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ORIGINAL ARTICLE

PROFILE OF DONOR MOTHERS FROM A HUMAN MILK BANK

PERFIL DAS MÃES DOADORAS DE UM BANCO DE LEITE HUMANO

PERFIL DE LAS MADRES DONANTES DE UN BANCO DE LECHE MATERNA

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ABSTRACT

Objective: to identify the profile of the donor human milk from a milk bank. ***Method:*** quantitative study, descriptive and observational, with 19 nursing mothers who provided human milk in 2009, in Human milk bank of a Hospital Foundation of a city in the northern region of Minas Gerais/MG/southeastern Brazil. For the collection of data was used a semi-structured questionnaire and the data were grouped and presented in tables using non-parametric statistics. The study had the research project approved by the Research Ethics Committee, Protocol. 0904/2009. ***Results:*** most donors (31%) between the ages of 20-25 presented years; 74% were married or with stable Union; 52% had high school; 58% donated milk for the first time; 74% performed prenatal care on the public network. ***Conclusion:*** most nursing mothers was productive age, married, with full high school and working formally with prenatal Primiparous held in public. ***Descriptors*:** Milk; Breastfeeding; Human Milk.

RESUMO

***Objetivo*:** identificar o perfil das doadoras de leite humano de um banco de leite. ***Método*:** estudo quantitativo, descritivo e observacional, com 19 nutrizes que forneceram leite humano em 2009, no Banco de Leite Humano de uma Fundação Hospitalar de uma cidade da Região Norte de Minas Gerais/MG/Sudeste do Brasil. Para a coleta de dados foi utilizado um questionário semiestruturado e os dados foram agrupados e apresentados em tabelas usando da estatística não paramétrica. O estudo teve o projeto de pesquisa aprovado pelo Comitê de Ética em Pesquisa, protocolo nº. 0904/2009. ***Resultados*:** a maioria das doadoras (31%) apresentou idade entre 20-25 anos; 74% eram casadas ou com união estável; 52% tinham ensino médio completo; 58% doaram leite pela primeira vez; 74% realizaram o pré-natal na rede pública. ***Conclusão*:** a maior parte das nutrizes estava em idade produtiva, casadas, com ensino médio completo e trabalhando formalmente, primíparas, com pré-natal realizado em rede pública. ***Descritores*:** Banco de Leite; Aleitamento Materno; Leite Humano.

RESUMEN

Objetivo: identificar el perfil de la leche materna de donante de un banco de leche. ***Método:*** estudio cuantitativo, descriptivo y observacional, con 19 enfermerías de madres que proporcionan leche humana en 2009, en el Banco de leche humana de la Fundación de un Hospital de una ciudad en la región norte de Minas Gerais/MG/sudeste de Brasil. Para la recogida de datos se utilizó un cuestionario semiestructurado y los datos fueron agrupados y presentados en los cuadros utilizando estadística no paramétrica. El estudio tenía el proyecto de investigación aprobado por el Comité de ética de la investigación, protocolo 0904/2009. ***Resultados:*** presentaron de la mayoría de los donantes (31%) entre las edades de 20-25 años 74% estaban casado o con unión estable; 52% tenían secundaria 58% había donado leche por primera vez; 74% realiza control prenatal en la red pública. ***Conclusión:*** la mayoría de las madres lactantes se edad productiva, casado, con secundaria completa y trabajar formalmente con prenatal Primiparous llevó a cabo en público. ***Descriptores*:** Leche; Lactancia Materna; Leche Humana.

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INTRODUCTION

Science, with its unanimity, recognize breast milk as a reliable source of nutrition for the human at the beginning of his life, the benefits of which reflect in adulthood.[1]The Human milk banks (BLH) are responsible to perform actions to encourage breastfeeding, execution of production accumulation threshold collecting activities of nursing mother, selection, classification, processing, quality control and distribution, getting banned trade in products distributed by it.[2]

Up to six months of life, the child should be in exclusive breastfeeding, because the interruption of breastfeeding may lead to inadequate energy intake. When are breastfed exclusively, children grow and develop properly, reducing the risk of infections and allergies. After the first six months should be added to other foods in the diet of the child, breastfeeding indicated up to two years.[3]

The Act of breastfeeding is linked to the process of donation of human milk, because it is the experience of motherhood and breastfeeding that will arouse a woman desire to become a donor.[1]

Based on the need to establish strategies to increase the number of human milk donors, this study aims to describe the profile of the donor Human milk bank of a Hospital.

METHOD

The study of quantitative nature, descriptive, observational character as subject the nursing mothers who donated human milk, in October 2009, in human milk bank Hospital Aroldo Tourinho, large hospital, located in the city of Montes Claros/MG/southeastern Brazil.

Were invited to participate in the research 25 women registered in the milk bank, being the first contact was by phone. The researcher identified, citing their institutional origins, the goals of the research, the ethical aspects involved and the data collection procedure. There were six denials, according to the same due to lack of time.

For the collection of data was used a semi-structured questionnaire, composed of objective and subjective issues pertaining to age, marital status, education, occupational status, household income, number of pregnancies, prenatal care, information received on breastfeeding during the prenatal period, information received on the milk bank and the reasons for donation in which responses were noted by the searcher. The interview was conducted at home, due to human milk collection be performed on it. The female donors were identified with numbers 01 to 19. The data were grouped and presented in tables using non-parametric statistics.

The research project was forwarded for consideration and approved by the Research Ethics Committee of the United Colleges of North of Minas (FUNORTE, CEP) under opinion No. 0904/2009 and fulfilled all the requirements of Resolution 196/96 of the National Health Council involving studies with human beings.

RESULTS

As the following table 1, it was found that 31% of women have between 20 to 25 years, 26% are between 25 to 30 years, 16% of 30 to 35 years, 11% of 35 to 40 years and 16% from 40 to 42 years. According to the survey, the data show that the age profile of the interviewed is a reproductive age group, where the women's age ranged from 20 to 42 years.

With regard to marital status, 74% of women are married and 26% are single, separated or divorced. Analyzing education of donors, 16% have completed only primary school, 52% have completed high school, 16% are College and 16% finished College.

With regard to socio-economic indicators, 32% have household income less than 2 salaries, 52% between 2 to 4 and 16% did not know. The group includes different socioeconomic conditions donors, being of a lower middle class group. Even with few economic conditions were motivated to donate excess human milk, in collaboration with the life of a child.

In relation to occupational situation, most of them exercises working function, 16% working without labor rights, labor rights and 42% 42% are from home. However, although exercising a function away from home to find donor encouragement to breastfeed their children and still donate the excess milk for the benefit of other children.

Table 1. Distribution of the socio demographic characteristics according to donor, Montes Claros, MG.

Variables	n = 19	%
Age Group		
Of 20 to 25 years	06	31
Of 25 to 30 years	05	26
Of 30 to 35 years	03	16
Of 35 to 40 years	02	11
From 40 to 42 years	03	16
Marital Status		
Married/Common-law	14	74
Single/Divorced/Separated	05	26
Schooling		
Full Key	03	16
Secondary	10	52
Higher Incomplete	03	16
Full Top	03	16
Family Income		
Less than 02 salaries	06	32
02-04 wages	10	52
No Information	03	16
Occupational Situation		
Employed without labor rights	03	16
Employed with labor rights	08	42
Of Home	08	42

Source: Hospital Aroldo Tourinho (HAT).Human milk bank. Montes Claros, MG.

In the analysis of the number of pregnancy, 58% of the participants, according to table 2, were first pregnancy, indicating that the practice of the donation occurred respectively at first experience of motherhood and 42% had more than one pregnancy. All patients performed 74% held prenatal on the public network and 26% on the private network. Both the pregnant women who had prenatal care in private and public network had problems related to guidance on breastfeeding, contradicting the myth that private network clients are more well treated and oriented. On this data, we can conclude that is still large number of pregnant women who are not breastfeeding during the prenatal period. Whereas the guidelines on breastfeeding and breast care during the prenatal period, 63% were properly targeted; already 37% were not properly oriented.

Table 2. Distribution of donors with regard to information about pregnancy and prenatal care networks, Montes Claros, MG.

Variables	n=19	%
Number of Pregnancies		
First	11	58
More than one	08	42
Type of network for health care		
Public Network	14	74
Private Network	05	26
Guidelines During the prenatal		
Receive Guidance	12	63
Do Not Receive Guidance	07	37

Source: Hospital Aroldo Tourinho (HAT). Human milk bank. Montes Claros, MG.

According to the majority of the donors, they were unaware of the objectives of the milk bank. Observing the table 3, 36% were seeking the milk bank by the HAT professionals, 21% by parents of receivers, 21% for health care workers, 11% by the communication system and 11% have had their own initiative. No donor was about giving human milk during the prenatal period. Only came to know after giving birth, when they came to present problems with the breast. The reason for the donation of milk took place from the consequences of 99% and 1% of mastitis full tits. The phenomenon of mastitis is caused by an unresolved breast engorgement.

Table 3. Distribution of informants to donors to which held the action and as to the motivation of women to donate the milk, Montes Claros, MG.

Variables	n=19	%
Informants On the milk Bank		
Professional HAT	07	36
Parents of receivers	04	21
Health professionals	04	21
Communication system	02	11
Own Initiative	02	11
Motivation for Donation		
Mastitis	18	99
Full Tits	01	01

Source: Hospital Aroldo Tourinho (HAT). Human milk bank. Montes Claros, MG.

DISCUSSION

Mothers under agepresent more uncertainty for breast-feeding, unlike older mothers who leave their children to breastfeed for a longer time, especially, when it had more children and breastfeeding success.[4]The support is the safest way to make the mother opt for breastfeeding and maintain the option to partner support is crucial. This fact also relates to the donation.[5]

The fact mothers have stable and the support of others, especially of her husband or partner, raises to exercise positive influence on the duration of breastfeeding. Both the social and economic support, such as the educational and emotional seem to be very important, being the biggest person weight companion in these different types of support.[4]Whereas the socio-economic structure is conditioning the education, most donors studied for longer, because education has been considered as a means that provides changes, transformations and decisions.[6]

The level of education interferes with the motivation to breast-feed, relating the duration of breastfeeding. Thus, the more educated the mother is greater the breastfeeding time, believe that is related to the fact that the mother have greater access to information about the benefits of breastfeeding.[4] The return-to-work plans, highlighted not interfere with the decision to start breastfeeding, but if this callback occurs in the first two to three months after giving birth, it seems to hinder your success. Often, this early work is the result of backpressure, especially in the case of unregistered mothers, by the fear of losing jobs.[4]

The family was income as a factor associated with the duration of breastfeeding, contributing to the increase in the median between those mothers whose families had income greater than two minimum wages *per capita.*[7]Primiparous study found that the rate of exclusive breastfeeding in the first three months of the baby's life was significantly higher among those who received guidance on breastfeeding.[8]In this context, one can infer that the objectives published by Minas Gerais are not being met, because pregnant women must be guided in prenatal breastfeeding, and during this period are more sensitive to listening to the guidelines. [9]

Can be concluded that women are not targeted as advocates Minas Gerais during the prenatal period, about giving and not encouraged to look for the milk bank in case of any question or problem related to breastfeeding. In this way, it is essential to train the professionals of basic health networks and use the media to disseminate information about breastfeeding, breast care and donation of human milk.[9] Disability health services to be guided as to breastfeeding has a negative impact on the duration of breastfeeding, early weaning.[8]

Pregnant women should be oriented during the prenatal period on the importance of searchthe Bank's services, because it is intended to support breastfeeding and offer information.[10]The breast is red, hot, painful, and may be edematous fever and malaise. Moreover, for the patient to have the relief you need to massage the hardened place and remove excess milk to prevent breast stay full. To prevent the occurrence of mastitis is necessary to remove all excess breast milk. Therefore, full tits, nursing is required under demand, and after feedings if it is full, remove the excess milk. [9]

Study on a Bank of a public Hospital located in the Federal District of Brasilia involving 30 women, 46.2% of total external donor milk bank, motivational aspects were evaluated for these human milk donors. Contacted that the reasons considered most important were, *because I know that there are many children who need human milk,* showing 3.97 (DP = 0.183) of average and median corresponding to 4 and *because I know about the nutritional value of milk, and many families do not have this food for their children,* with an average of 3.67 (DP = 0.844)

and 4 median (item 3).[11] in this same survey, it was observed that the motivational variables that make the infants to continue donating breast milk considered most important were *because I feel good about helping children who need human milk,* showing 3.97 (DP = 0.183) of average and median corresponding to 4 and *because I liked the experience to donate human milk* with 3.87 (DP = 0.434) of average and median of 4.

One of the priorities of the BLH in Brazil is to meet the mothers of preterm and low-weight newborns admitted to hospital units. Until recently, breast milk was little appreciated in the feeding of newborns with low birth weight. However, the literature is almost unanimous in recommending breast milk to premature infants, including those of very low weight.[12] this is due to the growing number of epidemiological evidence showing the importance of breast milk to these newborns, not just for his survival, but also for their quality of life. The same Necrotizing Enterocolitis and protects against infections in General, and the stimulus to mother-child connection are some of the advantages that in itself would justify the option of powering the pre-term newborn with mother's milk and/or milk of BLH.[13]

However, when one considers the fact that the effects of breastfeeding for the health of individuals go far beyond the lactation period – probably for the rest of his life – the option for breast milk, for all newborns and in particular, to the imperative, it is preterm.[14]

CONCLUSION

Could realize the importance of Human milk banks, its benefits to the population and, especially, of women being donors. With this, the study showed that most of these were in active age, married, with full high school and working formally with prenatal Primiparous held in public in which network professionals informed them about breastfeeding.

As evidenced, the milk bank is still little known, being closely associated with the lack of disclosure. It is noticed that the encouragement and guidance on donation of human milk can be enlarged, in order to increase breastfeeding and donation, and improve the quality of life of infants at risk.

In this way, one can see that there are communication failure is not only prenatal services, but as well as in hospitals, because it is the duty of the Child friendly hospital guide mothers in accommodation set on breastfeeding and encourage the search for breastfeeding support groups.

Therefore, there is the need to be performing host educational actions and prenatal services, maternity hospitals, nurseries and communication system for the capture of human milk donors.

Thus, one can see that there is still a very low number of women in the Human milk bank donor. With this, it is suggested to stimulate increased adhesion of it to this practice through educational actions by health services. To do this, should also invest in increasing the research and scientific production in order to improve and guarantee the quality of life for children whose mothers cannot breastfeed.

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