



Breastfeeding After a Natural Disaster

This sheet talks about the risks that exposures following a natural disaster can have during breastfeeding. With each pregnancy, all women have a 3% to 5% chance of having a baby with a birth defect. This information should not take the place of medical care and advice from your health care provider.

Why is breastfeeding good for my baby?

There are many benefits to breastfeeding. Breast milk is the best source of nutrients for growing babies. It can also help protect babies from infection. Breastfeeding costs much less than bottle-feeding. It is more convenient because there are no bottles to wash or formula to buy, mix, and refrigerate. If you are breastfeeding during a natural disaster, there is no need to worry about finding safe, clean water with which to mix formula or wash bottles. Finally, breastfeeding can be soothing and reduce stress for both a mother and her baby.

What kinds of things could I be exposed to in a natural disaster that might be passed to my baby in breast milk?

Vaccines

Vaccines are given to protect people from serious diseases. They are important for your own health. Because most vaccines do not contain live viruses that could be passed to the baby through breast milk, they are safe for women who are breastfeeding. Tetanus vaccine is often needed after a natural disaster. Other vaccines might be needed after some disasters. Check with your health care provider and local health officials about which vaccines are recommended if a natural disaster has occurred in your area. Be sure to tell them that you are breastfeeding.

Infections

Some infections are more common following a natural disaster. Local infections of a mother's skin usually are not dangerous to a breastfeeding baby. More serious infections, such as those caused by West Nile virus, hepatitis A, and others, can be more complicated. In general, a mother's illness is not a reason to stop breastfeeding. However, some medications used to treat infections enter breast milk and might affect a breastfeeding baby (see the next section). Be sure to tell your health care provider that you are breastfeeding so that you receive the medication that is best for you. Also, be sure to drink lots of liquids when you have an infection so that you don't become dehydrated. If you become severely dehydrated, it might reduce the amount of breast milk that you make.

Medications

It may be necessary to take medicine following a natural disaster if you have an infection or other illness. Many medications are safe to take while breastfeeding. However, some medications that enter breast milk may affect a breastfeeding baby. For example, some babies are allergic to certain antibiotics. Others antibiotics may cause an upset stomach or mild diarrhea in a breastfed infant. Be sure to tell your health care provider that you are breastfeeding so that you receive the medication that is best for you and your baby. Watch your baby for side effects while you are taking any medication. If your baby develops a rash, hives, or if you notice anything else unusual, tell your health care provider right away.

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Insect Repellant

Use of insect repellant is an important way to help protect you from infections spread by mosquitoes. A bite from an infected mosquito could give you a serious illness such as that caused by West Nile virus. The most common active ingredient in insect repellant is DEET (N,N-diethyl-m- diethyltoluamide). It is not known whether DEET that you put on your skin passes into breast milk. Fortunately, only about only 6-8% of the DEET that you put on your skin is absorbed into your blood. This probably means that very little of the DEET would get into breast milk. However, it is still best to limit the amount of DEET you are exposed to while breastfeeding. You can do this by applying DEET to your clothing and then only putting it on exposed skin (such as your hands and face) in small amounts. Never apply DEET to the breast area. Always remember to wash your hands after applying DEET and before handling your baby or breastfeeding so that the baby is not exposed to DEET. Other ways to lower the risk of being bitten by a mosquito include staying indoors during peak times of mosquito activity (usually at dawn and dusk) and wearing protective clothing (such as long pants and long-sleeved shirts) that cover most of your body.

Cleaning Agents

Whether cleaning agents, such as detergents, bleach, or ammonia, pass into breast milk has not been well studied. Fortunately, typical use of cleaning agents does not result in large amounts of these products in the blood, and is not expected to produce levels in breast milk that could hurt a baby. Other ways to protect yourself from exposure to cleaning products include wearing gloves when you use them and airing out the work area so that you do not breathe in their fumes.

Pollutants

If you think you may have been exposed to a harmful chemical or lead, you should contact a health care provider as soon as possible. If you have been exposed to lead, a blood test can tell whether the level is high. The level of lead in breast milk is similar to that in a mother's blood. However, a mother should not stop breastfeeding unless the level of lead in her blood is very high. Exposure to low levels of other environmental chemicals also usually is not a reason to stop breastfeeding.

How can I keep my breast milk as safe as possible?

Because many substances enter breast milk in very small amounts, they are not likely to harm a breastfed baby. In many instances, the benefits of breastfeeding far outweigh any risk of exposure. However, it is important to be aware of what you are exposed to and consider whether it might affect your breastfed baby. If you notice anything unusual, tell your health care provider right away. This is especially important after a natural disaster, when you could be exposed to things you wouldn't usually be.

What if I need to give my baby formula?

In most instances, it is fine to continue breastfeeding when a natural disaster occurs. However, if you must give your baby formula, it is best to use single serving containers of ready-to-feed formula whenever possible. This is especially important

if the water supply is not clean or safe to drink or if the electricity is off, since you don't need to add water to ready-to-feed formula or keep it in a refrigerator. Local authorities will tell you if your water supply is safe to drink or to use for cooking or bathing. If ready-to-feed formula is not available, use bottled water to mix powdered or concentrated formula. If bottled water is not available, use boiled water. Bringing water to a rolling boil for 1 minute will kill most organisms, although it will not remove chemicals. If you prepare formula with boiled water, be sure to let it cool before giving it to your baby. Do not use water that has been treated with iodine or chlorine tablets to prepare formula unless you do not have bottled or boiled water. Be sure to clean the bottles and nipples thoroughly with bottled, boiled, or treated water before every use. Always wash your hands before preparing formula and before feeding your baby. If you do not have clean water for washing hands, use an alcohol-based hand sanitizer.

Where can I find more information on specific exposures to infants through breast milk?

The International Lactation Consultant Association maintains a 'Find a Lactation Consultant' directory of individual lactation consultants who can help with breastfeeding concerns such as reduced milk supply (website: www.ilca.org). La Leche League International provides information about breastfeeding to women affected by natural disasters (website: www.laleche.org; phone: 800-525-3243). The March of Dimes has a fact sheet on health issues during hurricane recovery that includes information on pregnancy and breastfeeding (website: www.marchofdimes.com). OTIS has additional fact sheets on other exposures that include information on breastfeeding.

To Learn More About:

Exposures during pregnancy or breastfeeding,
call the Organization of Teratology Information Specialists at
866-626-6847

or visit them online at www.OTISpregnancy.org.

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