Breastfeeding can protect against some types of cancers

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THE exclusivity, frequency and duration of breastfeeding all affect the processes that support the mother's breast health while boosting the infant's nutrition and immunity. Exclusive breastfeeding for the first six months, and continued breastfeeding after that period, optimise benefits for the breastfeeding pair. However, breastfeeding rates among urban Malaysian mothers are below World Health Organisation targets (Asia Pacific Journal of Public Health, 2024).

Numerous studies support the fact that exclusive breastfeeding should be promoted for its natural cancer prevention in the mother and child. For maternal breast cancers, this may be even more important, especially if there's a family history of cancer.

A 2022 study in Cancer

Medicine found that breastfeeding reduces the risk of breast cancer by 4.3% for every 12 months of breastfeeding. Breast-feeding reduces the risk of a subtype of breast cancer (triple negative breast cancer) by 20% and in carriers of the genetic mutation known as the BRCA1 mutation, by 22% to 50%.

It is not by serendipity that breastfeeding protects against breast cancer.

Various reviews on this topic (Medical Science Monitor, 2024; Medicine [Baltimore], 2024) highlight networks of structural, hormonal and cellular links that are activated to shield the breastfeeding mother from some types of breast cancers.

Practically, this is how I interpret these strategies working in the nursing mother: In pregnancy, the breast tissue is quite different when compared with before pregnancy, acquiring protective features from some types of cancerous changes. Lactation further alters these grape-like structures and ducts for greater resilience against cancer risk.

A mother's natural hormonal surges encourage milk production and delay ovulation, reducing her exposure to oestrogen. The longer she breastfeeds, the lesser is her exposure to estrogen and its cancer-related effects.

Protection is strengthened by the orchestra of hormonal events, lactational reduction of ovarian hormonal activity, the mother's insulin profile, and oxytocin, which is essential for social bonding.

Through the baby's constant intake of milk, the breasts are regularly emptied, allowing them to refill with milk. These processes promote the removal of damaged cells from the breast tissue, which could otherwise remain and potentially lead to cancer.

Breast milk has numerous components that develop and fortify a baby's immune system. Components like Human Alphalactalbumin Made Lethal to Tumour Cells can precisely attack cancerous cells.

The act of breastfeeding may also affect the mother's inflammatory response and immune system, and in those ways lower her chances of developing breast cancer (Medicine [Baltimore], 2024).

Genetic factors might increase our vulnerability to breast cancer, but breastfeeding has the potential to influence gene expression without altering the DNA sequence, thus lowering the risk of breast cancer. We may better understand this impact by comparison with behaviours like consistent physical activity and healthy eating habits that can lower the risk of heart diseases or high blood pressure, even when there is a family history that predisposes us to these conditions.

Exclusive and continued breastfeeding provide a safe, comprehensive, and natural form of immunotherapy with significant health advantages for both mother and child.