Breastfeeding support improves outcomes

**Clinical Question**
How effective are different care providers and different modes of offering breastfeeding support for healthy breastfeeding mothers with healthy term babies?

**Bottom Line**
Breastfeeding support increased the duration and exclusivity of breastfeeding. All forms of extra organised support analysed together showed an increase in the length of time women continued to breastfeed, either with or without introducing any other types of liquids or foods. This meant that fewer women stopped any breastfeeding or exclusively breastfeeding (moderate quality evidence) before four to six weeks and before six months. Both trained volunteers and doctors and nurses had a positive impact on breastfeeding. Support was likely to be more effective in settings with high initiation rates. Factors that may have contributed to the success for women who exclusively breastfed were face-to-face contact (rather than contact by telephone), volunteer support, a specific schedule of four to eight contacts, and high numbers of women who began breastfeeding in the community or population (background rates).

**Caveat**
The methodological quality of the studies was mixed, and the components of the standard care interventions and extra support interventions varied considerably and were not always well described. Also, the settings for the studies and the women involved were diverse.

**Context**
There is extensive evidence of important health risks for infants and mothers related to not breastfeeding. In 2003, the World Health Organization recommended that infants be breastfed exclusively until six months of age, with breastfeeding continuing as an important part of the infant’s diet until at least two years of age. Current breastfeeding rates in many countries do not reflect this recommendation.

**Cochrane Systematic Review**