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ORIGINAL ARTICLE

Breastfeeding and influence of maxillary development in infants from 0 to 5 years old

Lactancia materna e influencia del desarrollo de maxilares en infantes de 0 a 5 años

Ángeles María Cárdenas-Bravo [1], **Mayerly Shamirey Redondo-Torres** [1], **Jaime Fernando Armijos-Moreta** [1], **Silvia Marisol Gavilánez-Villamarín** [1]

[1]Autonomous Regional University of the Andes, Santo Domingo, Ecuador.

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ABSTRACT

Introduction: breastfeeding makes possible an increase and convenient development of the oral artifact, favorably stimulates muscular action through the mechanical work performed by the newborn to suck and swallow milk.
Objective: to determine the level of knowledge on the importance of breastfeeding for the normal development of the jaws in children from zero to five years of age, San Jacinto del Búa parish, Santo Domingo, Ecuador.
Methods: an observational, descriptive, cross-sectional, descriptive study was carried out to determine the level of knowledge of mothers with breastfeeding children about the importance of breastfeeding for the normal development of the jaws. The universe was constituted by 36 mothers, the sample by 20, obtained by simple random sampling according to the inclusion and exclusion criteria. In order to obtain the data, a survey was made, the variables and the information collected were statistically described by means of absolute and relative percentage frequencies.
Results: it was possible to determine that 63 % of the population of 20 mothers ranged between 31 and 52 years of age and the other 37 % were between 19 and 30 years of age. It can be observed that 57 % of the children had an age range of zero to one year, 23 % corresponded to children from one to two years of age and the rest of the sample was represented by children aged three years and older. Sixty-one percent of the mothers knew only the benefits on swallowing and to a lesser extent the rest knew about chewing 15 %, esthetics and phonation, leaving 18 % of the mothers who only saw breastfeeding as having a nutritional function.
Conclusions: breastfeeding increases mandibular stimuli and maintains the physiological cycle of nasal breathing because it has the perfect setting to allow the baby to breathe through the nose while inhaling and swallowing rhythmically without releasing the nipple.

Keywords: Jaw; Breast Feeding; Malocclusion; Benefits; Nutrients.

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RESUMEN

Introducción: el amamantamiento posibilita un aumento y desarrollo conveniente del artefacto bucal, estimula favorablemente la acción muscular por medio del trabajo mecánico que desempeña el recién nacido para succionar y deglutir la leche
Objetivo: determinar el nivel de conocimiento sobre la importancia de la lactancia materna para el normal desarrollo de los maxilares en niños de cero a cinco años, parroquia San Jacinto del Búa, Santo Domingo, Ecuador.
Métodos: se realizó un estudio observacional, descriptivo, de corte transversal para determinar el nivel de conocimiento de madres con niños en período de lactancia sobre la importancia de esta para el normal desarrollo de los maxilares. El universo estuvo constituido por 36 madres, la muestra por 20, obtenida mediante muestreo aleatorio simple según los criterios de inclusión y exclusión. Para la obtención de los datos se confeccionó una encuesta, las variables y la información recopilada fueron descritas estadísticamente mediante frecuencias absolutas y relativas porcentuales.
Resultados: se pudo determinar que un 63 % de una población de 20 madres oscila entre un rango de edad de 31 a 52 años de edad y el otro 37 % se encuentra entre un rango de 19 a 30 años. Se puede observar que un 57 % de los niños tiene un rango de edad de cero a un año, el 23 % correspondió a los niños de uno a dos años y el resto de la muestra quedó representada por niños con edades de tres años en adelante. El 61 % de las madres que conocían solamente los beneficios sobre la deglución y en menor medida el resto conocía sobre la masticación 15 %, la estética y la fonación dejando para un 18 % las madres que solo veían la lactancia con función nutritiva.
Conclusiones: la lactancia aumenta los estímulos mandibulares y mantiene el ciclo fisiológico de la respiración nasal porque tiene el ajuste perfecto para permitir que el bebé respire por la nariz mientras inhala y traga rítmicamente sin soltar el pezón.

Palabras clave: Maxilares; Lactancia Materna; Maloclusiones; Beneficios; Nutrientes.

INTRODUCTION

Breast milk is one of the essential foods that the mother can provide for her child, which has no substitute, as it is an ideal source of nutrients. This will favor the achievement of a better relationship between the maxilla (upper part) and the mandible (lower part) of the mouth, thus decreasing malocclusions, according to this review of Latin American literature, breastfeeding is related to an adequate growth and development of the maxilla and mandible which provides good intermaxillary relations.[1]

It is essential to take into account that breastfeeding is considered the ideal nutrition for newborns and an option for infant nutrition from birth. Several studies point to its importance as the only food during the first six months of life. Therefore, exclusive breastfeeding should be recommended and encouraged until at least six months of age, and then supplemented with other foods up to two years of age to ensure proper development of the infant's jaws.[2]

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The elements of human milk play an important role, as it is known to have such an amount of nutrients that it is elemental, providing enzymatic cofactors or substrates for energy and also structural resources and the complex functional role according to which the resources complement the developmental capacity of children who are maturing up to a certain span. Breast milk provides the correct portions of vitamin A, which is essential for the increase of different tissues, proteins, resources for the neurological development of the infant. The single maternal lactation in the first four months and its expansion up to six months, accompanied by the gradual introduction of adequate foods is essential for the infant's health and its correct development of external and internal organs such as the jaws. The composition of breast milk varies throughout lactation due to several factors, such as gestational age, maternal BMI and diet.[3]

One of the most influential factors is the time since delivery. There are several studies on the changes that occur in the first year after birth, however, there is little data on the changes that occur after the first year of breastfeeding. Understanding these changes in the composition of human milk is critical to optimize the use of donated human milk to achieve the best possible nutrition for premature infants.[4]

Paratypic stimuli from the first months of life play a fundamental role in the development of the jaws. Breathing is the first stimulus present in the person and the second is suckling. Throughout this act, the complex muscular displacement that the infant should perform with its jaw and tongue stands out over other facial bones and muscles and the neck and conforms primary stimuli for the good development of the jaws.[5]

Among the various benefits of breastfeeding the baby is the stimulation in the development and increase of each of the constructions of the oral artifact and respiratory system. All infants who are fed unnaturally possess more ways to develop alterations in the increase and development of the buccal area of the face. Due to the fact that as such the tongue is made not to touch the palate, which leads to the oro-facial musculature developing in an unusual way.[5]

Breastfeeding in the dental field makes possible a convenient increase and development of the oral artifact, stimulates favorably the muscular action by means of the mechanical work that the newborn performs to suck and swallow the milk, which helps in a remarkable way to the correct positioning of the jaw, in the transversal increase of the jaws, which gives the convenient means for a proper development of the dental occlusion. The act of suckling is important because the newborn performs nasal expiration as it sucks milk from the breast. Throughout the sucking it is essential to bite, continue and retract the jaw, which stimulates neuromuscular and acquires the development and muscle tone essential to be used for the arrival of the first dentition.[6]

Given the importance of favoring the correct growth and development of the maxillary teeth in children from zero to five years of age, an investigation is carried out in a population of children from the San Jacinto del Búa Parish in order to make known the important benefit of breastfeeding in the process of maxillary development.

METHODS

An observational, descriptive, cross-sectional study was carried out to determine the level of knowledge of mothers with breast-feeding children about the importance of breast-feeding for the normal development of the jaws. The universe was constituted by 36 mothers, the sample by 20, obtained by simple random sampling according to the inclusion and exclusion criteria.

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Inclusion criteria
Adult mothers between 18 and 52 years of age with children exclusively breastfeeding from zero- five years of age and willing to participate in the research.

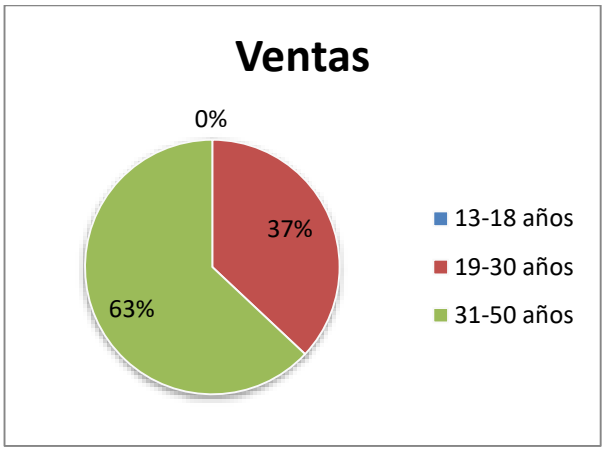
Exclusion criteria
Mothers in the process of gestation, with children older than five years or who were not willing to be The variables used were: age of the mother, age of the child, breastfeeding and its nutritional value, breastfeeding and the development of the oral cavity.

Patient surveys were used to obtain the information, as well as the examination carried out during the consultations. The data obtained were stored in a database created for this purpose. Descriptive statistics were used for the study of the variables, by calculating absolute and relative percentage frequencies.

The principles of medical ethics and the aspects established in the Declaration of Helsinki were complied with. The study was approved by the Ethics Committee and the Scientific Council of the Institution. The data obtained will only be used for research purposes.

RESULTS

It was possible to determine that 63 % of the population of 20 mothers ranged between 31 and 52 years of age and the other 37 % were between 19 and 30 years of age (Graph 1).



Graph 1. Distribution of the sample according to the mother's age

It can be observed that 57 % of the children were between zero and one year of age, 23 % corresponded to children between one and two years of age and the rest of the sample was represented by children aged three years and older (Graph 2).

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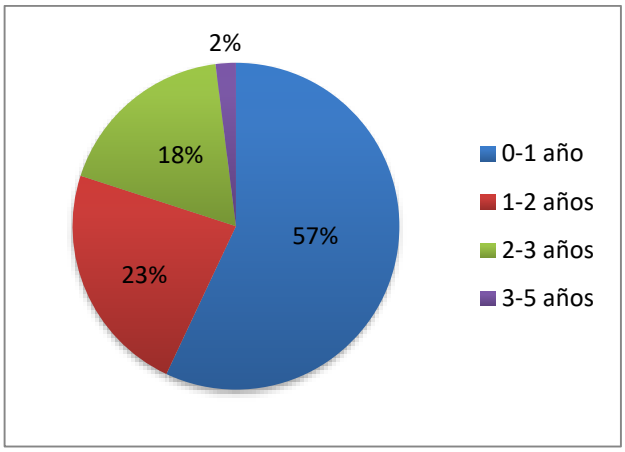
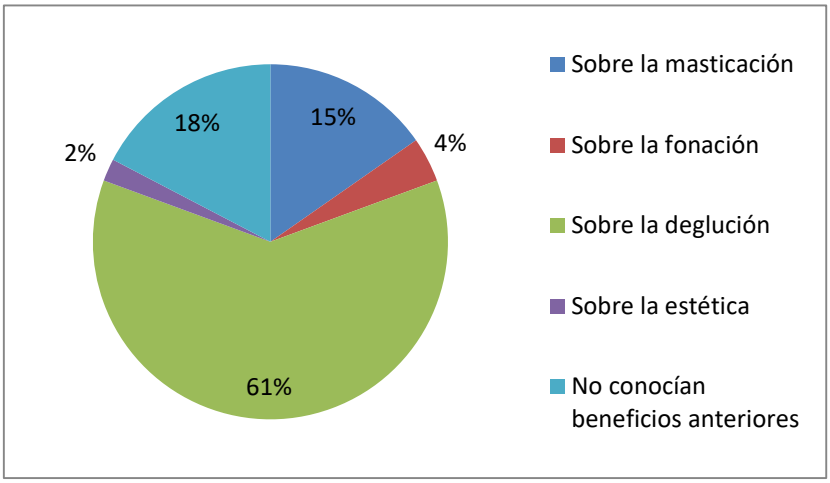


Graph 2. Distribution of the sample according to the age of the infants

The graph shows how the highest percentage 61 % corresponds to mothers who only knew about the benefits on swallowing and to a lesser extent the rest knew about chewing 15 %, esthetics and phonation leaving for 18 % the mothers who only saw breastfeeding with nutritional function. (Graph 3).



Graph 3. Mothers' knowledge of the importance of breastfeeding for the oral cavity.

Forty-eight percent of the mothers knew about the benefits of breast milk for infants in terms of its mineral content, 19 % recognized that this milk largely prevents infant colic. The other percentages established that the mothers had elementary but necessary knowledge to start and maintain breastfeeding once the child is born (Graph 4).

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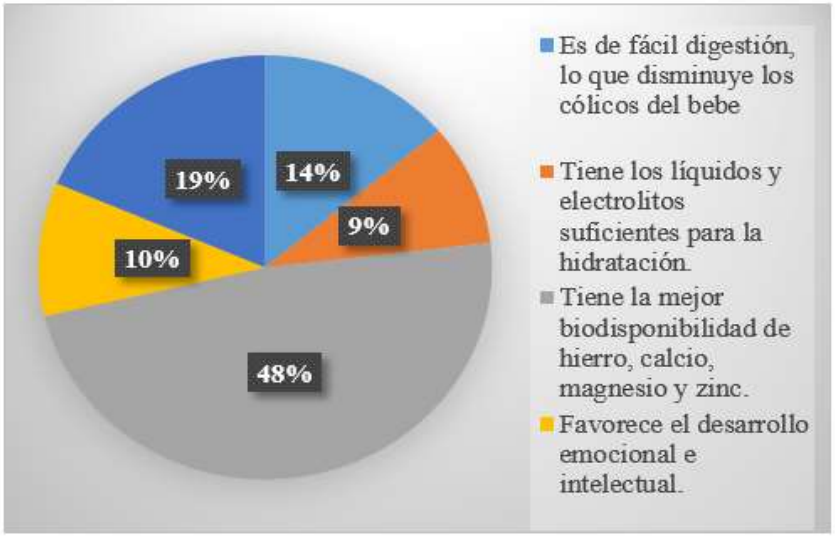

Graph 4. Mothers' knowledge of breastfeeding for its nutritional value.

DISCUSSION

The protrusive (encounter between any dental piece) and retrusive movement excites the TMJ structures and is obtained as a simultaneous response to the growth and remodeling of the jaws. Maternal lactation in the dental field makes possible a convenient increase and development of the buccal artifact, stimulates favorably the muscular action by means of the mechanical work that the newborn practices to suck and swallow the milk, which helps in a remarkable way to the correct positioning of the mandible, in the transversal increase of the jaws, which grants the convenient means for an appropriate development of the dental occlusion.[7] part of the research were excluded.

It is fundamental to point out that it is only breastfeeding that will distribute the nervous stimuli to the proprioceptive centers of the lips, tongues, cheeks, muscles, A.T.M., so relevant for the good management of the stomatognathic system. so relevant for the good management of the stomatognathic system, besides the act of breastfeeding is the only one that activates and physiologically creates the nervous circuits that give the paratypic responses of augmentation and development such as: anteroposterior and transversal augmentation of the mandible, development of the pterygoids, and differentiation of the temporomandibular joints.[8]

Natural breastfeeding represents a preventive measure in the development of future dentofacial anomalies; being the dentist a promoter of constant effort to promote the teaching of dental health in our own children, through the mother. The suction needs the complete introduction of the nipple and areola in the infant's mouth, until the tip of the nipple reaches the soft palate, producing the complete seal to produce the vacuum.[9]

For this, the inquiry reflex is used, triggered by the infant's lower lip stimulus, which creates the opening of the infant's mouth and places the flattened tongue on its floor. With the areola and nipple already introduced in the mouth, the tongue is moved forward over the gum, compresses the areola against the hard palate with undulating movements (one or more per second according to the flow of milk obtained) and squeezes it, extracting and swallowing the milk.[10]

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When the nipple and areola are newly introduced, a high frequency of these movements is triggered, as a physiological stimulus for milk ejection. At birth, the infant has the mandible in a posterior or distal position to the upper jaw, and when making a movement to take the nipple and swallow it, it forms the shape of the oral cavity and the mandible for a correct posterior occlusion, other authors suggest that breastfeeding is a stimulus that facilitates the movement of the mandible from a distal position to a medial position with respect to the maxilla. This is the first physiological advance in the so-called occlusion. In this way, mandibular retraction is avoided and a better maxillary-mandibular relationship is achieved.(11)

In infants, the lips, mandible, gums, tongue, buccal fat pads, hard and soft palate and epiglottis represent functional anatomical structures suitable for suckling. The cheek contains Bichat's fat sac, which is an accumulation of fat located between the buccinator and masseter muscles, and acts as a buffer for the muscles during suckling. The tongue arises from the pharyngeal endoderm, the branching mesoderm and the occipital sarcomere. The taste buds are already formed on the 50th day of pregnancy.

With a flat ATM shape, it lacks a well-formed interarticular condyle or meniscus and has been replaced with sufficient connective tissue to act as a cushion to cushion the anteroposterior movements that occur during lactation.(12)

In Venezuela, studies conducted by Jiménez Ortega AI,(13) with preschool populations provided important data. The percentage of breastfed children with malformed features was high (56,8 %), in contrast to those who were not breastfed (38,6 %). It also occurred that as the number of months of breastfeeding increased, the proportion of children with upright position increased significantly: 38,7 % in infants who were artificially fed, 7,56 % in infants breastfed from one year of age to six months, compared to 85,19 % in infants older than six months who were exclusively breastfed.

On the other hand, a study was carried out in Costa Rica, where 225 children were evaluated to determine the effect of breastfeeding on the normal development of the mandible and jaws. The results of the survey, along with other findings, showed that the average child who did not receive milk from his or her mother for more than three days after birth was 2,6 times more likely to develop osteogenesis imperfecta than the average child with other children who did. On the other hand, it was found that Zimbabwean children, who were breastfed by their mothers as often as they wanted, generally did not develop bad habits such as thumb sucking. However, authors such as Moyers, Johnson and Morris found that early feeding patterns have little effect on the prevalence of thumb sucking.(14)

The classic sucking or swallowing position of the newborn, shows that the head is stretched out, the tongue stretched out and attached to the floor of the mouth, the chin parted, and the lips placed around the nipple. When swallowing, rhythmic contractions of the tongue and facial muscles help stabilize the lower jaw. In fact, other situations such as the shape of the jaw, the direction in which the muscles involved are positioned (in infants, the activity is almost exclusively in the orbit) and the mentonian muscle) and the lack of teeth, the anterior-posterior movement of the jaw support you. This means that, in this act, the child not only sucks as is generally believed, but literally milks in that direction, which is right to the mother's breast with the chin movements back and forth, and this continuous exercise prepares his chewing, muscles and his whole system and receives the necessary tension and development when the first teeth appear.(15)

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In addition to muscle activity, when the child applies strong pressure around the nipple, milk is expressed from the breast. This has the added benefit of helping to open and empty the eustachian tubes and pharynx, which reduces the risk of ear and respiratory infections in infants and reduces the risk of allergic conditions that commonly cause mouth breathing.(16)

Breastfeeding increases jaw stimulation and maintains the physiologic cycle of nasal breathing because it has the perfect setting to allow the baby to breathe through the nose while rhythmically inhaling and swallowing without releasing the nipple. This reduces the frequency of mouth breathing in infants. Nasal breathing is essential for proper craniofacial development, as the passage of air through the nostrils is a stimulus for the spatial development of the nostrils, which is intimately associated with the development of the upper jaw.(17)

In addition, the defenses that are transmitted to the child through breast milk, among other things, protect the child from frequent colds. It is often accompanied by mucous secretions that obstruct the nasal passages and make it difficult to breathe through this route In comparison with infant formulas, breast milk offers great advantages, such as the transfer of lactoferrin, lysozyme, immunoglobulin A, leukocytes, bifid aspect, lactoperoxidase, anti-staphylococcal aspect; biological maintenance (quality, consistency, temperature, grapheme and nutrient balances); and emotional and sensory affective maintenance. This difference in the flow to the immune system may elucidate the maximum incidence of allergic diseases in formula-fed infants.(18)

Bottles have improved dramatically, but newborns do not make the same effort as breastfeeding and bottle-feed their infants, so they grow slowly, have small jaws, fit their teeth well, etc. When a baby is artificially breastfed (bottle-fed), unlike breastfeeding, the baby needs to control the amount of milk consumed and avoid choking and swallowing, I can not make physiological movements of the lower jaw.(19)

Lack of adequate muscle movement reduces the growth and irritation of the mouth shape and predisposes to the development of future dental problems. Much attention has been given to the problem of bottle feeding as a cause of facial dental anomalies. Artificial feeding is required because the swallowing morphology of the internal organs persists. This should be normal in an edentulous child (pushing the tongue between the edges of the alveoli), but changes when it is initiated (putting the tip of the tongue forward) on the palate behind the maxillary incisors.(19)

The World Health Organization and U.N.I.C.E.E. F in March 2004, presented the "World Tactic for Food Intake of the Infant and Tiny Infant", which is established as a strategy of inestimable transcendence for governments to encourage environments that stimulate mothers to adopt informal choices on the food intake of their children, institutes the defense, promotion, support and encouragement in all health establishments, therefore, the realization of this research work is essential, Therefore, the realization of this research work is of vital importance for the mothers of the San Jacinto del Búa parish to adopt the natural breastfeeding method and to have knowledge about its benefits in the dental area, among other health areas.

As could be observed throughout the process of data collection through the survey, it was also determined that mothers claim to have knowledge about the benefits of breast milk, however, they are not fully aware of these benefits because there is confusion or a certain degree of misinformation because in some cases there are no means by which mothers can be more informed about the subject of breastfeeding and put it into practice, so that infants have a correct dental development.

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CONCLUSIONS

Thanks to the data obtained and the results that could be obtained, it was concluded that maternal lactation for a period of 6 months or more prevents dental malocclusions. This is due to the fact that the mouth is directly related to functionalities such as breathing, suckling, sucking, swallowing and chewing; on the other hand, the mouth is surrounded by powerful muscle bundles that play a fundamental role in the development of the craniofacial mass and in the harmonic management of the oral artifact, hence functional alterations disturb the morphology of the jaws. This event, together with other relevant effects on the prevention of infections, on the health and well-being of the mother, on the spacing of pregnancies, on the health of the family nucleus, on the economy of the family nucleus, the territory and on the production of food, makes natural lactation a key factor of self-sufficiency, of primary health care and of the recent development criteria. Natural lactation represents a preventive measure in the development of future dentofacial anomalies; being the dentist a promoter of constant effort to promote the teaching of dental health in our own infants, through the mother.

Conflicts of Interest

The authors declare no conflicts of interest in relation to the present investigation.

Declaration of Authorship

All authors participated in the conceptualization, research, writing - initial draft, writing - revision and editing.

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