



Study the Influence of the Type of Feeding on the Course of Diseases

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Received 28th Aug 2022,
Accepted 29th Sep 2022,
Online 31st Oct 2022

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Abstract: This article provides information about the study of 70 case histories of neonatal children (0-43 days). The average age of the patients was 18.1 days ($\sigma = \pm 11.4$ days). Among them, there are 37 boys (52.9%), girls - 33 people (47.1%). Children were admitted to the hospital in the direction of the district pediatrician and emergency medical care. Patients were divided into 3 clinical groups: 1 - breastfeeding (30 children), 2 - artificial (29 children), 3 - mixed feeding (11 children). The task of our work was to study the influence of the type of feeding on the course of diseases and the state of the adaptive-protective system of the organism of neonatal children.

Key words: feeding patterns, children's health indicator, and neonatal age.

Relevance. Optimizing the nutrition of children in the first year of life is a key factor in improving the health of the child population. Rational breastfeeding of newborns is the key to their adequate growth and development, high quality of life at an early age and in subsequent years. The use of breast milk for the treatment of diseases is mentioned in the texts of ancient times. Every year, more than 10 million children die from preventable causes. If all children from birth to six months of age were exclusively breastfed, this could save the lives of 3,500 children a day, UNICEF experts believe. However, in the world, according to the UN, only 39% of babies are exclusively breastfed in the first 6 months of life.

According to the results of the survey of mothers and children in Belarus, 19% of children under the age of six months were exclusively breastfed, and 41.4% of children were predominantly breastfed, which is well below the recommended level.

Currently, there are a number of studies, according to which breast milk is effective in the fight against many pathogenic bacteria. Breast milk inhibits the growth of 3 out of 9 strains that cause infantile conjunctivitis: *Neisseria gonorrhoea*, *Moraxella catarrhalis* and *Streptococcus viridans*, with the control drug inferior in its antibacterial activity. A model with random levels of factors showed that the overall level of mental deviations in the absence of breastfeeding at least up to 6 months is 1.45 times higher.

Purpose: to study the influence of the type of feeding on the course of diseases and the state of the adaptive-protective system of the organism of neonatal children.

Objectives: To assess the correlation between feeding patterns and health outcomes in neonatal children. To study the structure of morbidity with different methods of feeding. To analyze the correlation of the rates of physical development of children. Establish a relationship between the type of feeding and the duration and volume of antibiotic therapy.

Material and methods. A retrospective method was used to study 70 case histories of neonatal children (0-43 days). The average age of patients was 18.1 days ($\sigma = \pm 11.4$ days). Among them, there are 37 boys (52.9%), girls - 33 people (47.1%). Children were admitted to the hospital in the direction of the district pediatrician and emergency medical care. Patients were divided into 3 clinical groups: 1 - breastfeeding (30 children), 2 - artificial (29 children), 3 - mixed feeding (11 children).

All children underwent a standard examination and treatment for the underlying and concomitant diseases. The analysis of clinical case histories, nutrition sheets, anthropometry was carried out, the anamnesis of pregnancy and childbirth was studied, clinical and statistical data processing was performed.

Results and its discussion. When studying the perinatal period of the children of the surveyed group, in the anamnesis, pregnancy and childbirth proceeded physiologically - in 29 (41.4%) mothers, pathologically - in 41 (58.6%) mothers. Childbirth was carried out naturally in 54 (77.1%) women in labor, by caesarean section in 16 (22.9%) women in labor. Within 2 hours after birth, 53 children were put to the breast, 2 hours after birth - 17 children.

The main comparison groups were formula-fed and breast-fed children. The control group of children - on mixed feeding. Artificially fed children mainly received mixtures of domestic production "Bellakt" (65.4%); as well as mixtures of foreign production: Semper (27.8%), Nestle (6.8%),

From the data in Table 1, it can be seen that in most patients who were hospitalized, regardless of the type of feeding, pathology of the respiratory tract predominates in the structure of the underlying disease. However, ARI is more common in formula-fed infants than in breastfed infants.

In the structure of concomitant pathology, the leading role is occupied by the conditions of the perinatal period. With natural feeding, neonatal jaundice occurs more often than in children who are bottle-fed (table 1). Also in the structure of concomitant pathology, the following are most often noted: anemia, food allergies, omphalitis.

At the same time, from the data of Table 2 it is shown that inflammatory changes in the blood during natural feeding are expressed in less than half of the cases, in the artificial form of feeding in most children.

Anemia and food allergies are less common in formula-fed infants than in breastfed infants. This is due to the fact that most pregnant and lactating women in the Republic of Belarus have iron deficiency in the body, and, accordingly, in breast milk.

There is also a clear relationship between the type of feeding and the time of admission of children to the hospital. Artificially fed children were admitted to the hospital on the 6th day of life ($\sigma = \pm 2.2$ days), i.e. in the early neonatal period. While breastfed at the age of 28 days ($\sigma = \pm 3.1$ days), i.e. in the late neonatal period.

When analyzing the drugs used for the etiotropic treatment of children in the study group, we obtained the following results.

The total duration of antibiotic therapy in children with an artificial type of feeding is longer than in children with a natural type of feeding, and is 10.7 days ($\sigma = \pm 1.8$ days), children on natural feeding - 8.3 days ($\sigma = \pm 1.6$ days), on mixed - 8.9 days ($\sigma = \pm 1.6$ days).

With natural feeding, the number of antibacterial drugs used for treatment is 1-2 drugs, for children with an artificial type of feeding - 2-4 drugs. Analyzing the daily dynamics of weight gain, the following pattern was noted. Naturally fed children gained weight better than artificially fed children. Weight gain in breastfed children was 35.7 g/day ($\sigma = \pm 5.2$ g/day). In children on artificial - 24.5 g / day ($\sigma = \pm 4.7$ g / day). In children on a mixed type of feeding - 34.4 g / day ($\sigma = \pm 5.4$ g / day).

Conclusions:

The incidence of respiratory infections in neonatal age is higher in formula-fed children. Anemia and early onset of atopy are less common in formula-fed infants than in breastfed infants. The dynamics of daily weight gain in children on natural feeding is higher than on artificial feeding.

The duration of an effective course of antibiotic therapy in breast-fed children is shorter than in artificial ones. The period of early and late adaptation in breastfed children is more favorable and with minimal complications. Breast milk is the only type of feeding that ideally provides all the needs of a neonatal child in micro- and macronutrients, has an immunomodulatory effect, promotes optimal physical, neuropsychic, intellectual harmonious development of the personality.

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