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Validity of Guatemalan Mother's Self-Reported Breast-Feeding Practices of  
3-Month-Old Infants.

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**INTRODUCTION:** Breast-feeding practices (BFPs) can be assessed by interviewing the mother about current feeding practices and with a 24-hour recall. It is crucial to establish the accuracy of these methods, which are commonly used by public health decision makers to design health policies aimed at increasing exclusive breast-feeding rates.

**OBJECTIVE:** We aimed to validate 2 self-report BFP instruments using the dose-to-mother deuterium oxide turnover technique (DMDOT) as the reference method.

**METHODS:** Breast-feeding practices were assessed by interviewing the mother about current feeding practices and with a 24-hour recall in 36 Guatemalan mother-infant pairs. The validity of these instruments was assessed using DMDOT

as the reference method.

**RESULTS:** Both self-report instruments overestimated exclusively breast-fed (EBF) infants. Infants classified as EBF were 50% by the reported current feeding practice, 61% by the 24-hour recall, and only 36% using DMDOT. Sensitivity to detect EBF infants from the mother's self-report was 92% (95% CI: 62%-99%) while from the 24-hour recall was 100% (95% CI: 72%-100%,  $P < .01$ ). However, specificity for both instruments was low, at 74% (95% CI: 51%-89%) for reported current feeding practice and at 61% (95% CI: 39%-79%) for the 24-hour recall ( $P < .01$ ).

**CONCLUSION:** Both reported current feeding practice and the 24-hour recall instruments overestimated exclusive breast-feeding. Nevertheless, the use of reported current feeding practice provided more accurate data to assess BFPs in a public health setting. Furthermore, population-based surveys should consider the overestimation of exclusive breast-feeding caused when using these BFP instruments.

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