Table 1. Multivariate logistic regression model for the association of ethnicity and infant feeding habits at 3 weeks of life with gastroesophageal reflux disease in the first year of life[a,b]

Model 1 (n=127)	aOR (95% CI)	*P* value
Ethnicity		
Chinese	1.00	-
Malay	0.14 (0.03–0.63)	**0.01**
Indian	0.19 (0.02–2.03)	0.17
Mixed ethnicity	0.2 (0.04–1.09)	0.06
Expressed BM (frequency) at week 3	0.96 (0.85–1.09)	0.51
Exclusive breastfeeding at week 3	0.44 (0.19–0.98)	**0.05**
Breast milk (direct + expressed) at week 3	1.12 (0.47–2.66)	0.80
Model 2 (n=127)		
Ethnicity		
Chinese	1.00	-
Malay	0.14 (0.03–0.63)	**0.01**
Indian	0.19 (0.02–2.05)	0.17
Mixed ethnicity	0.20 (0.04–1.11)	0.07
Expressed BM (frequency) at week 3	0.96 (0.84–1.00)	0.57
Exclusive breastfeeding at week 3	0.43 (0.19–0.97)	**0.04**
Expressed BM at week 3	0.98 (0.29–3.31)	0.98

aOR: adjusted odds ratio; BM: breast milk

[a] All models adjusted for household income, maternal highest education level, multiparity, birthweight and gestational age.

[b] For each type of feeding, parents were asked to indicate the frequency of feed. Exclusive breastfeeding was defined as an affirmative response to the question, "Is your baby still breastfeeding?" AND an indicated frequency of direct breastfeeding, expressed breast milk or donor breast milk of >0 time per day AND frequency of formula use, cow's milk, other milk and solid intake indicated as 0 time per day. Information on the mode of breast milk feeding such as fed at the breast (direct), fed expressed breast milk (EBM), or a combination of being fed at the breast and being fed EBM, was also collected among infants who were breastfed at each time point.

Figures in bold are significant