

General Recommendations for Breast-Feeding Mothers

In general, nursing mothers produce breast milk of excellent quality. However, the amount of milk each woman produces may vary. Your physical well being, your diet, and how much rest you get can affect your milk supply. But, the most important influences on milk production are how often you feed your baby (or pump your breasts) and how effectively milk is removed from your breasts.

Many women have questions about how they will need to change their lifestyles while nursing. They fear that they may be restricted in many ways. In fact, the vast majority of women can comply with these recommendations for successful breast-feeding:

- 1. Follow the same guidelines for healthy eating recommended to you during your pregnancy.** Eat a variety of foods at regular mealtimes and keep nutritious snacks on hand if you are hungry between meals. Eat more fresh fruits, vegetables, whole-grain breads and cereals, dairy products, and protein-rich meats, fish, poultry, and legumes.
- 2. Drink plenty of liquids each day.** Your body needs extra water to produce breast milk. Pour yourself a glass of water each time you sit down to nurse. If you feel thirsty, make sure you drink more.
- 3. In general, you can eat any foods.** Although breast-fed babies are not allergic to their mother's milk, they can have reactions to substances that appear in the milk from the mother's diet. If your baby is bothered by something you ate, your baby may have a reaction such as excessive crying, stuffy or runny nose, vomiting, diarrhea, cough, or rash on the cheeks or around the bottom.

If a particular food or beverage seems to upset your baby, avoid that substance for a week and then try it again to see if it truly affects your baby. The most common foods in a mother's diet that cause allergic symptoms in nursing infants are cow's milk and other dairy products, peanuts, corn, wheat, eggs, fish, soy, citrus fruits, and tomatoes.

If you think your baby is having a reaction to certain foods you eat, talk to a doctor or dietitian before you eliminate a major food group (such as dairy products or wheat products) from your diet. They can suggest substitute foods that will give you the essential nutrients provided by the foods that bother your baby.

- 4. Continue taking your daily prenatal vitamins.** Remember, however, that vitamin and mineral supplements do not take the place of food. It is better to get your nutrients from a well-balanced diet than to rely on a vitamin and mineral supplement. A nursing mother can take a multivitamin tablet daily if she is not following a well-balanced diet. She especially needs 400 units of vitamin D and 1200 mg of both calcium and phosphorus per day. A quart of milk (or its equivalent in cheese or yogurt) can also meet this requirement.
- 5. Don't drink more than 2 cups of coffee, tea, cola, or other caffeine-containing beverages a day.** Caffeine passes into your breast milk and can make your baby irritable.

6. It is best to abstain from alcohol while you are breast-feeding, just as you did during your pregnancy. Alcohol is readily passed into human milk. Any heavy drinking or daily drinking of even small quantities of alcoholic beverages could hurt your baby. If you have a hospitalized premature or ill newborn, DO NOT drink ANY alcohol. An occasional beer or glass of wine is probably OK, but you should not have more than 1 or 2 a week.

7. Do not smoke. Smoking can decrease your milk supply. Also, the breakdown products from nicotine can pass to your baby in your milk. If you cannot stop smoking altogether, try to cut down. If you must smoke, do it shortly after nursing your baby. Above all, do not smoke in the same room as your baby or even in the house. Breathing your exhaled smoke can hurt your baby.

8. If you need to take any medicines, including nonprescription drugs, check with your health care provider or pharmacist. You need to make sure that the drug is safe for nursing babies. Almost any drug a breast-feeding mother consumes will be transferred in small amounts to her breast milk. Therefore, try to avoid any drug that is not essential, just as you did during pregnancy.

Some commonly used drugs that are safe for you to take while nursing are acetaminophen, ibuprofen, penicillins, erythromycin, cephalosporins, stool softeners, antihistamines, decongestants, cough drops, nosedrops, eyedrops, and skin creams. Aspirin and sulfa drugs can be taken if your baby is more than 2 weeks old AND not jaundiced. Consult your physician about all other drugs. Take drugs that are not harmful immediately after you breast-feed your child so that the level of drugs in the breast milk at the time of the next feeding is low.

Some of the dangerous drugs that can harm your baby are tetracyclines, chloramphenicol, antithyroid drugs, anticancer drugs, or any radioactive substance. Women who must take these drugs should not be breast-feeding or should request a safer form of treatment. Another group of drugs that should be avoided because they can suppress milk production are ergotamines (for migraine), birth control pills with a high estrogen content (most birth control pills are OK), and vitamin B6 (pyridoxine) in large doses.

9. Never use illegal or street drugs while you are nursing. Drug abuse by nursing mothers can be highly dangerous to breast-fed babies.

10. Check with your doctor before you start a program to lose weight. Your body uses the fat stored during pregnancy to make breast milk. This is the reason most breast-feeding mothers can expect to lose several pounds each month. However, a strict weight-reduction diet can decrease your milk supply. Attempts to lose weight should be carefully supervised by your doctor while you are breast-feeding.

Call Your Child's Physician within 24 Hours If:

- Your baby doesn't seem to be gaining adequately.
- Your baby has less than six wet diapers per day.
- During the first month, your baby has less than 3 bowel movements per day.
- You suspect your baby has a food allergy.
- You need to take a medication that is not mentioned in this discussion.
- Your breasts do not become full (engorged) before feedings by the time your baby is 5 days old.
- You have painful engorgement or sore nipples that do not respond to the recommended treatment.
- You have a fever (also call your obstetrician).