Infant Feeding and COVID-19

Please note: Information may change as more is discovered about this novel virus.

What do we know?

- The World Health Organization states that mothers with COVID-19 can breastfeed, given that there is no strong evidence of COVID-19 transmission through breast milk.
- Breastfeeding is biologically normal and encouraged. There are clear health advantages for a baby who is breastfed as well as for a mother who breastfeeds.
- Breastfeeding is protective. Mothers pass on antibodies to their babies in breastmilk. These antibodies can help protect their babies from illnesses against which their mothers have immunity.
- All families may need extra support during these times. Community resources may be limited. We must do our best to help families navigate in these challenging times.

How do we manage infant feeding and COVID-19?

Three scenarios are discussed below.

1. A mother who does NOT have COVID-19:

- Support skin-to-skin and rooming-in for all babies.
- Support the mother to initiate breastfeeding, continue breastfeeding, and delay weaning. Breastfeeding provides infants with antibodies that their mothers produce.
- Encourage all care providers to wash their hands frequently, and always before touching the infant. Health care providers must wear a mask when providing care to all patients.
- If a family needs infant feeding help, they can get support from and find local resources through:
  - their local hospital or clinic: [http://www.nshealth.ca/women-childrens-health](http://www.nshealth.ca/women-childrens-health)
2. A mother who is at home, and who
   a. may have been exposed to COVID-19 OR
   b. has symptoms consistent with COVID-19 OR
   c. has tested positive for COVID-19

   • Support safe skin-to-skin care and rooming-in for all babies.
   • Support the mother to initiate breastfeeding, continue breastfeeding, and delay weaning.
   • Encourage the mother to wash her hands frequently, and always before touching her infant.
   • Encourage the mother to wear a face mask when caring for her infant, such as during diaper changes, cuddling, and feeding.
   • If the infant is content, he or she should be in a bassinet 6 feet away from the mother.
   • A mother can be considered recovered from COVID-19 ten days after the onset of the first symptoms, if she is afebrile and has improved clinically. A cough may persist, but she no longer needs to wear a mask. Asymptomatic COVID-19-positive mothers may be considered negative 10 days after their laboratory confirmation, if they remain asymptomatic.
   • In the rare circumstance that HCPs would be present in the home, staff must wear appropriate droplet PPE and practice physical distancing where possible.

3. A mother who is symptomatic and is in hospital with COVID-19:

   • Support safe skin-to-skin care and rooming-in for all infants.
   • Support the mother to initiate breastfeeding, continue breastfeeding, and delay weaning.
   • Encourage the mother to wash her hands frequently, and always before touching her infant.
- Encourage the mother to wear a face mask when caring for her infant.
- If the infant is content, he or she should be in a bassinet 6 feet away from the mother.
- Staff should wear appropriate droplet PPE and practice physical distancing where possible.

**If the mother has COVID-19 and needs more intensive hospital care:**

- The mother should practice hand washing and wear a mask, as above.
- Assist the mother with hand expressing and/or pumping. If possible, leave a dedicated pump with the mother.
- A healthy caregiver should feed this expressed breast milk to the baby using a method that is realistic for the age of the infant and the volume they are receiving.
- Thoroughly sanitize all pump parts that come into contact with human milk, and disinfect the entire pump per the manufacturer’s instructions.
- Consider re-lactation or other options as needed (see second WHO link [#9] in the “References” section below).

**How can we support our non-breastfeeding families?**

Families who cannot feed their baby breastmilk, or who have made an informed decision to formula feed their baby, need support during these challenging times.

- Encourage all families to practice skin-to-skin and rooming in, and to follow respiratory precautions — the same as breastfeeding families.
- It is important to provide families practical and safe advice about feeding their baby. Families should be encouraged not to stockpile formula, but to have enough for 2–4 weeks at a time on hand. If they are finding it difficult to find formula, contacting the formula company directly may be helpful.
- Many brands of formula can be safely interchanged when their usual brand isn’t available.
- Homemade formula is **not** a safe alternative.
How can we support all families?

These can be especially stressful times for families welcoming new infants into their family.

- Acknowledge their feelings and help them recognize the signs of distress.
- Families should be encouraged to take care of themselves by
  - getting adequate rest
  - finding ways to cope with stress
  - drinking plenty of fluids
  - eating well
  - connecting with others through phone and video calls
References

11. SafelyFed Canada: safelyfed.ca
12. Centers for Disease Control and Prevention: How to keep your breast pump kit clean: https://www.cdc.gov/healthywater/hygiene/healthychildcare/infantfeeding/breastpump.html

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