Journal of Human Lactation

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Letters to the editor

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J Hum Lact 2003 19: 362

DOI: 10.1177/0890334403194003

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Letters to the Editor

The Importance of Collaboration

Apparently, this method of paced bottle-feeding,¹ used to give a baby time to coordinate suck/swallow/breathe, has been used by occupational therapists and speech/language specialists for a long time.

After attending a Wolff and Glass conference on infant suck and feeding, I am reminded of the importance of collaboration and looking into the scientific work of other disciplines. Breastfeeding is the center of many overlapping circles: nursing, doula work, midwifery, many branches of medicine, speech pathology, lactation specialists, occupational therapy, chiropractics, nutrition, and dietetics to name but a few.

No one discipline has all the answers. We all need each other to best help mothers and babies. I suggest we all network in our communities and find new friends. We can learn from each other!

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Reference

1. Kassing D. Bottle-feeding as a tool to reinforce breastfeeding. *J Hum Lact*. 2002;18:56-60.

Comments on the Issue of Industry Financing/Influence

I appreciated your editorial and request (*J Human Lact*. 2003;19:133-135) for comments on the issue of industry financing/influence.

I do not oppose any contact with industry of any kind. Though I know some are justifiably worried that industry efforts may be behind the culture of pumping one sees in the United States, the fact that it is one of the few countries in the world without a single legally mandated day of paid maternity leave strikes me as a more plausible causal candidate.

In contacts with industry, 2 questions should be answered:

1. In this particular project/cooperation, do we have identical objectives?
2. Is there any way we can imagine in the future that the industrial partner could abuse/misuse this cooperation in a way that differs from these objectives?

The infant food industry often calls for more cooperation by us in the breastfeeding "community," but, doubting that these 2 criteria CAN be fulfilled, I generally call for less (<http://www.geocities.com/HotSprings/Spa/3156/code.htm>).

How can we share objectives with the industry that stands to lose financially from any increase in breastfeeding? Many who have taken industry money have found, to their sorrow, that their good names are then misused by the industry: "Dr. X and Professor Y have happily cooperated with us. Surely they would not do so if we were not a company abiding by the Code/following ethical practices, etc."

When they are under fire, the infant food industry needs this kind of PR; here are 3 true stories about the lengths they will go to:

1. In 1975, I studied the impact of infant food advertising in St. Vincent. I found that women started bottle-feeding at an earlier age if they recalled formula ads more (using multiple regression and controlling for, among several other things, those who simply had been exposed to more baby food advertising in general). I tried to get the major outcome of this study published by a well-known nutrition education journal, which took funding from all sorts of food companies, including baby food companies. (I assume they still do but would not know, as I do not attend their meetings nor read their journal any more.)

I responded to the many demands made by all 3 referees. Nearly a year went by, so I called, but the editor said an "informal editor" found that the conclusions were not supported by the data. Getting it published elsewhere¹ delayed it further, so it was not published in time to enter the debate before the Code was passed by the World Health Organization. The Ambulatory Pediatrics Asso-

ciation, the only professional body in the United States at that time to support the Code, quoted it in support of their embattled position.

2. In the late 1970s, a friend drafted a paper on factors influencing breastfeeding in Jamaica, none of which included industry activities. Before it was published, he was approached by 2 baby food companies offering to finance more of this kind of research. To the consternation of the editor, he then insisted on adding a couple of paragraphs on the likely impact on breastfeeding of the infant food advertising, free samples, milk nurses, and so forth being used by infant formula companies in Jamaica at that time.
3. In 1980, Judith Gussler of Ross Laboratories (manufacturer of Similac) and Linda Briesemeister published a review of 43 articles supporting their view that the main cause for the decline in breastfeeding was "the insufficient milk syndrome" (IMS) stemming from mothers' failure to have constant body contact with their babies.

Colleagues and I published a response² reviewing an additional 49 studies suggesting that IMS was not quite this common. We pointed out that "baby weaned itself" was the predominant explanation given by mothers in some places where IMS hardly was mentioned. We hypothesized that both are often simple explanations for complex decisions, the one that local norms expect as an explanation for stopping breastfeeding. We doubted that biology was a major determinant. Time has proven us correct, as breastfeeding rates have skyrocketed in areas where it is adequately supported (much of Scandinavia and Canada), though even today I think that carrying your baby around on your body is a good idea whenever possible!

I asked if I could order a couple hundred reprints, but the editor would not take such small orders. "Do you know how many were ordered by Ross Labs of the one you commented on? Several thousand. Now they have sent us a second order."

I later heard that Ross sent it to every pediatrician in the United States. Since then I often see their article cited but not ours (which would strike me as the fair thing to do, especially since Gussler and Briesmeister were given the opportunity to publish a rebuttal immediately after it). The rea-

son is of course that more have the Ross reprint handy than read the journal.

In the article cited above, I point out that

a company would not be fulfilling its socially approved mandate if . . . charitable behavior did not support its overall goal of earning profits for its shareholders. Would any of us be pleased if, on retiring, we were told that our pensions could not be paid out because the funds had been used for charitable purposes rather than to earn profits?

Let's not be so naive as to believe that the infant food industry wants to work as our partners to promote infant health. If they actually did so, they would be as derelict in their duties as we would in ours by agreeing to such a partnership.

I do not buy the argument that we are so mature, smart, unbiased, and so on that we cannot be influenced by formula industry money. Once such money is accepted, independence is out the door.

And I, for one, will look around to find another association/journal I can trust.

Ted Greiner, PhD
Uppsala, Sweden

References

1. Greiner T, Latham M. The influence of infant food advertising on infant feeding practices in St. Vincent. *Int J Health Serv.* 1982;12:53-75.
2. Greiner T, Van Esterik P, Latham MC. The insufficient milk syndrome: an alternative explanation. *Med Anthropol.* 1981;5:233-257.

Further Comments on the Issue of Industry Financing/Influence

I was pleased to see the call to debate the ethics of using research or other information funded by commercial interests in your latest editorial.¹ But shouldn't this debate begin with scrutiny of the journal's own policy?

The 2003 "Instructions for Authors"² state (in part) that "a competing interest exists when professional judgment concerning a primary interest such as patient welfare . . . may be influenced by a secondary interest, such as financial gain." A glance at the journal, however, shows its willingness to expose readers to such competing interests, which, though declared, may still exert a powerful influence.

Research that examines the effects of particular pumps is welcome. It is welcome that funding from the

company whose pump is being examined is declared. However, it leaves difficulties in evaluating the research, and it also leaves basic research—for example, examining the differences in milk expressed by hand or by pump and resultant health outcomes for babies—undone.

In a recent, large, prospective study of American women,³ there was an association found between the use of manual pumps and maternal mastitis. Until we know more about this association, unreserved endorsement of these products should surely be treated with caution. Breast pumps are of benefit in certain circumstances but may be harmful to some women and babies.

When I subscribed to *JHL* in 1998, I was immediately struck by the range of advertisements for breast pumps and other gadgets. Since then, each issue has contained more ads, and the products have become less directly involved in breastfeeding (eg, pumps) and more of the “let’s make money out of breastfeeding women” variety. I can only assume that the intention is for lactation professionals to recommend, endorse, or stock these products as agents for sale or hire. Indeed, one advertisement promotes the pleasure that *recommending* the product will give!⁴

Most of us are wary of contact or association with companies that manufacture breast milk substitutes. We should be equally aware that a focus on pumps and breast milk feeding and a gadget orientation promotes another sort of “commodification.”⁵ In our relationships with women, whether they are professional or through our volunteer standing, we should be aware of our ethical responsibilities and take them very seriously. *JHL* could assist all of us working in this area by reexamining editorial and advertising policies and by giving a stronger emphasis to independent research and information.

Magda Sachs
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References

1. Heinig MJ. The “price” of information. *J Hum Lact*. 2003;19:133-135.
2. Instructions for authors. *J Hum Lact*. 2003;19:116-119.
3. Foxman B, D’Arcy H, Gillespie B, Bobo JK, Schwartz K. Lactation mastitis: occurrence and medical management among 946 breastfeeding women in the United States. *Am J Epidemiol*. 2002;155:103-116.
4. Medela advertisement. *J Hum Lact*. 2003;19:125.
5. Katz Rothman B, Simonds W. Breastfeeding: beyond milk. *MIDIRS Midwifery Digest*. 2003;13:223-226.

Editor’s Reply

JHL editorial policy regarding competing interests may be found in the June 1999 issue.¹ Briefly, it is the policy of this journal to publish articles that are found by the peer-review process to have scientific merit and relevance to our readers, despite potential competing interests. In cases in which competing interests are identified, they are declared so that our readers may make their own decisions regarding the merit of the work. Our advertising policy has remained unchanged since the inception of the journal in that we do not accept any advertising from companies that are in violation of the World Health Organization Code.

While I agree it is the intention of the advertisers to convince our readers “to recommend, endorse, or stock their products,” the presence of advertisements in *JHL* does not reflect endorsement of any products or services by any member of the editorial staff or by ILCA, nor is there any association between sales for advertising in *JHL* and the editorial process. I concur that the merit of any information received from industry sources, whether through advertisements, product endorsements, or industry-funded research publications must be considered carefully. However, I also believe that the readers of *JHL* have the right to receive industry-related information and do not need to be protected from undue influence by rejection of advertisements in *JHL*. I am confident that our readers have the capacity and interest to determine what, if any, industry information is of use to them.

Reference

1. Nommensen-Rivers L, Heinig MJ. Competing interests and scientific publication. *J Hum Lact*. 1999;15:87-88.