

Testimony submitted via email.

March 31, 2017

My name is Dr. Marion Rice, I am an International Board Certified Lactation Consultant and the former Executive Director of the Breastfeeding Coalition of Oregon. A state coalition with the United States Breastfeeding Committee charged with support, promotion and protection of breastfeeding across Oregon.

I am writing to day to urge **strong support in favor of HB 2015**. This bill will increase the utilization of state registered doulas for OHP recipients and that in turn will provide much needed prenatal home visiting and postpartum **care that supports successful breastfeeding**.

We know women **often decide to breastfeed before their baby delivers**. According to the study, ***Impact of Doulas on Healthy Birth Outcomes***, "Expectant mothers matched with a doula had better birth outcomes. Doula-assisted mothers were four times less likely to have a low birth weight (LBW) baby, two times less likely to experience a birth complication involving themselves or their baby, and significantly more likely to initiate breastfeeding."

We also know that breastfeeding provides significant lifelong health benefits:

Evidence: This intervention is strongly supported by the American Academy of Pediatrics, the American College of Obstetrics and Gynecology, the American College of Nurse-Midwives, the World Health Organization, the Centers for Disease Control and Prevention and the US Department of Health and Human Services.

Obesity: Three large, well-designed meta-analyses [Arenz 2004, Owen 2005, Harder 2005], controlling for dozens of confounding variables, have found that breastfeeding reduces the risk of childhood obesity in a linear, dose-dependent manner. The longer a mother breastfeeds, the lower the chances that her child will be obese, and the more she breastfeeds (exclusive versus partial breastfeeding), the stronger the effect will be [CDC 2007].

Diabetes: A meta-analysis showed that infants who were breastfed for less than 3 months were 43% more likely to develop type 1 diabetes than infants who were breastfed longer [Gerstein 1994]. In a 2006 meta-analysis, the infants who were breastfed showed a 39% lower risk of type 2 diabetes than those who were formula-fed [Owen 2006]. For women who exclusively breastfeed their babies, analyses from the Nurses Health Study II showed that for each year of exclusive breastfeeding during their lifetime, there was a 37% reduction in rates of type 2 diabetes for those mothers. This is significantly better than the 24% reduction in rates of type 2 diabetes among women who breastfeed but also supplement with formula [Steube 2005].

Cholesterol: A very large meta-analysis including more than ten thousand subjects showed that adults who were breastfed in their infancy had

ad lower mean LDL- cholesterol levels compared with those who were formula-fed [Owen 2002].

Asthma: Increasing rates of exclusive breastfeeding could reduce rates of childhood asthma by as much as 30 % [Gdalevich 2001].

Health of Preterm Infants: Breastmilk plays a significant role in reducing rates of necrotizing enterocolitis and late-onset sepsis in preterm infants, both of which lead to substantial costs in neonatal intensive care. [Schnabl 2008, Donovan 2006, Hylander 1998, Schanler 1999].

Infectious Disease: Research in developed and developing countries of the world, including middle- class populations in developed countries, provides strong evidence that human milk feeding decreases the incidence and/or severity of a wide range of infectious diseases [Heinig 2001] including bacterial meningitis and bacteremia [Cochi 1986], diarrhea [Bandari 2003, Lopez-Alarcon 1997], respiratory tract infection [Bachrach 2003, Oddy 2003, Gdalevich 2001], otitis media [Duncan 1993, Aniansson 1994] and urinary tract infection [Marild 2004].

Economic benefits of involvement in breastfeeding support: A study published in Pediatrics confirms that the economic burden of suboptimal breastfeeding rates is substantial. The authors estimate that if 90% of US mothers exclusively breastfed for 6 months, the US would save \$13 billion per year and save 911 lives, including \$3.35 billion in health care costs [Bartick 2010]. These numbers are conservative

I strongly urge you to move SB 2015 forward.

Sincerely,

Marion Rice, Ed.D., IBCLC

Portland, Oregon

Gruber, Kenneth J., Susan H. Cupito, and Christina F. Dobson. "Impact of Doula on Healthy Birth Outcomes." *The Journal of Perinatal Education* 22.1 (2013): 49–58. PMC. Web. 31 Mar. 2017.