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PREVALENCE OF FOOD FAD AND FALLACIES REGARDING FOOD INTAKE AMONG LACTATING MOTHERS IN DISTRICT KARNAL



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ABSTRACT:

Breast feeding is universal in India. Breast milk is nurture provided by nature. Several cultural practices are associated with lactation and breast feeding. The present study explored the beliefs, attitudes and practices regarding the food intake, food avoidance and special food consumption during lactation. The study was conducted on hundred lactating mothers randomly selected from Karnal district of Haryana. Information regarding dietary habits, practices as well as avoidance of particular food preparations was collected by questionnaire cum interview method. The result revealed that

spicy foods, coffee, whole pulses, fried foods, citrus foods, fruit juices and non-vegetarian food products were avoided by most of the subjects during lactation due to various beliefs & traditions. *Moong-khichdi, panjiri, badam-milk, gur-saunth,* turmeric-milk, *dalia, gur-ajwain, laddoo and til-laddoo* were among the special food preparation consumed by the lactating mothers during lactation. Special foods were consumed by the mothers because these foods were considered to be easily digested, galactagogue, energetic, immunity booster and strengthen the body.

KEYWORDS

Lactation, Lactating mother, Belief, Tradition, Special food preparations, Galactagoague.

I.INTRODUCTION

Breast milk alone is the ideal nourishment for infants for the first six months of life, and also their "first immunization". It contains all the nutrients, antibodies, hormones and antioxidants that an infant needs to thrive -"the nurture provided by the nature". The rationale for promoting optimal infant feeding especially breast feeding is not confined to its singular contribution to improved child survival and healthy growth; but also contributes to improved development outcomes and better active learning capacity in young children. Recent researches(WHO, 2002; Black, 2003) clearly establishes that universal exclusive breastfeeding for the first six months is the single most effective child survival intervention; which reduces young child mortality by thirteen per cent. Promotion of optimal infant and young child feeding practices is crucial for preventing and reducing malnutrition; early growth faltering; for accelerating reductions of infant and neonatal morality; and for promoting integrated early child development. Breast feeding is a critical entry point for ensuring progressive fulfillment of children's rights to survive, grow and develop to their full potential. New research (Earle, 2012) also indicates that it confer cognitive benefits, enhancing brain development and learning readiness. Therefore breast feeding is the usual way of providing infants with all the benefits i.e. nutritional, developmental, emotional, immunological, social, economical and environmental benefits.

The quality of mother's milk depends very much on the mother's diet. Adequate nutritional status of women is important for good health of women themselves as well as for the health of their off springs (Lancet, 2008). A healthy diet is quiet important for mother as it helps in maintaining the healthy milk production and composition, as well as to keep her body healthy. Breastfeeding is universal in India (Anandaiah R and choe MK, 2000; Khan 1990; Tiwari 2008). Breast feeding is mainly influenced by many factors; these factors are customs, superstitions, beliefs, religion, cultural practices, mother's education and social-economic status of families as well as attitudes of the family (Geervani, 1983). Cultural practices related to lactation and breast feeding in India primarily revolve around the concept of 'hot and cold' foods, food avoidance and restricted diet after child birth. During lactation many foods are excluded from the diet of the lactating mothers with the concept that the food received by the infant through breast milk may harm the child. Cultural restrictions related to food are selectively imposed on women, particularly pregnant women and women in the initial stages of lactation (Winch P et al 2008; McCormack 1988; Reissaland N and Burghart 1988; Khan ME1987; Gopalan C 1985; Maderson 1981). These practices are upheld and enforced by mother-in-laws, aunts, and other elderly female relatives in the family who usually decide the kinds of food a postpartum woman will have after childbirth-which is based on the concept of 'hot and cold' foods. Meager information is available on the quality of diet given to the lactating mothers of different communities and regions. Therefore, a need was identified to study the beliefs and practices regarding the food intake during lactation. Keeping this in view, present study has been elucidated to study knowledge, attitude and practices towards the food intake by lactating mothers in Karnal, district of Haryana.

MATERIAL AND METHODS

Selection of Subjects:

Five different urban and semi urban areas of Karnal district were selected randomly.

Out of these five areas, 100 households having at least one infant, below one year were selected at random. In order to meet the requirements of the study, the information was collected

through door to door survey method.

Data collection:

General information:

Information about age, qualification, religion, caste and family was collected through questionnaire cum interview method from 100 mothers identified.

Dietary habits:

Data pertaining to dietary habits & practices was collected by questionnaire cum interview method. Information regarding the nature of diet, number of meals consumed, nibbling behavior, consumption and avoidance of particular food preparations during lactation along with reasons and duration were also enquired.

Nutritional composition of special foods:

Composition of special food preparations considered by the subjects as beneficial during lactation was also calculated. For calculation, these food preparations were converted into their raw equivalent categorized into their respective food groups and average daily intake of energy, protein, fat, fiber, calcium and iron were calculated from the values per serving of edible portion by using MSU nutriguide (Song,1992).

Statistical analysis:

Analysis of the data was done using frequency and percentage.

RESULT AND DISCUSSION

General Information:

Most of the subjects(47%) belonged to the age group of 25-30 years followed by 30-35 years (35%) and above 35 years (18%) (Table 1). Maximum subjects were graduate (35%). Majority of the respondents (63%) believed in sikh religion and remaining (37%) were hindu. About two third of the subjects(63%) belonged to general caste and rest were from other backward caste (27%) and Sc/St (10%). Nuclear family pattern was followed by more than one half of the subjects (61%).

Table 1
General Information of The lactating Mother

(N=100)

| Particulars | No. | % |
|-----------------|-----|----|
| Age(years) | | |
| 25-30 | 47 | 47 |
| 30-35 | 35 | 35 |
| 35+ | 18 | 18 |
| Qualification | | |
| Illiterate | 16 | 16 |
| Matriculation | 19 | 19 |
| Graduate | 35 | 35 |
| Post graduation | 30 | 30 |
| Religion | | |
| Hindu | 37 | 37 |
| Sikh | 63 | 63 |
| Caste | | |
| General | 63 | 63 |
| Sc/St | 10 | 10 |
| OBC | 27 | 27 |
| Family | | |
| Family Joint | 39 | 39 |
| Nuclear | | |
| Nuclear | 61 | 61 |
| | | |

Dietary Habits: More than half of the total subjects (59%) were vegetarian and only twelve per cent were non-vegetarian (Table II). Frequency of consumption of non-vegetarian foods by the subject was twice a week, once a week, fortnightly & monthly by 16.66, 25, 25, and 33.33 per cent respectively. Three meals per day were consumed by forty seven per cent of the subjects where as four meals were consumed by thirty six per cent of the subjects only. Seventeen per cent of the mothers were in the habit of consuming five meals a day. Habit of nibbling was observed among sixty one per cent of the subjects, out of which for forty three per cent, nibbling was a routine where as eighteen per cent of the lactating mothers nibbled sometimes.

TABLE 2
Dietary Habits of The lactating Mothers

(N=100)

| Particulars | NO. | % |
|-----------------------------|-----|-------|
| Nature of diet | | |
| Vegetarian | 59 | 59 |
| Non vegetarian | 12 | 12 |
| Ovatarian | 29 | 29 |
| Frequency of Consumption of | | |
| non.veg | | |
| Twice a week | 2 | 16.66 |
| Once a week | 3 | 25 |
| Fortnightly | 3 | 25 |
| Monthly | 4 | 33.33 |
| No. of meals consumed | | |
| 3 | 47 | 47 |
| 4 | 36 | 36 |
| 5 | 17 | 17 |
| Nibbling pattern | | |
| Yes | 61 | 61 |
| No | 39 | 39 |
| If yes | | |
| Always | 43 | 43 |
| Sometimes | 18 | 18 |

FOODS AVOIDED:

Foods avoided by the respondents during lactation are shown in Table III. During the first week of lactation chapatti was avoided by thirty nine per cent of the respondents due to the belief that it is not digestible. Whole pulses like bengal gram, black gram, rajma were avoided by eighty nine per cent of the subjects for first forty days being heavy food and difficult to digest. Monika and Shubhangna (2004) also found that the whole pulses like rajma, rongi were avoided by the lactating mothers because these food items produces gas in the stomach of children, which gets transfers through breast feeding. Two third of the respondents (67%) avoided vegetables like cauliflower, raddish, beans, saaq, spinach as these causes congestion and distress to mother as well as baby. Majority of the respondents (92%) were not consuming coffee for first four months due to the belief that it decreases milk secretion and irritates baby's sleep. Number of studies (Santo, 2012 and more refrences) recommended that drinking more than 2 to 3 cups of coffee per day should be avoided as it might agitate the baby or interfere with the baby's sleep. Chocolates were avoided by about one third of the subjects (32%) because of not being digestible by baby's digestive system and causes vomiting. Most of the lactating mothers (78%) were not taking citrus fruits and juices till six months with the notion that it causes rashes to the baby, stomach disturbance and gas production in the baby. Spicy foods were not acceptable by ninety two per cent of the mothers, as considered harsh on baby's digestive system and results into diarrhea, vomiting and severe abdominal pain to the baby. Eighty two per cent of the subjects were not recommended fried foods for first three months because it is difficult to digest and causes abdominal pain to the baby. Only thirteen per cent of the mothers avoided pickles for the first 5-6 months as it causes chest burning, abdominal pain to both mother and baby. Cold drinks, curd & buttermilk were avoided by one half of the lactating mothers (52,54 respectively) being cold in nature, it causes throat pain, cough, skin rashes & congestion. Sehgal et al (1989) also observed that the curd was considered to be a cold and were avoided by the majority of the respondents. Bandyopadhyay (2009) also found avoidance of cold food with the fear to cause cold & skin rashes. Sixty nine per cent of the lactating mothers avoided fruits such as water melon, papaya, guava, kiwi due to tradition. Kaur et al (2010) also reported the avoidance of citrus fruits and juices by the lactating mothers till 4 to 6 months due to tradition. Non-vegetarian foods were strictly avoided by seventy six per cent of the mothers for 1-3 months, because of being hot food not easily digestible, hence causes abdominal pain.

TABLE 3
Foods Avoided During Lactation

| | Foods | No (%) | Duration | Reasons |
|---|---|---------|----------|---|
| 1 | Chapatti | 39 (39) | 1 week | Not digestible |
| 2 | Whole Pulses (Black gram, Bengal gram, Rajma.) | 89 (89) | 40 days | Gaseous food difficult to digest |
| 3 | Vegetables (Saag, brinjal, raddish, cucumber, tomato, beans, cauliflower) | 67 (67) | 45 days | Difficult to digest (Gas producing, congestion occurs, distress.) |
| 4 | Coffee, Tea (Caffeine) | 92 (92) | 4 months | Reduce milk supply, irritation stomach & sleeplessness) |
| 5 | Chocolates | 32 (32) | 4 months | Upset stomach, vomiting to infant |

| 6 | Citrus Fruits/Juices (Pineapple, lemon, orange, grapefruit) | 78 (78) | 6 months | Cause cough, throat pain, rashes, stomach disturbance |
|----|---|---------|------------|--|
| 7 | Spicy Food/Spices | 92 (92) | 5-6 months | Harsh on baby's digestive system, cause diarrhea, vomiting, severe abdominal pain, cramps |
| 8 | Fried Foods | 82 (82) | 3 months | Difficult to digest and causes abdominal pain. |
| 9 | Pickles | 13 (13) | 5-6 months | Causes cough, chest burning, abdominal pain. |
| 10 | Cold drinks | 52 (52) | 1-4 months | Cough, abdominal pain |
| 11 | Curd, Buttermilk | 54 (54) | 1-4 months | Throat-pain, skin rashes, congestion |
| 12 | Fruits, watermelon, papaya, guava, Kiwi | 69 (69) | 5-6 months | Tradition. |
| 13 | Non-Vegetarian | 76 (76) | 1-3 months | Heavy, hot, abdominal pain. |

SPECIAL FOODS CONSUMED:

Table IV presents the special foods consumed by the lactating mothers. Majority (65%) of the mothers consumed *Panjiri*, a traditional food prepared by frying whole wheat flour/semolina in ghee adding sugar, poppy seeds, black pepper, dry ginger, nuts & oil seeds. Panjiri was consumed for 4 to 6 months and considered to restore energy, protein, strengthen the body & decreases back pain. Laddoo/ Balls, a traditional food prepared by melting jaggery & adding nuts, wheat flour, coconut, poppy seeds, were consumed by twenty per cent of the mothers for a period of 4 to 6 months as it is helpful in decreasing weakness, good for health and strengthen the body. Tilladdoos were consumed by twenty per cent of the mothers for 40 days as it is rich in calcium which is helpful in strengthening bones and increased milk production. Fifteen per cent lactating mothers added halwa in their diet for first week, because it is energetic, soft food & was prepared by frying whole wheat flour/semolina in ghee adding sugar and water. Sheera was consumed by eighteen per cent of the lactating mothers for 3-4 months, prepared by frying bengal gram flour in ghee adding sugar, dry fruits and milk/water. It is an energetic food and helps in soothing throat & chest. Dalia consumed by thirty two per cent of the respondents was prepared by broken wheat with milk or water adding sugar, nuts, ghee for 1-2 months as it is rich in protein, repair tissues and easily digestible. Maximum (86%) of the mothers consumed moong-Khichri for first 40 days, was prepared using rice, green-gram dal, seasoned/tempered with ghee. It was given mainly because it is light, hence easily digestible. Sweetened preparation of gurr-ajwain taken by thirty per cent of the mothers, contained *gur* (jaggery), ajwain (carom seeds) and ghee. Gur-saunth was consumed by forty six per cent of the subjects prepared by jaggery, dry ginger powder, ajwain and ghee. It is considered as hot food, which increases bleeding, hence removes wastes, relieves pain and strengthen the waist. The effectiveness of jaggery helps in reducing fatigue & providing strength as well as to increase milk secretion and use of dry ginger for controlling cold, cough and improving digestion. It also had been reported by 'Sidhu and Kaur' (2007) and Kaur T (2009) that ginger acts as laxative, and improves digestion. Varied milk preparations: *jeera* milk, turmeric milk, *saunth* milk & badam milk were also preferred and consumed by, twenty, thirty two, fifteen, sixty per cent of the mothers respectively. These milk preparation were considered as an excellent galactagogue. Ginger & Honey taken by fifteen per cent of the subjects with the belief that it helps in increasing bleeding hence cleaning uterus...

SPECIAL FOODS CONSUMED DURING LACTATION

| Special Foods | % | Duration | Reasons | | |
|-----------------|----|-----------------|---|--|--|
| Panjiri | 65 | 4-6 months | Energetic, Protein rich good for health Strengthe | | |
| | | | the body, decrease back pain | | |
| Ladoo | 20 | 4-6 months | Helpful in decreasing weakness, strengthen the | | |
| | | | body. | | |
| Til laddoo | 20 | 40 days | High in calcium, strong bones and increase milk | | |
| | | | production. | | |
| | | | Energetic, give | | |
| Halwa | 15 | 1 week | strength to body | | |
| Sheera | 18 | 3-4 months | Soothing throat, energetic | | |
| Dalia | 32 | 1-2 months | Rich in protein, repair tissues, easily digestible. | | |
| Moong-Khichri | 86 | 40 days | Easily digestible, protein rich. | | |
| Gur-Ajwain | 30 | 40 days | Increase milk production, relieve pain, increasing | | |
| , | | | bleeding, remove waste | | |
| Gur-Saunth | 46 | 40 days | Help in removing waste, clean uterus, increased | | |
| | | | bleeding | | |
| Jeera Milk | 20 | Till lactation | Galactagogue | | |
| Turmeric Milk | 32 | 40 days | It cause urine stimulate & internal healing, | | |
| | | - | strengthen the body | | |
| Saunth Milk | 15 | 25 days | Increase milk production (An excellent | | |
| | | | galactagogue), uterus cleanser. | | |
| Badam Milk | 60 | 40 days | Boosting immunity & milk production. | | |
| Fenugreek water | 12 | 1 week | Increased milk production & soothing intestine. | | |
| | | | | | |
| Ginger & Honey | 15 | II week onwards | Cleansing uterus ,increases bleeding, increases | | |
| | | | immunity. | | |
| Barley & funnel | 20 | 1 week | To ease gastric problem, constipation & colic | | |
| carom water | | | digestions & prevent cold, cleansing stomach & | | |
| | | | uterus. | | |

NUTRITIONAL COMPOSITION OF SPECIAL FOODS:

The energy protein, fat, calcium, iron and fiber content of special foods consumed by lactating mothers are depicted in Table V. The composition is as per the amount consumed per day. The energy content of the special foods varied from 193.7Kcal(*moong-khichdi*) to 1365.25Kcal (*panjiri*). Amount of protein ranged from 2.68g to 32.7g per serving. *Moong-khichri* had the least amount of protein which contained rice, moong-dal, ghee and seasonings where as *til-ladoo* had maximum of protein followed by , *Ladoo* (17.61g), *panjiri* (15.66g), *Sheera* (10.65g). Fat content varied from moong-khichri (10.2g) to *panjiri* (108.11g). Least amount of calcium was calculated in moong-khichri (9.5mg) & til-ladoo had highest amount (1896mg) followed by jeera-milk (438.6mg) gur-ajwain (383.75mg), gur-saunth (383.8), dalia(364.2), badam-milk(311.1mg), turmeric-milk (284.1mg) *saunth-milk* (277.6), ladoo (185mg). The iron content ranged from 0.63mg (*saunth-milk*) to 9.7mg (til-ladoo). Fiber content varied from 0.12g (*saunth-milk*) to 8.37g (*gur-saunth*) per day respectively.

| TABLE 5 |
|---|
| Special Foods Consumed During Lactation |

| Food Preparation | Am t/Day | Energy (K | Protein (g) | Fat | Calcium (mg) | Iron | Fiber |
|------------------|----------|---------------|-------------|--------|--------------|------|-------|
| | (g/ml) | Cal) | | (g) | | (mg) | (g) |
| Panjiri | 200 | 1 3 6 5 . 2 5 | 15.66 | 108.11 | 163.35 | 6.95 | 1.43 |
| Ladoo | 200 | 706.35 | 17.61 | 21.67 | 185.96 | 9.14 | 1.52 |
| Til Ladoo | 200 | 919.5 | 32.7 | 76.27 | 1896 | 9.7 | 5.4 |
| Halwa | 150 | 639.3 | 9.69 | 34.26 | 109.75 | 2.83 | 0.51 |
| Sheera | 150 | 891.5 | 10.65 | 57.93 | 150 | 0.85 | 2.02 |
| Dalia | 200 | 423.8 | 8.77 | 40.88 | 364.2 | 3.45 | 1.02 |
| Moong- | 80 | 193.7 | 2.68 | 10.2 | 9.5 | 1.03 | 4.8 |
| Khichri | | | | | | | |
| Gur-Ajwain | 150 | 304.5 | 4.47 | 15.45 | 383.75 | 0.96 | 5.3 |
| Gur-Saunth | 150 | 276.25 | 5.04 | 10.67 | 383.8 | 1.83 | 8.37 |
| Jeera-Milk | 250 | 227.4 | 10.17 | 11.68 | 438.6 | 2.21 | 1.8 |
| Turmeric Milk | 250 | 236.45 | 7.68 | 14.69 | 284.1 | 3.85 | 0.13 |
| Saunth Milk | 250 | 222.35 | 7.48 | 14.48 | 277.6 | 0.63 | 0.12 |
| Badam Milk | 250 | 272.2 | 10.48 | 18.26 | 311.1 | 1.22 | 0.26 |

SUMMARY AND CONCLUSION: It can be concluded from the perusal of the result that the special foods consumed during lactation were *moong-khichdi*, *panjiri*, *badam-milk.*, *gur-saunth*, *turmeric-milk*, *dalia*, *gur-ajwain*, *laddoo*, *til-ladoo*. *Panjiri* contained maximum amount of the energy and fat ,where as til-laddoo contained maximum amount of protein, calcium and iron per serving. One serving of gur-saunth supplied maximum amount of fibre as compared to other food prepration .Majority of the subjects avoided spicy foods, coffee, whole pulses, fried foods, citrus foods, fruit juices and non-vegetarian food products during lactation due to various beliefs & traditions.

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