infant-Feeding Practices." *Pediatrics* 76, no. 6 (1985): 872-79.

¹⁵ Ban the Bags. "Ban the Bags Tool Kit." Retrieved 6 February 2012, from <http://www.banthebags.org/>.