

factors may allow interventions to more effectively protect, promote, and support breastfeeding.

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17. PUERTO RICAN BABIES WITH DOWN SYNDROME: BARRIERS TO BREASTFEEDING

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Background: Breastfeeding is the optimal nutritional strategy for babies with Down syndrome. It provides protection against development of infections, improves tongue and mouth coordination, promotes tactile stimulation, and improves alertness.

Objective: Identify barriers to breastfeeding among Puerto Rican mothers of children diagnosed with Down syndrome.

Methods: A transverse-correlational design was used. The universe (N = 26) of mothers of children with Down syndrome receiving services through the Puerto Rico Down Syndrome Foundation was evaluated. Mothers were selected who had one child with Down syndrome of one year of age or less to reduce memory bias. A self-administered questionnaire, based on the available literature, was designed. Descriptive and inferential (Chi-square) statistics were used for data analysis.

Results: Only 80% of mothers initiated breastfeeding. The principal problem encountered for non initiation or early discontinuance was suction problems (84.6%), inadequate milk production (7.7%), inadequate knowledge (3.8%), and admission to NICU (3.8%). No statistically significant association was found in the study.

Conclusions: Infants with Down syndrome usually exhibit poor muscular tone at birth, and breastfeeding helps them to strengthen muscle tone. It is important to be patient when breastfeeding these babies, since the process can be difficult due to the multiple health problems, specially suction problems, presented by these babies.

18. PARITY ASSOCIATED ATTITUDE REGARDING APPROACH TO BREASTFEEDING AMONG LOW-INCOME PREGNANT WOMEN

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Background: Increasing the rates of breastfeeding is a compelling public health goal. Recognition and targeting of risk factors regarding maternal decision not to breastfeed may improve the effectiveness of interventions designed to promote good breastfeeding practices especially among populations who are traditionally less likely to initiate and sustain breastfeeding.

Methods: In the frame of the CDC/AAMC funded study entitled "Breastfeeding promotion program", we

collected data on the pregnant women's knowledge and attitude regarding breastfeeding before the initiation of an interventional program. Women, who are WIC program recipients and therefore, vulnerable to inequities in delivery of health care services, were the subject of this study. The data were analyzed with respect to the parity of the women (primipara versus multipara).

Results: A total number of 58 women at 35-40 weeks of pregnancy were surveyed (28 primiparas and 30 multiparas). Irrespective of the parity, the majority of these women were unmarried, without high school diploma, of Hispanic origin, and unemployed. Almost all of them planned to breastfeed their infants, had discussed with their partners issues regarding breastfeeding, knew his opinion about breastfeeding, believed that breastfeeding was not difficult to accomplish and therefore women could be successful at breastfeeding if they kept trying. More than one-third of the nulliparous and one-half of multiparous women considered breastfeeding and formula-feeding to be equally acceptable for their babies, and the majority believed that breastfed babies are healthier than formula-fed babies.

However, nulliparous women were less likely to have had any discussions with their mothers about the importance of breastfeeding (64.3% vs. 90.0%, $P < 0.02$), recognize the differences between breast milk and formula (50.0% vs. 83.3%, $P < 0.007$) and know about the advantages of breast milk as compared to formula for the baby's health (50.0 vs. 76.7%, $P < 0.04$). The majority (more than 60%) of mothers in both groups did not know if breastfeeding influenced the mother's health, what colostrum is or that it is good for their baby, did not reveal any knowledge regarding the breastfeeding technique and frequency of breastfeeding during the first month of the baby's life.

Conclusions: Irrespective of parity, low-income women who are at the end of their pregnancy demonstrate a high willingness to breastfeed their babies despite their lack of knowledge regarding breastfeeding technique and importance of colostrum, which may affect the in-hospital initiation of exclusive breastfeeding and its continuation.

19. BREASTFEEDING INFORMATION IN OB/GYN TEXTBOOKS NEEDS IMPROVEMENT

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Background: Pediatricians and obstetricians work side-by-side in educating and supporting the breastfeeding mother and baby. The breastfeeding information in textbooks used by each specialty needs to be consistent, accurate, and evidence-based. A recent study found the breastfeeding information in pediatric textbooks to be highly variable, and at times inaccurate and inconsistent.

Objective: The objective of this study was to determine if breastfeeding information in general ob/gyn textbooks published since 1999 is current and evidence-based.

Design/Methods: Five ob/gyn textbooks, all published since 1999, were reviewed using a standardized scoring sheet similar to the one used in the pediatric textbook study. Four reviewers (2 obstetricians, 1 pediatrician, and