



# The Milk of Human Kindness

**T**he ancient art of wet-nursing is a practice as old as human history. In the last century, milk banks, similar to blood banks, were set up around the world, including in Canada, to provide the life giving nutrients found in breastmilk to babies in need. The disappearance of Canadian milk banks (down to one from more than twenty banks in the 1980s) has been blamed on the perceived threat of HIV infection and the development of heavily marketed specialty infant formulas.

**Ironically, there isn't a single recorded case of an infant being infected by donated breast milk.**

The modern milk bank relies on milk being donated by carefully screened lactating mothers. The milk is then pasteurized and stored according to strict guidelines. Once processed, the milk is distributed to high-risk infants and children whose own mothers are unable to provide them with breastmilk.

Pasteurized human milk from screened donors provides the next best alternative to mother's own breast milk. Most of the unique and valuable components of human milk remain intact after appropriate heat treatment and processing. For a small, critically ill population of infants and children, receiving donated human milk is a matter of life and death.

Human milk banking is a practice that is growing world-wide and is already well established in over 18 countries. Brazil currently has more than 150 banks, and milk banking is an integral

part of the country's health care system, fostered by strong federal leadership and standards. By sharp contrast, there is currently only one human milk bank in Canada, located at the Children's and Women's Health Care Centre, Vancouver. This bank is unable to meet the rising demand for donor milk, either locally or nationally.

Donated mothers' milk is especially beneficial in protecting against necrotizing enterocolitis

(NEC), a serious, often fatal disease for premature babies. Specialty formulas derived from cow's milk or soy beans attempt to emulate breastmilk but they cannot compare to the infection-fighting and other natural attributes of human milk that help reduce NEC. The costs to Canada's health system of caring for just one infant with NEC would fund a milk bank for one year (\$50,000 to

*"The vast majority of mothers can and should breastfeed, just as the vast majority of infants can and should be breastfed. Only under exceptional circumstances can a mother's milk be considered unsuitable for her infant. For those few health situations where infants cannot, or should not, be breastfed, the choice of the best alternative – expressed breast milk from an infant's own mother, breast milk from a healthy wet nurse or human-milk bank, or a breast-milk substitute fed with a cup, which is a safer method than a feeding bottle and teat – depends on individual circumstances."*

—WHO, The Global Strategy for Infant and Young Child Feeding

\$100,000). Extrapolating from a recent US study, which noted a 21 per cent higher mortality risk for formula fed infants during the postneonatal period, in Canada this would translate into approximately 72 deaths annually.

At present, financial incentives and free products offered by formula manufacturers to Canadian hospitals and health professionals act as serious impediments to both breastfeeding success and human milk banking. Not surprisingly, there isn't any instruction about human milk banking in Canadian health education.



## Where do we go from here?

Clearly, milk banking offers life-saving benefits to the most vulnerable members of society. We need to follow the international example and lobby within our health care system. Here are a few recommendations:

- Canada needs more milk banks to meet the growing demand for donor milk.
- All hospitals need to meet the standards of the Baby-Friendly Hospital Initiative that recognizes when mother's milk is not available, donor milk is the best alternative.
- Our health system needs more education about the benefits of milk banking.
- Health Canada needs to provide more funding for research about milk banking.
- Health professionals need to inform parents about the existence of donor milk banking in order to promote greater awareness and encourage informed choice.

## What you can do:

- Send a letter of support for the continuation of Canada's only donor milk bank to the Honourable Colin Hansen, Minister of Health Services, 1515 Blanshard Street, Victoria, BC V8W 3L8. Please send a copy to Elizabeth Whynot, MD, President, Children's and Women's Health Centre of British Columbia, 4500 Oak Street, Vancouver, BC, V6H 3N1.
- Write to Pierre Pettigrew (House of Commons, Ottawa, ON K1A 0A7 — no postage required, email [Pettigrew.P@parl.gc.ca](mailto:Pettigrew.P@parl.gc.ca)) requesting that he initiate a consultative process to increase human milk banking for Canadian mothers and babies.
- Educate the media and your colleagues about the need for and the important life-saving potential of donor human milk.

## To find out more:

- Watch for INFACT Canada's latest publication, "The Milk of Human Kindness: The History of Milk Banking in Canada", INFACT Canada 2004.
- Visit the Human Milk Banking Association of North America website at [www.hmbana.org](http://www.hmbana.org).
- Visit the United Kingdom Association of Milk Banking website at [www.ukamb.org](http://www.ukamb.org).

## Human Milk Banking: a part of Canada's history

While most Canadians are familiar with the story of the Dionne Quintuplets, few people know that they owe their early survival to donated breastmilk. When the five little girls were born on May 28th, 1934, no one expected them to survive. Herman Bundeson, a renowned Chicago physician and expert on premature infants, telephoned Dr. Dafoe, the Ontario doctor who had delivered the quints, and offered to provide an incubator and donated breastmilk — two things he believed critical to the babies' survival. Within 52 hours of the quint's birth, the first shipment of donated milk arrived.

In Toronto, members of the Junior League responded by collecting and delivering donated breastmilk daily to the Hospital for Sick Children. There the donated milk was pooled, boiled, bottled, refrigerated until evening, packed in ice, and shipped by overnight train to northern Ontario. Milk was eventually freighted from Montreal as well. In all, 120 shipments of human milk were sent, the first arriving on May 31st, when the infants were only four days old. When the quintes were switched to cow's milk in October, they had consumed more than 8,000 ounces. These shipments, unique in history, were credited with keeping them alive.

Ironically, it was the infant feeding industry that took credit for the early survival of the quintes. According to Pierre Berton, author of *The Dionne Years*, "Perhaps the most famous was the Carnation milk advertisements, which implied that the babies 'practically bathed in the milk,' and boasted that in the first 18 months of life, the quintuplets had consumed 2500 cans of the milk. In fact, the quintuplets 'hated Carnation milk, and refused point blank to drink it.'"