

The Effect of Prolonged Breast-feeding on the Development of Postmenopausal Osteoporosis in Population with Insufficient calcium intake and vitamin D level

B.H.Yun^{1,2}, S.J.Chon³, Y.S.Choi^{1,2}, S.Cho^{2,4}, B.S.Lee^{1,2}, S.K.Seo^{1,2}

 ¹ Department of Obstetrics and Gynecology, Yonsei University College of Medicine
² Institute of Women's Life Medical Science, Yonsei University College of Medicine
³ Department of Obstetrics and Gynecology, Gil hospital, Graduate school of Medicine, Gachon University of Medicine and Science
⁴ Department of Obstetrics and Gynecology, Gangnam Severance Hospital, Yonsei University College of Medicine

OSTEOPOROS INT. 2016 SEP;27(9):2745-53.

• I have no conflict of interest to declare.



Contents









Breast-feeding

- ✓ Directly affects bone metabolism and calcium homeostasis.
- Potentially negative effects of breast-feeding on osteoporosis are abrogated soon after cesession.





Compston et al., Clin Endocrinol 1990

By Interrupting the bone mass accumulation, breast-feeding may affect the bone health later on.



	No harm	Risk for postmenopausal osteoporosis
	Schnatz, PF et al. Menopause 2010;17(6):1161-6 (New York, USA)	Tsvetov, G et al. Maturitas 2014;77(3):249-54 (Tel Aviv, ISRAEL)
	Leonora, J et al. BMC Womens health 2009;9:19 (Colombo, Sri Lanka)	Okyay, DO et al. Maturitas 2013;74(3):270-275 (Izmir, Turkey) Dursan,N et al. Osteoporos Int 2006;17(5):651-655 (Kocaeli, Turkey)
Main Question	Grimes, JP et al. Curr Womens Health Rep 2003;3(3):193-198 (New Jursey, USA)	Rajano-Mejia,D et al. Menopause 2011;18(3):302-306 (Mexico-city, Mexico)
Breast-feeding duration be a risk for postmenopausal osteoporosis, ns with Calcium intake and vitamin	Hadji, P et al. Climacteric 2002;5:277-285 (Hamburg, Germany)	

D level?

연세대학교 의과대학 YONSEI UNIVERSITY COLLEGE OF MEDICINE

Materials & Methods



Measurements

- ✓ Physical examinations
- Body mass index (BMI)
- ✓ Serum vitamin D [25-hydroxy(OH)-D] levels
- ✓ Bone mineral density (BMD)

Interviews

- ✓ Smoking histories
- ✓ Exercise levels
- Nutritional intakes

 Reproductive factors
(Ages at menarche and menopause, histories of taking OC and HT, gravidity)

Breast-feeding histories

Statistical analysis

- Student's t-test
- Mann-Whitney U test
- Chi-square test
- ANOVA with post-hoc analysis using Bonferroni's method
- Logistic regression analyses

IBM®SPSS® software version 20



- Dietary calcium intake
 - Lower intake group: <800mg/day</p>
 - Higher intake group: ≥800mg/day
- Level of serum vitamin D
 - Deficiency: <20ng/mL</p>
 - Insufficiency: 20ng/mL≤, < 30ng/mL</p>
 - Sufficiency: ≥30ng/mL

	Qua	artil	es
--	-----	-------	----

Q1	3.26-12.85ng/mL
Q2	12.86-16.39ng/mL
Q3	16.40-21.55ng/mL
Q4	21.56-42.9ng/mL



Results



Baseline characteristics

	Osteoporosis group (<i>n</i> =304)	Non-osteoporosis group (<i>n</i> =927)	p-value
Age, years	62.69 (5.65)	58.32 (5.95)	<0.0001
BMI, kg/m2	23.39 (2.92)	24.58 (3.25)	<0.0001
Age at menarche, years	16.28 (2.07)	15.80 (1.96)	<0.0001
Age at menopause, years	50.93 (2.92)	50.90 (2.86)	0.868
Time since menopause, years	11.76 (6.16)	7.42 (5.72)	<0.0001
Gravidity, n	5.78 (8.87)	6.07 (11.23)	0.682*
Time from menarche to first delivery, years	7.97 (3.57)	8.46 (3.89)	0.055
Calcium intake, mg/day	431.96 (274.51)	480.81 (331.57)	0.025
Exercise, days/week	1.77 (2.90)	2.11 (3.01)	0.082
Total duration of breast-feeding, months	51.79 (36.41)	39.94 (31.42)	<0.0001
Smoking status, n (%)			0.213
Never smoked	290 (23.6)	859 (69.8)	
Current smoker	9 (0.7)	37 (3)	
Past smoker	5 (0.4)	31 (2.5)	

COLLEGE OF MEDICINE

Baseline characteristics -continued

	Osteoporosis group (n=304)	Non-osteoporosis group (<i>n</i> =927)	p-value
History of HT use, <i>n</i> (%)			0.002
Yes	41 (13.5)	199 (21.5)	
No	263 (86.5)	728 (78.5)	
History of OC use, <i>n</i> (%)			0.061
Yes	64 (21.1)	245 (26.4)	
No	240 (78.9)	682 (73.6)	

* Mann-Whitney *U* test was performed on the continuous variables that did not show normal distributions. The data presented are the means with standard deviations unless otherwise noted. The *p* values were obtained using Student's *t*-test or the chi-square test, as appropriate. *BMI* body mass index, *HT* hormone treatment, *OC* oral contraceptive



Osteoporosis development according to the total breast-feeding duration

	Never (<i>n</i> =104)	<24 months (<i>n</i> =451)	≥24 months (<i>n</i> =673)	p value
Femoral neck BMD, g/cm2	0.68 (0.10)*	0.67 (0.09)#	0.64 (0.98)*#	<0.0001
Lumbar spine BMD, g/cm2	0.86 (0.14)*	0.85 (0.12)#	0.81 (0.13)*#	<0.0001
Femoral neck T score	-1.19 (0.94)*	-1.26 (0.87)#	-1.51 (0.92)*#	<0.0001
Lumbar spine T score	-1.24 (1.21)*	-1.33 (1.08)#	-1.69 (1.17)*#	<0.0001
Osteoporosis of the femoral neck, <i>n</i> (%)				0.01
Osteoporosis group	7 (5.9)	31 (26.1)	81 (68.1)	
Non-osteoporosis group	96 (8.7)	419 (37.9)	591 (53.4)	
Osteoporosis of the lumbar spine, <i>n</i> (%)				<0.0001
Osteoporosis group	12 (4.8)	66 (26.3)	173 (68.9)	
Non-osteoporosis group	91 (9.5)	382 (39.8)	487 (50.7)	
Osteoporosis, n (%)				<0.0001
Present	15 (5.0)	83 (18.4)	205 (67.7)	
Absent	89 (9.6)	368 (39.8)	468 (50.6%)	견세대학교 의과[
			Y THE Y	ONSEI UNIVERSITY College of medicine

Comparison of the groups in relation to the serum vitamin D levels & quartiles

	Osteoporosis group (<i>n</i> =304)	Non-osteoporosis group (<i>n</i> =927)	<i>p</i> value
Mean (standard deviation) serum vitamin D (25[OH]D), ng/mL	17.21 (6.55)	17.85 (6.70)	0.154
Serum vitamin D quartile, <i>n</i> (%)			
Q1, 3.26–12.85 ng/mL	85 (29.9)	210 (23.5)	
Q2, 12.86–16.39 ng/mL	70 (24.6)	224 (24.6)	
Q3, 16.40–21.55 ng/mL	63 (22.2)	231 (25.9)	
Q4, 21.56–42.9 ng/mL	66 (23.2)	228 (25.5)	
Serum vitamin D status <i>, n</i> (%)			0.534
Deficient	203 (71.5)	607 (68.0)	
Insufficient	66 (23.2)	235 (26.3)	
Sufficient	15 (5.3)	51 (5.7)	



Unadjusted odds ratios of the risk factors

for postmenopausal osteoporosis

opausal osteopo	rosis		Unadjusted OR (95 % CI)	<i>p</i> value
Unadjusted OR (95 % Cl)	p value	Exercise	0.960 (0.917–1.005)	0.083
1.132 (1.106–1.159)	< 0.0001	Total breast-feeding duration		
1.611 (1.221–2.126)	0.001	Never	1	
0.948 (0.905–0.994)	0.026	<24 months	1.338 (0.737–2.430)	0.339
		≥24 months	2.599 (1.468–4.601)	0.001
1.137 (0.626–2.066)	0.673	Smoking status		
0.955 (0.505–1.806	0.887	Never smoked	1	
1		Past smoker	0.478 (0.184–1.24)	0.129
		Current smoker	0.721 (0.344–1.511)	0.386
1.398 (0.964–2.029)	0.078	Age at menarche	1.128 (1.056–1.204)	<0.0001
1.080 (0.736-1.584)	0.696	Age at menopause	1.004 (0.959–1.050)	0.867
0.942 (0.637–1.393)	0.765	Time since menopause	1.125 (1.10–1.15)	<0.0001
1		Gravidity	0.997 (0.985–1.01)	0.683
0.570 (0.396–0.821)	0.003	Time from menarche to first delivery	0.966 (0.933–1.001)	0.055
0.742 (0.543–1.014)	0.061	((여세대학:	피 의과디

YONSEI UNIVERSITY COLLEGE OF MEDICINE

	Unadjusted OR (95 % CI)	<i>p</i> value	Exe
Age	1.132 (1.106–1.159)	<0.0001	Tot dur
ВМІ	1.611 (1.221–2.126)	0.001	
Calcium intake	0.948 (0.905–0.994)	0.026	
Serum vitamin D status			
Deficient	1.137 (0.626–2.066)	0.673	Sm
Insufficient	0.955 (0.505–1.806	0.887	
Sufficient	1		
Serum vitamin D quartiles			
Q1	1.398 (0.964–2.029)	0.078	Age
Q2	1.080 (0.736–1.584)	0.696	Age
Q3	0.942 (0.637–1.393)	0.765	me
Q4	1		Gra

ΗT

OC

Adjusted odds ratios of the risk factors for postmenopausal osteoporosis

	Total breast-feeding duration	Adjusted OR (95 % Cl)	p value
Model 1	Never	1	
	<24 months	1.996 (0.901–4.422)	0.089
	≥24 months	2.489 (1.111–5.578)	0.027
Model 2	Never	1	
	<24 months	2.005 (0.906–4.436)	0.086
	≥24 months	2.503 (1.118–5.602)	0.026
Model 3	Never	1	
	<24 months	2.212 (0.843–5.808)	0.107
	≥24 months	2.825 (1.056–7.56)	0.039

Model 1 was adjusted for age, BMI, calcium intake, exercise, smoking status, age at menarche, age at menopause, years since menopause, time from menarche to first delivery, hormone treatment, oral contraceptives use, gravidity, and the serum vitamin D status (deficient, insufficient, or sufficient).
Model 2 was adjusted for the same variables used in model 1, except for the vitamin D status, which was substituted for the vitamin D quartiles.
Model 3 was adjusted for the same variables used in model 1, but the regression analysis was performed only

대학

on the cases that were vitamin D deficient.

 Breast-feeding for ≥24 months → Increase in the development of osteoporosis in the participants with deficient and insufficient vitamin D levels and daily calcium intakes lower than 800 mg.



의과대학

COLLEGE OF MEDICINE

sufficient serum vitamin D levels.

Discussion

- Total breast-fed duration more than 24 months lifelong are associated with the development of osteoporosis in postmenopausal women.
- Total breast-feeding durations may contribute as a risk factor of osteoporosis in particular countries, including Korea, where vitamin D deficiencies and inadequate calcium intakes are prevalent.
- Limitations of the study
 - Probability of selective bias: elder women has a tendency to have longer breast-feeding duration.
 - ✓ Retrospective, comparative design.



Conclusion

- Breast-feeding may increase the risk of postmenopausal osteoporosis, especially those with insufficient vitamin D levels and calcium intakes.
- Although nutritional deficiency is a modifiable factor, caution should be exercised when assessing women who give birth and breast-feed in certain areas.





THANK YOU FOR YOUR ATTENTION !



