

DEPARTMENT OF HEALTH POLICY FORUM

The Barker Hypothesis

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Dr. Snyder reported on The Barker Hypothesis, which posited in 1986 that a baby's nourishment before birth and during infancy is a determinant of health status in later life. Based on British county-level data from the early part of the 20th century, Barker and colleagues associated poverty with an increase in heart attacks by a rate of more than 40%.

The Hypothesis, also called the DOHaD (Developmental Origins of Health and Disease) Hypothesis, suggests that maternal "shocks" received to the fetus in utero put one at later-life (eg, 70s) health risk, via the following means: 1) adverse maternal conditions in utero affect the fetus' physiology, which cannot be fully compensated for after a given developmental stage has passed; or 2) adverse health events to the fetus or young child alter the baby's physiology and are difficult to offset after childhood.

The hypothesis proposes an association between infant development and chronic disease, but not a causal relationship. The confounding variable is poverty, Barker and colleagues were aware, but the nuances were not studied.