

Knowledge Based Maternal Awareness on Probiotics as Beneficial Products in Day to Day Life

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DESCRIPTION

Probiotics are micro-organisms found in things like yogurt, they are beneficial and aid in digestion, healthy bacteria for the gut, good bacteria that help with the normal functioning of the digestive system, bacteria, product that helps the healthy bacteria in intestines.

Something good for human body that is some kinds of yogurts. The majority of mothers used positive words or phrases to describe probiotics such as beneficial, good, healthy, or provided positive health benefits that they related with probiotic products [1]. None of the mother is responses limited negative statements concerning probiotics or their health effects. Though not explicitly asked, many mothers also labelled health benefits they believed, or had heard, to be associated with probiotics. The most cited were benefits connecting to digestion such as good for digestion, gut health, and maintains GI function [2]. The body of research on the beneficial health effects of probiotics in young children endures to grow, characterizing mothers' knowledge and sentiments on the use of probiotic products are important. Our study obtainable that mothers rank probiotics as harmless for infants than additional commonly used products such as herbal remedies, vitamins, and antibiotics, suggesting that mothers see probiotics as comparatively low-risk. The finding is comparable to research on patients with disorder of gastrointestinal who similarly watched probiotics as a more natural and low-risk therapeutic option compared to pharmaceutical treatments [3]. It has been contended that the marketing of probiotics and their extensive availability at grocery stores reinforces this perception among consumers. Though, the relatively low use in infants compared to mothers' usage (51 vs 89%), and maternal uncertainty over their safe use in infants proposes that mothers are more cautious about their use in this population group or unsure of the benefits to their infant. Certainly, many mothers specified that they were indeterminate whether probiotic use in infants has been proven to be beneficial by scientific research. Many also indicated that they didn't have plentiful information to describe their views of probiotics or safety for use in infants. This is unsurprising given benefits of probiotics in prevention and treatment of pediatric disorders is

conflicting and in many cases not yet convincing enough to warrant healthcare recommendations [4].

A stimulating finding of the study was that whilst the majority of mothers acknowledged that probiotics can alter a person's microbiota, when presented with the hypothetical scenario that probiotics could permanently alter their infant's microbiota, the majority would choose not to use them. While a permanent change could be permanently beneficial, this scenario was clearly apparent as negative by mothers in the recent survey. In reality, both adults and older children suggests that probiotic use only transiently alters gut microbiota profiles; however, it is reasonable that exposure to probiotics in infancy throughout this dynamic phase of intestinal microbiota development could cause more tenacious changes. Certainly, there is evidence that other types of early life exposures capable of disrupting the normal development of the microbiota, such as antibiotic use and cesarean section delivery, can have a long lasting impact on the gut microbiota of infants [5].

There are a number of limitations inherent to self-administered web-based survey designs that must be considered when interpreting the results. The most important consideration is the introduction of bias due to non-response. Our response rate of 31%, although typical of self-administered survey designs, is low and it is possible that survey respondents differ substantially from those that did not respond. For example, individuals already aware of, or using, probiotics may be more likely to respond to the survey, thus biasing results regarding usage and knowledge.

CONCLUSION

Analysis of demographic characteristics of respondents revealed that similar in all respects to the total APrON cohort, except for level of education. This fact, coupled with the tendency of the overall APrON cohort to over represent older, more educated mothers, may limit the generalizability of our conclusions to the wider Canadian population. Finally, whilst the present study provides an initial overview of mothers' perspectives of probiotic use in infants, the design did not allow for detailed investigation surrounding attitudes. Future qualitative studies using in-depth

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interview techniques on a broader spectrum of the population will be important to develop greater understanding of parental use of probiotics in infants and to investigate factors important for effective knowledge translation.

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