Lactation During Covid 19

Presentation to the Work Group on Maternity, Postpartum & Well-baby Care During COVID-19

The Women & Children's Health Subcommittee Of The Council on Medical Assistance Program Oversight

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Agenda

1. CDC Recommendations

2. WHO Recommendations

2. Practical Application of Recommendations

3. Informed Decisions, Shared Decision Making, Ongoing Support
CDC Interim Guidance

• Breast milk is the best source of nutrition for most infants. We do not know whether mothers with COVID-19 can transmit the virus via breast milk, but the limited data available suggest this is not likely to be a source of transmission.

• Whether and how to start or continue breastfeeding should be determined by the mother in coordination with her family and healthcare providers.

• A mother with confirmed COVID-19 should be counseled to take all possible precautions to avoid spreading the virus to her infant, including hand hygiene and wearing a cloth face covering.

• Mothers should be educated about recommendations on how to properly clean and sanitize breast pumps. If possible, expressed breast milk should be fed to the infant by a healthy caregiver, who is not at high-risk for severe illness from COVID-19.

• Currently, there is a lack of evidence to support precautions such as cleansing the breast prior to breastfeeding or milk expression, or disinfecting external surfaces of milk collection devices (e.g., bottles, milk bags), as steps to reduce potential transmission of SARS-CoV-2.
CDC Interim Guidance

• An infant being breastfed by a mother who is confirmed to have COVID-19 should be considered as having suspected COVID-19 for the purposes of infection control and prevention for the duration of the mother’s recommended period of **home isolation** and 14 days thereafter.

• The same approach should be taken with respect to an infant who has any other ongoing, close contact with another person who has confirmed COVID-19. Mothers should be counseled to inform their child’s healthcare provider that their child has had high-risk contact with a person confirmed to have COVID-19.

• Healthcare providers are encouraged to prioritize newborn care and vaccination of infants and young children (through 24 months of age) when possible. Given the potential challenges related to breastfeeding in the context of COVID-19, the need for weight checks and visual or laboratory assessment for jaundice, and the stressors of social distancing, every effort should be made to conduct newborn follow-up visits in person.
CDC Interim Guidance

- Alternative approaches, such as telemedicine, may be considered when providing lactation support services to breastfeeding dyads.

- Lactation service providers who must see a mother or infant with suspected or confirmed COVID-19 should follow recommended infection prevention and control measures, including the use of recommended personal protective equipment (PPE).

- If no PPE is available, then lactation service providers should carefully consider if alternative approaches will reduce the risk of exposure for the lactation service provider and are safe for care of the breastfeeding dyad.
World Health Organization Guidance

• The COVID-19 virus has not, to date, been detected in the breastmilk of any mother confirmed/suspected to have COVID-19.

• It is unlikely that the virus can be transmitted by giving breastmilk that has been expressed by a mother with confirmed/suspected COVID-19.

• Confirmation of COVID-19 means that a mother should implement appropriate recommended hygiene practices for the period that she is likely to be infective i.e. while symptomatic or through the 14 days after the start of symptoms, whichever is longer.
World Health Organization Guidance

Mothers with confirmed of suspected Covid 19:

• Wash hands frequently with soap and water or use alcohol-based hand rub, especially before touching the baby

• Wear a medical mask while feeding. It is important to:
  Replace masks as soon as they become damp, Dispose of masks immediately, Not re-use a mask, Not touch the front of the mask but untie it from behind

• Sneeze or cough into a tissue, immediately dispose of it and use alcohol-based hand rub or wash hands again with soap and clean water

• Regularly clean and disinfect surfaces
World Health Organization Guidance

• Breastfeeding and skin-to-skin contact significantly reduce the risk of death in newborns and young infants and provide immediate and lifelong health and development advantages.

• The numerous benefits of breastfeeding substantially outweigh the potential risks of transmission and illness associated with COVID-19.

• WHO’s recommendations on mother/infant contact and breastfeeding are based on a full consideration not only of the risks of infection of the infant with COVID-19, but also the risks of serious morbidity and mortality associated with not breastfeeding or the inappropriate use of infant formula milks as well as the protective effects of skin-to-skin contact and breastfeeding.

• Recommendations of other organizations may focus only on the prevention of COVID-19 transmission without full consideration of the importance of skin-to-skin contact and breastfeeding.
Practical Application of Guidelines

• What are the logistics of separating mother and baby in the hospital setting?

• Can you be assured that a “healthy” family member of a Covid 19 positive mother is virus free?

• What happens when a mother goes home with her baby? Can you control that? What about mothers going home alone without support?

• Does the risk of not breastfeeding and not having early skin to skin contact outweigh the benefits?

• Are you comfortable providing guidance to mothers around hand hygiene and use of masks if she decides to breastfeed and the appropriate use of pumps if she decides to pump?
Shared Decision Making

• Education

• Discussion with woman and her support persons

• Ensure she has ongoing lactation support
Resources


https://www.cdc.gov/healthywater/hygiene/healthychildcare/infantfeeding/breastpump.html


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