

## Donated Milk for Healthy Term Infants. A Mini Review.

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Recently, due to the awareness that the use of breast milk is the intervention with the best cost / benefit ratio for the reduction of infant mortality [1-3], in some countries the authorities of the Ministry of health, if there is availability of donated human milk, recommends it as a supplement for term infants and in any case preferable to the formula.

In 37 countries including the United States, this opportunity is offered but there is little awareness among the new mother. In a study [4] the perception of women with full-term babies on the possibility of feeding their children with donated human milk has been evaluated, if there is a need for integration, even temporary, of breastfeeding, as an alternative to formula. Mothers who opt for donated milk are motivated by the naturalness of the choice compared to the synthetic properties of artificial milk, preferring, however, the milk of relatives and acquaintances, while those who opt for formula find it a more comfortable way especially for supplements that last only a short time and have shown perplexity about the risk of transmitting diseases or toxic substances through the milk obtained from milk banks.

Attention to donated milk has increased in the United States after two important authorities like The Baby Friendly Hospital Initiative and the Academy of Breastfeeding Medicine recommended it in the term newborn, based on the indications of the AAP and WHO that identify the human milk as ideal for all children [5,6]. In addition, a negative association between supplementation with full-term infant formula during the days of hospitalization at birth and the duration of breastfeeding is well known.

By virtue of this increased interest, over the past few years the works have multiplied [7-9], studying this very modern trend of using donated milk for term and healthy newborns. In particular, stands out a study [8] carried out in the North of the United States on 71 hospitals, of which 49 are served by a regional milk bank while the remaining part are hospitals with birth point. 43% of the first category and 29% of the second, consistently use donated milk for full-term infants and this percentage is increasing: this practice is associated with a higher rate of exclusive breast feeding at discharge. 83% of the operators interviewed about their knowledge and opinions on this practice, were strongly convinced that the use of donated milk is an effective way to promote exclusive breastfeeding in the hospital.

In another study [7] conducted by interviewing 30 mothers of healthy term infants about the temporary use of donated milk compared to the formula, they would consider this opportunity only for a short period given the difficulty of access and the lack of familiarity. The authors have evaluated this data at the base of a proposal to extend, where there is medical indication for supplementation in the first days of life, the use of donated milk since it could represent a stimulus to the more rapid return to breastfeeding and therefore a way to promote it.

In a Boston University center [9], the increased use of donated milk during the hospital stay and more specifically, in the last period, is documented and, as it is natural to expect when a new practice starts to spread, the need to promote studies is stressed to highlight

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the effects of the use of donated milk on breastfeeding and long-term outcome, always with the focus on identifying and standardizing as soon as possible strategies of milk supplementation for prolongation breastfeeding in full-term healthy newborns during hospitalization.

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