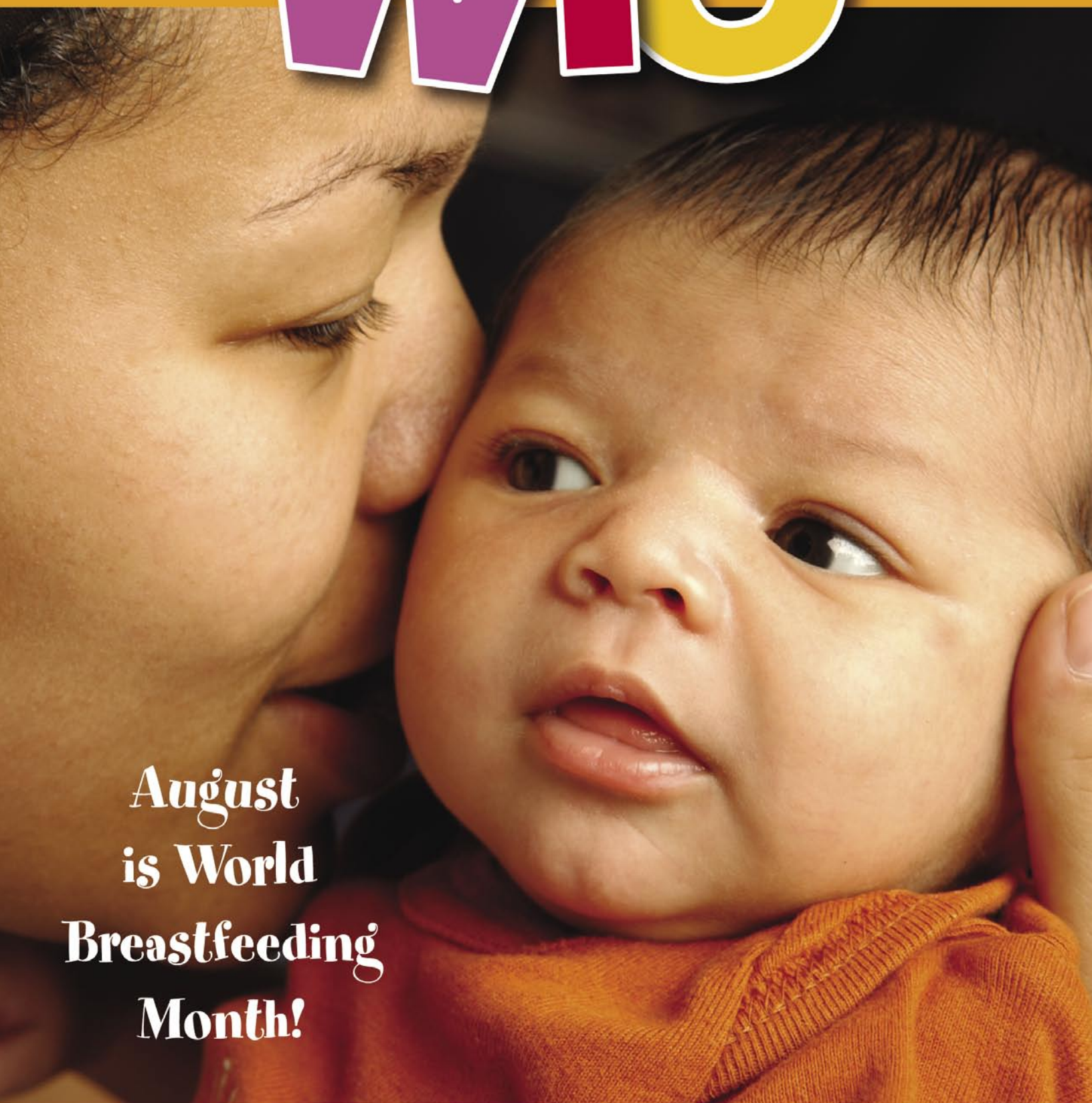


texas **WIC** news



**August
is World
Breastfeeding
Month!**

from the Texas WIC Director

In the words of Patricia Daniels, Director of the Supplemental Food Programs Division at USDA:

At its heart, an organization is simply a collection of people; in the case of WIC it's a collection of dedicated, capable people who have made WIC the nation's premier public-health nutrition program. This is a salute to you — the exceptional people who administer WIC with such vitality, continuity, and continuous innovation.

Innovative initiatives are essential when it comes to tackling important health issues — such as how families choose to feed their infants. The new initiative to promote breastfeeding among African Americans is a perfect example. The statewide rollout of this initiative, now underway, was prefaced by a comprehensive social-marketing effort to target the needs of African-American WIC participants in a culturally sensitive way. The effort included research on beliefs and attitudes about infant feeding among African-American WIC participants, development of materials in print and other media based on research findings, field testing of the materials, and a pilot program that measured changes in knowledge and attitudes of the families, health-care providers, and community members involved.

Breastfeeding Outreach The Benefits Span Generations



by Mike Montgomery
Texas WIC Director

Researchers working with the pilot program found the changes in attitude were most prominent among African-American teen participants who had shown little interest in breastfeeding prior to the campaign. It gives me great pride when I hear that the WIC program is influencing young mothers to breastfeed. It's a reflection of the pride

I felt last year when my own daughter was breastfeeding her baby girl — my first grandchild. Family traditions are powerful and enduring. I am thrilled that my daughter and the young WIC participants influenced by the new campaign are starting family traditions of good health for their children and generations to come.

The American Academy of Pediatrics recently reinforced its position on the importance of breastfeeding in its February 2005 revision of its policy statement, "Breastfeeding and the Use of Human Milk." The new AAP statement expands on the benefits of breastfeeding for children to include a decrease in the incidence and severity of late-onset sepsis in the preterm infant, a possible decrease in the risk of type 2 diabetes, leukemia and Hodgkin's disease, overweight and obesity, hypercholesterolemia, and asthma, as well as a 21 percent reduction in postneonatal infant mortality rates. The new AAP statement shares the position of other national and worldwide health organizations that breastfeeding is more than just a feeding option — it's an important health decision. This summer's World Breastfeeding Month theme,

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Mike Montgomery
Texas WIC Director

Linda Brumble
Manager
Nutrition Education / Clinic Services Unit

Shari Perrotta
Manager
Publishing, Promotion and Media Services

Mary Van Eck
Manager
Nutrition Education Branch

Patti Fitch
Manager
Clinical Nutrition Branch

Sherry Clark
Publication Coordinator

Clare Wolf
Managing Editor/Designer

Chris Coxwell
Photographer

Brent McMillon, Irma Choate,
Kanokwalee Pusitanun,
Lorise Grimball, Sharon Hipp
Contributing Designers

Health and Human Services
Printing Services
Printing

Leticia Silva
Subscriptions

WIC Warehouse
DSHS Automation Mailroom
Mailing



Department of State Health Services
Nutrition Services Section
1100 West 49th St., Austin, TX 78756
<http://www.dshs.state.tx.us/wic/mainpage.htm>

Comments may be sent to the managing editor at Publishing, Promotion, and Media Services, 1100 W. 49th St., Austin, TX 78756, or by e-mail to WICNewsEditor@dshs.state.tx.us

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Mother's Milk

- It's More Than Just Food

by Amanda Hovis
nutrition education consultant



This year's World Breastfeeding Month theme, **Mother's Milk — It's More Than Just Food—** summarizes the core difference between breastmilk and formula. Formula is just food, while Mother's Milk provides protection and optimal nutrition to the nursing infant.

Here are our top 10 reasons why Mother's Milk is more than just food.

1. Mother's milk is packed full of specialized proteins and cells such as immunoglobulins, antibodies, and leukocytes to build and protect the infant's immune system.
2. The immunological properties in breastmilk are so powerful that even pasteurized donor milk still significantly decreases a pre-term infants risk of infection compared to formula.
3. Formula-fed infants are 60 percent more likely to develop ear infections (Cava et al. 2002: 7), 80 percent more likely to develop lower-respiratory infections (ibid.: 45), and two to three times more likely to suffer from diarrhea (Silfverdal, Bodin, and Olcen 1999).
4. Studies indicate that breastfed infants may have a decreased risk of developing diabetes, lymphoma, leukemia, asthma, and obesity.
5. Breastfed infants, especially pre-term infants, have enhanced performance on cognitive-development tests compared to formula-fed infants.
6. Mother's milk is dynamic and changes throughout a feeding and according to the age of the baby to meet the baby's specific needs at a given time.
7. Breastfeeding decreases the mother's risk of developing breast and ovarian cancers and osteoporosis.
8. Mothers who breastfeed have less postpartum bleeding and more rapid uterine involution, and they return to pre-pregnancy weight earlier.
9. Breastfeeding releases oxytocin, the so-called mothering hormone. Research indicates that mothers who breastfeed may be less likely to abuse or neglect their infants (Strathern 2002).
10. Infants are exposed to food flavors via breastmilk and are more likely to enjoy foods with those flavors when they start eating solid foods (Mennella et al. 2001: E88).

For all the reasons listed above, it's obvious that mother's milk is superior to formula and more than just a food. More and more WIC moms are getting the message and initiating breastfeeding, but many of them stop after the first few days or weeks because they lack support and knowledgeable assistance. This August, increase support in your community by educating them on the benefits of breastfeeding. Provide breastfeeding posters and information to your local physicians, have a health fair or World Breastfeeding Month celebration, or ask your local mayor or city council to proclaim August Breastfeeding Awareness Month. For more ideas and information, check out the Texas WIC World Breastfeeding Month web site: <http://www.dshs.state.tx.us/wichd/bf/wbm.shtm>.

References

- Cava, N., et al. 2002. *Quantifying the benefits of breastfeeding: A summary of evidence*. Academy for Educational Development, Linkage Project.
- Silfverdal, S. A., L. Bodin, and P. Olcen. 1999. Protective effect of breastfeeding: An ecologic study of *Haemophilus influenzae* meningitis and breastfeeding in a Swedish population. *Int. J. Epidemiol.* 28(1): 152-56.
- Strathern, Lane. 2002. Is breastfeeding protective against child abuse and neglect? The biology of nurturance explored. Conference paper, 14th International Congress on Child Abuse and Neglect, Denver, CO.
- Mennella, J. A., C. P. Jagnow, and G. K. Beauchamp. 2001. Prenatal and postnatal flavor learning by human infants. *Pediatrics* 107(6): E88.



African-American Promotion Campaign...

Breastmilk: 100% Natural Ingredients was the theme repeatedly heard in southeastern Texas during the first half of 2004, when a WIC campaign targeting African-American women, their families, and their community was piloted. While WIC participants were the primary target audience, the campaign also involved their partners, grandparents, health-care providers, and the community. Social-marketing researchers worked closely with the campaign to evaluate the effectiveness of campaign components and field-tested the materials with intended recipients.

Campaign materials included three core brochures targeted to the pregnant woman, her partner, and her parents. Materials for health-care providers and community-outreach personnel were developed, along with radio, television, and outdoor public-service announcements. In addition to WIC clinics, materials and campaign information were delivered to health-care providers and hospitals through personal visits and disseminated to the community by way of health fairs and church outreach.

The core brochures field-tested extremely well

among WIC participants and their family members. Seventy-nine percent of WIC participants passed the partner and grandparent brochures on to the intended recipients. Some claimed their partners were particularly happy to receive the materials.

I got the brochure for fathers at the hospital. My husband was like, "All right, something for me!"

The hospital gave the brochure for fathers to me. It was in my goody bag. My partner picked it up and said, "Support your partner. Let me see what I can do." He didn't feel so left out anymore.

The media played a key role in changing attitudes and stoked interest in breastfeeding. Five radio spots rotated on local hip-hop and rhythm-and-blues stations. One particular hip-hop station was extremely popular among WIC participants where the radio ads were often prefaced by the morning DJ's own stories about breastfeeding and even prompted a call-in discussion. WIC staff claimed this had a positive impact, particularly on young women. As one counselor said, "If it can be said on that station, it must be cool."

Breastfeeding

...Changing Knowledge and Attitudes

by Tracy Erickson, R.D., L.D., I.B.C.L.C.

A TV ad rotated on the major networks as well as Black Entertainment Channel and The Learning Channel during the documentary series, *A Baby Story*. One WIC counselor said she introduced her breastfeeding class with a question about what people had heard lately about breastfeeding, which opened the door for participants to discuss the advertisements. Among participants, 50 percent remembered hearing the radio advertisements and 48 percent remembered seeing the television commercials.

A majority of health-care providers and WIC staff reported that the campaign had a positive effect on community members' attitudes toward breastfeeding; they also reported a noticeable change in African American patients' attitudes toward breastfeeding. They not only reported that more pregnant African American patients expressed an interest in breastfeeding, but also noticed a marked difference in the number and types of questions that patients asked about breastfeeding. They often expressed the opinion that this change was sparked by the campaign's television and radio advertisements. Many remarked that the most notable change in attitude, surprisingly,

was among African-American teenage mothers, who generally have shown little interest in breastfeeding. Their comments about the campaign, represented by the following quotes, were consistent:

In the past all you'd hear was "It hurts." Now they say it is best for the baby. (WIC staff member)

They are more informed. They come in and say, "I want to breastfeed." (nurse from a doctor's office that sees more than 50 percent of study participants)

I'm really surprised — we have a lot more young girls trying to breastfeed than I ever remember before, and I've been here 13 years. They used to say, "No, I'm not doing that." (nurse from a doctor's office)

The media has softened the attitudes. Our clients are more receptive. They've heard it is good and are more willing to try it. I'm fielding more questions than I used to. People are trying to confirm what they have heard on the radio. (midwife from a public-health clinic)

I've noticed that more women are considering it. I've noticed an increase in African-American mothers in my prenatal classes. Now they are talking about it more and are open to it more. I think it is the ads. (nurse-lactation consultant)

One clinic reported an increase in attendance by African Americans in breastfeeding classes, from 14 in April to 31 in August. Staff also reported an increase in the number of grandmothers and fathers attending these classes. One clinic reported that its most recent breastfeeding class had contained three fathers and three grandmothers, which is more than normal.

During the course of the six-month campaign, WIC African-American breastfeeding rates rose significantly in half of the participating WIC agencies — from 30.8 percent to 40.8 percent in Hardin County and from 15.4 percent to 23.4 percent in Orange County. While the rates did not increase at all local agencies, heightened awareness of the benefits of breastfeeding was found. In interviews after the campaign, women were more likely to say that one of the reasons breastfeeding is best for your baby is that it can make your baby smarter as well as healthier. They were also more aware that breastfeeding can help them lose weight. All three messages are stressed in the campaign advertisements and materials.



What If She Answers

by Lynn Wild, M.A., R.D.
nutrition education consultant

A common acronym for alcohol, tobacco, and other drugs is ATOD. Pregnant women use the legal drugs alcohol and tobacco more often than illegal drugs. Alcohol and tobacco used during pregnancy can cause significant harm to the fetus, in addition to putting the mother at risk for pregnancy and labor complications. Irreparable lifelong problems caused by ATOD use during pregnancy are preventable. WIC staff routinely screen for and educate women on the dangers of ATOD use, and when necessary, refer WIC participants to substance abuse treatment.

The Screening

Do you smoke or use tobacco products?	(a yes = Risk Code 371)
Do you drink alcohol?	(a yes = Risk Code 372)
Do you use street drugs?	(a yes = Risk Code 373)

Every week thousands of women respond to these questions on the WIC Health History form with yes or no answers. Professionals who work with substance-using women note that there are many barriers keeping a woman from answering honestly about drug use. One huge barrier is the fear that Child Protective Services will remove her children. Despite barriers, the WIC nutrition risk code data shows that women do respond with yes to the questions. What can a pregnant woman expect when she answers yes?

“Yes”

It is important for the mother to know that she will not automatically lose her children for ATOD use. Substance use is not handled the same as child abuse. Although many children of substance abusers are neglected, substance-abusing women rarely abuse their children. The best thing the woman can do for herself and her children is to get treatment.

The Referral

Tobacco

A pregnant woman can receive from three to five 30-minute free telephone counseling sessions through the American Cancer Society Tobacco Quitline. Counselors follow a pregnancy-specific protocol with each session occurring at the woman's convenience at her home by telephone. Research indicates telephone counseling can double a woman's chance of quitting tobacco use. The Quitline provides a great service for women who don't have the time or resources to attend cessation counseling.

The pregnant woman can call the Quitline toll-free number herself, 1-877-YES QUIT, or ask the WIC certification authority to fax the ACS FAX Referral form to 1-877-747-9528. Quitline will contact the woman within a week to make a telephone counseling appointment.

AOD: Alcohol and Other Drugs

All services give priority to pregnant women. For treatment information, the WIC certification authority should provide the woman with the toll-free number to the Partnership for a Drug-Free Texas, statewide hotline, 1-800-832-9623, or 1-877-966-3784, (1-877- 9-NO DRUG). When the woman calls, she will be asked if she needs treatment or prevention and where she lives. She will be given the numbers for the closest DSHS-funded treatment providers and regional Outreach,

Screening, Assessment and Referral Services, referred to as OSAR. Women seeking treatment can start with either DSHS-funded treatment providers or the OSAR services, both offer assessment, treatment recommendations, and referral processes.

OSAR Services

A pregnant woman who responds affirmatively about drug use and seeks treatment can contact the OSAR Service from the WIC clinic and receive a 10 to 20 minute intake and screening. At that time, she can schedule a visit to the OSAR office for a more complete assessment and treatment recommendations. Depending on the recommendations, the OSAR will help her contact the appropriate center to sign up for treatment. If the pregnant woman is an injecting drug user, she will go to methadone maintenance. Other drug users will be admitted to a detoxification center for three to seven days. After detoxification, the woman will enter a residential treatment facility when a bed is available.

Pregnant and Postpartum Intervention Services

Pregnant and Postpartum Intervention providers, throughout the state, have substance abuse counselors who are willing to schedule time at WIC on prenatal clinic days for assessment and counseling. The likelihood of a woman accepting treatment is greater if she has immediate contact with a counselor. Professional counselors available at the clinic on a routine basis offer an opportunity for pregnant women who use ATOD to receive help.

For more information on treatment services for women in Texas or the list of Pregnant and Postpartum Intervention providers, contact Judy Brow, Specialized Female Services Coordinator, Texas Department of State Health Services, at judy.brow@dshs.state.tx.us.

City of Dallas WIC Celebrates 30 Years

...with 160
employees
who have
worked
1,282 years
collectively
for the
Program

by Shannon O'Quinn, R.D., L.D.
WIC manager, Local Agency #7

On October 28, 2004, City of Dallas WIC staff gathered for WIC's 30th Anniversary celebration. Dallas WIC Training Coordinator, Jay Harvey, R.D., L.D., organized the entire event with other staffers assisting. Kelly Eugenio, R.D., L.D., baked four delicious homemade cakes with the Texas WIC logo. All WIC staff received a set of items with a "30th anniversary" theme, including WIC polo shirts, travel mugs, penholders, and tote bags.

The event included a special appearance by previous long-time WIC director Marie Zackowski. Marie delivered a Power Point presentation on the history of the Dallas WIC program. Those attending learned lots of interesting facts from the past and were able to view pictures of WIC staff, participants, and old clinic sites. Marie read several "thank you" notes she had collected over the years and showed us the picture of foods WIC participants had drawn on diet-recall forms in the early days when language was a barrier. "The entire presentation was very informative for a new WIC manager for the biggest agency in Texas," says Shannon O'Quinn, WIC director.

Also on the agenda was a presentation to WIC employees for years of service working for the City of Dallas. The city's Assistant Director for the Environmental and Health Services Department, James Mongaras, presented WIC employees with service pins. O'Quinn was amazed at the years of service the City of Dallas WIC employees had amassed with the WIC program.

During my first week on the job in Dallas, my first priority was to visit all 25 WIC clinics and meet the WIC staff. During this entire week I asked a lot of WIC employees, "How long have you worked for WIC?" I found that many Dallas WIC employees have worked for the WIC program for a long time. I decided to add up all the years the WIC employees had worked for WIC, including time at other Texas agencies and other state WIC programs. The City of Dallas employs 160 employees and has 1,282 years of experience collectively working for the WIC program! That's an average of eight years per 160 employees working for WIC! That is something for Dallas WIC to be really proud of — it demonstrates dedication, loyalty, and an abundance of knowledge.

It is hard to believe that the Texas WIC program has reached a 30-year mark. We are now seeing a third generation of families in the program. WIC has made a real difference to young families — and the City of Dallas WIC program has been a big part of that success!

Test Your Nutrition

I.Q.

by Eaton Wright, B.S., NUT
nutrition expert

Eaton Wright here and it's that time again. Time to write about one of my favorite topics: the SUPER benefits of breastfeeding. At the risk of being highly repetitive, there is no formula that even comes close to breastmilk. Not only does breastmilk have nutrients that the "latest-greatest" infant formula will never have, the act of breastfeeding provides physical and emotional closeness that a formula fed infant may not receive.

Now on with the "Test Your Breastfeeding I.Q." quiz.

Quiz

1. True or False? Like infant formula, the composition of breastmilk does not change.
2. Which of the following is not a breastfeeding position:
 - a. cradle
 - b. cross-cradle
 - c. clutch/football
 - d. side-lying
 - e. the Texas Splashdown
3. True or False? Breastfed babies should be weaned when teeth first appear.
4. The consistency of a breastfed babies stool has been described as all of the following, except:
 - a. cotton candy
 - b. pea soup
 - c. custard
 - d. scrambled eggs

Answers

1. False. While formula is formula, breastmilk changes as a baby develops. Early on, colostrum, a thick, yellowish-colored milk, is produced. The higher concentration of antibodies, protein, and minerals in colostrum make it the perfect food for newborn babies. A week or so after delivery, as breastmilk begins to mature, it is produced in greater quantity with a higher fat content.

2. The answer is e. the Texas Splashdown. Cradle, cross-cradle, clutch/football, side-lying are all breastfeeding positions. The Texas Splashdown is not a breastfeeding position, but a crazy water ride at Sea World. I took my wife, Ms. Always Wright, to Sea World for her birthday. She forced me to ride every-single ride in the park. Yikes!!!

3. FALSE! Baby's teeth come in varying ages and intervals. Many babies do not bite, but those who do may be so startled by mom's reaction that they won't do it again. One tip: When a baby bites don't push her off the breast; instead, pull her in close. Her nose will be pressed against the breast and she will open her mouth to breathe.

4. Now that I've spoiled your appetite for the next 120 years, I can tell you the answer is a. cotton candy. I can also tell you that it is NOT a good idea to eat a jumbo-sized bag of cotton candy before riding a roller coaster called the Great White.

As always... Breastfeed your baby for a BIG baby brain and HEALTHY baby body.

And... don't forget Texas Law (Texas Health & Safety Code § 165.002) entitles a woman to breastfeed her baby in any Texas location in which the mother is authorized to be.

About the author: Eaton Wright is a certified NUT based in Austin, Texas.



WIC Staff Remembers

by Shelly Ogle
Editor DSHS Staff News

Marie Garland, the immunizations nurse for Texas WIC since 1995, died April 11, 2005, in an Austin hospital. She was 56.

A funeral service for her was held in Blanco on April 13. In a church full of mourning friends and family, the pastor read a moving letter written by Garland's 11-year-old niece, Meredith Clark, about how her "Aunt MiMi" had been her best friend and always a comfort. Garland's only sister was Meredith's mom, Martha Clark, who lives in Houston; the two women spoke with each other on the phone nearly every day.

Garland had a compassionate and giving nature. "Marie was such a comfort to me when my grandmother died," says Charlene Hancock, an administrative assistant with WIC and Garland's closest friend at work. The two were cubicle neighbors, and Hancock visited Garland often during Garland's recent hospitalizations. In fact, they had spoken with each other on the phone three times on the day that Garland died.

"Marie was very resourceful and an excellent listener," says Hancock. "After talking with her or getting her take on things, you had a sense of relief. She was a great friend and like a mother to me."

Garland's supervisor, Patti Fitch, manager of the Clinic Services Branch of the DSHS Nutrition Services Section, admired Garland's take on life. "With her wonderful sense of humor and

a Good Friend and Co-Worker *Marie Garland*

her appreciation for life's follies, she could make me laugh and cry within split seconds," Fitch says. "She believed in justice and fairness, loved her family dearly, and was loved very much by DSHS staff."

Many of Garland's colleagues, including WIC nutritionists Isabel Clark, Elaine Goodson, and Matt Harrington, as well as Mary Van Eck, manager of the section's Nutrition Education Branch, praised Garland's willingness to help co-workers seeking medical information.

"She was always willing to conduct Web searches and provide references," says Van Eck. "She was an amazing person and a wealth of valuable information and insight. Even in poor health, she was always willing to help."

"Marie was very bright," says Goodson. "Whenever you'd ask for her opinion on some medical question, she was always right. And she had a heart. She really cared about the welfare of her clients and co-workers."

"She was always up on the latest medical findings and advisories," agrees Clark. "And she was the only person who could give me a flu shot without hurting me! I'll sure miss her every year at flu season, but mostly I'll miss how she was always learning and sharing what she learned."

Garland earned her nursing degree in 1972 at Texas Woman's University in Denton. After working as a nurse and claims analyst in Dallas, she moved to Austin in 1978 to work for 12 years as a medical analyst at the former Texas Department of Human Services. She was with TDH, and then DSHS, since 1990.

As WIC's immunizations nurse, she often worked with Jack Sims, manager of the Immunizations Branch in the DSHS Disease Prevention and Intervention Section. "It was quite a shock to find that Marie had passed away," he says. "In the years I've worked with her, her dedication and passion to both WIC and immunization issues were always evident."

Garland had two children: a son, Richard, and a daughter, Melissa, who married Jim Barner on March 26 in Granbury while her mother was hospitalized in Austin; her brother drove to his mom's bedside that night and, together, he and Garland viewed a happy video of the wedding.

Garland is also survived by her mother, Theresa Wieting; two stepbrothers, Paul and Roger Wieting; brother-in-law Jim Clark and nephew Parker Clark; and an uncle, Daniel Dentler.

Garland also frequently visited and cared for her beloved aunt and uncle, Florine and Harold Lord. The elderly couple live on a ranch near Blanco, and Garland loved their land and the serenity of ranch living. She often said that she hoped to move out to their ranch after she retired from DSHS.

by Amy Culp, R.D., L.D.
nutrition education consultant

Almost daily, nutrition and health news makes the headlines. Here are some of the top stories and bottom-line messages to assist you as a nutrition and health educator.

Breastfeeding Policy Statement Revised

In February, the American Academy of Pediatrics issued a revised statement on “Breastfeeding and the Use of Human Milk” to replace its existing policy developed in 1997. The updated policy statement is based on many recent advances in scientific knowledge of the benefits of breastfeeding, the mechanisms underlying those benefits, and the clinical management of breastfeeding. The policy statement reflects this newer knowledge and references the supporting publications. It summarizes the benefits of breastfeeding for the infant, the mother, and the community and provides recommendations to guide pediatricians and other health-care professionals in assisting mothers in the initiation and maintenance of breastfeeding for healthy term infants and high-risk infants alike. It provides examples of ways pediatricians and other health-care professionals can promote, protect, and support breastfeeding in individual practices, hospitals, medical

schools, their communities, and the nation.

WIC bottom line: Access the entire policy statement by visiting: <http://www.aap.org/advocacy/releases/feb05breastfeeding.htm>. There are no dramatic changes to the policy statement, but it is a good idea for all WIC educators to stay well informed with the latest research and recommendations about breastfeeding.

Source: Breastfeeding and the use of human milk. American Academy of Pediatrics policy statement. *Pediatrics* 115(2): 496–506.

Breastfeeding helps to fight arthritis

A study published in the November 2004 issue of *Arthritis and Rheumatism* shows that breastfeeding lowers a woman’s risk of rheumatoid arthritis. Rheumatoid arthritis is diagnosed up to four times as often in women than in men, and female sex hormones have long been thought to play a role in this association. Often, rheumatoid arthritis develops when hormone levels are changing, such as in the first few months after giving birth and around the time of menopause. In an effort to clarify the relationship between reproductive hormones and rheumatoid arthritis, researchers from Harvard’s

Brigham and Women’s Hospital examined data from a large, ongoing health study that has followed female nurses for almost three decades. After adjusting for known risk factors, the researchers found that breastfeeding decreased the risk. When compared with women who did not breastfeed at all, women who breastfed for one and two years showed a 20 percent decreased risk of rheumatoid arthritis. Women who had spent a total of at least two years breastfeeding had a decreased risk of 50 percent. Breastfeeding for less than one year total did not decrease the risk.

WIC bottom line: Encourage mothers to continue to breastfeed for at least the first year of life, and beyond for as long as mutually desired by the mother and child; educate new mothers on the benefits of increased duration of breastfeeding.

Sources: Karlson, E. 2004. Do breastfeeding and other reproductive factors influence future risk of rheumatoid arthritis? Results from the Nurses’ Health Study. *Arthritis Rheum.* 50 (11): 3458–67.

How effective are some of the most popular diets?

Researchers from Tufts New England Medical Center in Boston looked at four popular

	Average weight lost after 1 year (pounds)	% who dropped out of the study by one year
Ornish	7.3	50
Zone	6	35
Weight Watchers	4.9	35
Atkins	4.8	48

diets — Weight Watchers, Atkins (low carbohydrate), the Zone (40 percent carbohydrate, 30 percent protein, 30 percent fat) and Ornish (very low fat) — for effectiveness and how well people adhered to them. The randomized trial included 160 overweight or obese adults with known hypertension, dyslipidemias, or fasting hyperglycemia. Each was assigned to one of the four diets. The participants were asked to follow the assigned diet strictly for two months and then to select their own level of adherence for the remaining months. At one year, all four diets resulted in modest statistically significant weight loss, with no statistically significant differences between the diets. In each group, about 25 percent of the initial participants had lost more than 5 percent of their body weight at the end of one year, and approximately 10 percent of participants lost more than 10 percent of body weight. None of the diets had good adherence rates. Participants discontinued the Atkins and Ornish diets at higher rates, leading the authors to suggest that participants found these diets to be too extreme. Each diet did significantly reduce several cardiac risk factors significantly

associated with weight loss. For a comparison of the four diets, see box.

WIC bottom line: This research supports previous findings that even a modest amount of weight loss can have a significant positive effect on the health of someone who is overweight or obese. This research also shows that, after a year, regardless of the structure of the diet, each participant reduced weight only modestly. Research is still needed to determine the safety and efficacy of following a low-carbohydrate diet for longer than one year. If a client asks for your assistance in achieving a healthy weight, work with her on making behavior changes that will last a lifetime. If you are confused about all the fad diets out there, look for the upcoming publication, Nutrition Fact Sheet No. 27: Popular Diets, stock number 13-06-12139 — it will answer many of your questions. Or ask your local agency’s registered dietitian for assistance.

Source: Dansiger, M. L., et al. 2005. Comparison of the Atkins, Ornish, Weight Watchers, and Zone Diets for weight loss and heart disease risk reduction. JAMA 293: 43–53.

Breastfeeding Outreach

(continued from page 2)

Mother’s Milk: It’s More Than Just Food, is helping spread the same message throughout WIC clinics.

I encourage each and every one of you to take this message into your community by participating in church health fairs and coalitions for maternal and child health, hospital outreach, visiting the health-care providers who see the majority of your participants, and inviting community members to World Breastfeeding Month events in your own clinics. Educating the community about the health benefits of breastfeeding will lay the groundwork for future support systems for your WIC participants and is a step towards changing the culture of breastfeeding. Last, I’d like to thank you for your hard work and your passion for helping others by reiterating the words of Patricia Daniels:

I salute each and every one of you for your unique contributions to the overwhelming success of WIC.

Mike Montgomery ————— ■

Coming next issue...



Partnering with Parents
to Prevent
Obesity

Texas WIC News is now available on the Texas WIC Web site!
<http://www.dshs.state.tx.us/wichd.gi.wicnews.shtm>

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WIC, Nutrition Services Section
Department of State Health Services
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