Prevention of Type I Diabetes through Breastfeeding in Infants

Abstract

Infant nutrition is especially critical within the first year of life. The nutrients provided can protect against the risks of chronic diseases in the infant's future. Insulin and protection against enteric infections are qualities of breast milk that make it unique to other forms of infant nutrition. This is why breastfeeding is strongly recommended for newborns—to provide the infant with an optimal level of health. Among various chronic diseases, the risk for type I diabetes has been shown to be reduced in infants who are breast fed in the beginning critical months of life. Research supports the association between prevention of type I diabetes and breast milk both positively and negatively. However, the most well-respected conclusion states there is a correlation due to its physiological benefits, but more research should be conducted to demonstrate breast milk's effectiveness against type I diabetes.

INTRODUCTION

An infant's nutrient intake during the first year of life is critical to their current health status and can ultimately influence their health and well-being throughout the rest of their life. Infants are unable to communicate what their bodies need to reach their optimal health and protect them from future complications. It is the parent's responsible to supply their baby with adequate nutrients to promote the baby's grow and success during this early stage in life. Without the parent's proper help and support, the risk of chronic disease increases dramatically. One study conducted by Smith et al¹ found that premature weaning off breastfeeding or complete lack of breastfeeding is related to a 30-200% increase risk in chronic diseases compared to those who were breast fed for a period greater than six months.

With these risks present, optimal nutrition is the goal. The best way to achieve this goal is through breastfeeding. Breastfeeding a newborn infant is strongly encouraged by most health care professionals because of breast milk's unique composition and the positive outcomes that follow for the infant as well as the mother. Breast milk has increased bioavailability of minerals, appropriate levels of long-chain polyunsaturated fatty acids to support central nervous system development, and the innate ability to protect against infection. These qualities in maternal milk set it apart from other infant nutritional alternatives, such as powder formula. While other alternatives attempt to mimic these protective qualities, they lack the mechanisms that are hypothesized to prevent type I diabetes and other chronic diseases in the years to come. All forms of infant feeding are aimed to nurture the infant with the appropriate vitamins and minerals; however, studies show only breast milk will produce a reduced risk in chronic diseases and various other complications through the infant's life.

While breast milk's protective qualities are believed to decrease the prevalence of type I diabetes, research concerning the relationship of breast milk and type I diabetes in subsequent years is conflicting. Type I diabetes is an autoimmune disease where the body is unable to produce insulin, resulting in consistently high glucose levels. It has been assumed that breastfeeding will reduce the risk of type I diabetes for the infant because of its ability to strength the infant's immune system. However, other research has responded there is no correlation.

The main objective of this review is to evaluate current studies in order to determine the most commonly recognized relationship between breastfeeding and the risk of type I diabetes for the infant. Only peer-reviewed articles within the past 10 years are presented in this paper. They demonstrate the current stance on the correlation between type I diabetes and breastfeeding.

METHODS

This research for this review article was conducted primarily through EBSCO, Academic Search Primer database. A variety of key terms were searched such as: type I diabetes, breastfeeding, infant nutrition, formula feeding, and chronic diseases. The key terms "type I diabetes" and "breastfeeding" produced the best search results that were most applicable to this review. Approximately 7,000 review articles were shown after the search was complete. This number was reduced by selecting articles within the past twenty years and by only choosing peer reviewed journals. There are nine articles cited in this paper along with one textbook resource. Other databases were searched such as PubMed and nutrition related textbooks. These provided a few more supporting details to this paper, but the majority of the information was gathered through EBSCO.

RESULTS/DISCUSSION

The physiological make-up of breast milk compared to alternative forms of infant nutrition is what allows it to potentially reduced type I diabetes occurrence in infants. Breast milk has been found to have significant amounts of insulin in its composition based on analysis of breast milk donations of breastfeeding mothers. Formula feeding, on the other hand, is unable to provide infants with insulin based on its current formulation. This difference has been shown to be one example why breastfeeding protects again type I diabetes.³ This idea that early introduction to insulin reduces the risk of gaining type I diabetes, is based on the knowledge that an individual with type I diabetes is lacking insulin production. A lack of early introduction insulin in a newborn's diet can occur when an infant is introduced too early to cow's milk as shown by research conducted by Shehadeh et al.³ In order to test this idea, insulin supplements were given to infants who were weaned off breastfeeding prematurely and the results were as predicted. They found when infants consume milk containing insulin their gut is able to properly mature by decreasing its permeability to larger macromolecules that can cause potential upset. The results showed that insulin, whether provided from breastfeeding or single supplements, increased the infant's tolerance to insulin, which led to a lower risk in type I diabetes in the future.³⁻⁴ Although this still remains a correlation and not necessarily a causation, there is suggestive evidence that insulin found in breast milk allows the baby's body to protect itself against a potential genetic susceptibility to type I diabetes.

Although some literature has found a protective effect of breast milk in preventing type I diabetes, other studies have suggested that the presence of insulin in breast milk ultimately has no effect on the prevalence of type I diabetes. For example, Savilahti et al. followed 6,209 healthy infants throughout their first year in order to gain information about their early infant feeding and a possible later diagnosis of type I diabetes. They found no significant association suggesting early introduction to cow's milk opposed to breastfeeding to be a risk factor in type I diabetes through their collected information. Their findings weaken the association between breast milk and decreased risk of type I diabetes; however, the association still exists.

More research has resulted in similar findings. Cardwell et al.⁶ conducted a study to search out the same question and found a negative association between type I diabetes and breastfeeding for more than 2 weeks. The researchers initially hypothesized that breastfeeding strongly reduces the prevalence of type I diabetes. They found that breastfeeding for more than 2 weeks was shown to be beneficial in reducing type I diabetes. However, when these same women were tested for follow-up data, a weaker association was shown between type I diabetes and breastfeeding when breastfeeding occurred for three months or more. This suggests that the association between breast milk and a decreased risk of type I diabetes in infants may not be as strong as previously predicted.⁶

However, the studies which focused primarily on the physiological components of milk demonstrate milk's potential protective effect against type I diabetes. Physiologically, when an infant's dietary intake is changed from breast milk to—historically—cow's milk the infant's intestinal tract becomes more permeable to larger macromolecules such as bovine serum albumin and casein.³ When done at the appropriate time in an infant's life, it results in no complication. However, if given too early in life, this increased permeability has been shown to increase the risk of autoimmunity and therefore, type I diabetes.^{3,7}

A study conducted by Couper⁸ supported the idea that the physiological components of milk are what can protective infants from the risk of type I diabetes. He began his research acknowledging that an individual can be genetically susceptible to type I diabetes, which is the universally well-known cause of type I diabetes diagnosis. However, it is also known that approximately only 10% of infants who are genetically susceptible to type I diabetes actually acquire the disease.⁸ Therefore, it is known that under the appropriate circumstances, infants will never fully develop the disease. If the environmental factors—such as early introduction of cow's milk—can be controlled, those who are genetically susceptible would never become type I diabetics.⁸ Although the influence of breast milk protecting against type I diabetes is small, the association still, undeniably, exist. This leads to the idea that feeding infants primarily breast milk is one of the main environmental factors parents can control to help protect their baby from future adverse health complications.

There is one more unique quality of breast milk that Couper⁸ believes to especially help protect the body against type I diabetes and the overall health of the infant. He found that breast milk has the ability to protect against enteric infections. Enteric infections could initiate autoimmunity in the body or even lead to the final failure of the malfunctioning beta-cells in individuals with type I diabetes. Research by Lonnrot found similar findings. From their cohort study looking at enterovirus presence in youth with type I diabetes, they found that enteric infections are in fact related to the development of type I diabetes and to the initial destruction of the beta-cells. If an individual experiences chronic enteric infections, especially early in life, it will decrease the permeability of the intestines which will decrease the likelihood of autoimmunity. This information on enteric infections could be a potential explanation why the correlation between breastfeeding and type I diabetes are not as strong as predicted because of the potential of enteric infections resulting in the underlying cause.

Debates have gone back and forth throughout the past years whether or not to promote breastfeeding as a means to reduce the risk in type I diabetes among infants. When looking at the direct physiological benefits, it leads to a clear understanding how breastfeeding is beneficial and to more information about its unique properties. However, researchers who have studied the outright correlation have not found a strong enough relationship to promote its effect. The most appropriate summary between the relationship of breastfeeding and type I diabetes is best stated through the research conducted by Malcova et al. 10 These researchers recognized that the apparent effect of environmental factors influencing the risk of type I diabetes has been increasing over time, just as others had assumed before. The purpose of their study was to find more about this association in hopes of uncovering more evidence. Through questionnaires completed by parents about their experience with breastfeeding and any later diagnosis with diabetes, they found that there was, in fact, a positive association between breastfeeding and the risk of type I diabetes. They noted that breastfeeding over 12 months was associated as the strongest protection against diabetes. However, the researchers concluded that other confounding factors, such as perinatal stress factors, birth size and weight, and prenatal infectious, need to be further researched before a conclusive correlation between these two factors can be made.

In conclusion, the majority of research suggests there is an association between breastfeeding an infant and a reduced risk of type I diabetes when assessing the components in breast milk verses other nutrition alternatives. However, more research is needed to eliminate potential confounding factors relating to this matter. Even though breastfeeding has numerous qualities that make it unique and protective against other forms of chronic diseases, its possibilities of decreasing the risk of type I diabetes still remains questionable.

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