Suboptimal breastfeeding in the U.S. is currently associated with an excess of 3,340 premature maternal and child deaths, due to seven different diseases.[1]

BREASTFEEDING: BETTER HEALTH, LOWER COST

Breastfeeding is an effective preventive health measure for both mothers and babies that not only saves lives, but healthcare dollars as well.

Lives Depend on It

The United States ranks 26 of 29 countries in infant mortality in countries in the Organisation for Economic Co-operation and Development database,[2] with a higher rate for black or African American infants than white.[3] But optimal breastfeeding, meaning 90 percent of women exclusively breastfeeding for six months and continuing to breastfeed for at least one year, could **prevent 721 child deaths** in the country annually from SIDS, necrotizing enterocolitis and lower respiratory infections.[4]

In addition, babies who are breastfed have lower risks of other potentially fatal conditions, including asthma, childhood leukemia, and Type 2 diabetes.[5]

Optimal breastfeeding also reduces mortality in women, **preventing 2,619 maternal deaths** annually in the U.S.[6] from breast cancer, Type 2 diabetes, hypertension and heart attack. And for breast cancer, the second leading cause of cancer deaths among women,[7] even any prior breastfeeding is associated with decreased risks of breast cancer-specific death.[8] For black or African American women in the U.S., who have nearly twice the rates of the aggressive triple-negative breast cancer compared with white women and higher mortality from the disease,[9] improved breastfeeding rates could have significant implications.

To enable more women to breastfeed optimally and drive significant health and cost savings, more than 20,000 CLCs are currently in practice across the United States. Visit www.alpp.org to learn more about the role of CLCs or to locate a CLC near you.

So Does our Economy

The total medical costs of suboptimal breastfeeding in 2014 U.S. dollars were $3 billion.[10] By improving health outcomes, achieving optimal breastfeeding would result in significant savings. Specifically, optimal breastfeeding could prevent the following costly conditions among children:

- **45,298 cases of childhood obesity,** which costs $19,000 in lifetime medical costs per child compared to a normal weight child.[11]
- **601,825 ear infections in children,** the annual cost for which is $2.88 billion in the U.S.[12]
- **1,355 cases of necrotizing enterocolitis,** which costs an estimated $500 million to $1 billion annually to care for affected infants.[13]

Optimal breastfeeding could also reduce expenditures associated with these diseases among women by preventing:

- **5,023 cases of breast cancer,** which accounted for $16.5 billion in direct medical spending in 2010[14]
- **12,320 cases of Type 2 diabetes,** which carries lifetime direct medical costs of $130,800 in women diagnosed between the ages of 25 and 44 years[15]
- **5,982 cases of hypertension,** for which $751 is the mean expenditure per woman for treatment[16]
- **8,487 heart attacks**

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