



ILCA

A WORLDWIDE NETWORK OF LACTATION PROFESSIONALS

Tips for Health Care Providers: Supporting Breastfeeding Families during Flu Season

Why Breastfeeding is Important During Flu Season

Breastfeeding is well established as a crucial way to fight disease and infections in infants, while also providing important health benefits to mothers. Medical authorities recommend exclusive breastfeeding (with no other foods or drinks except required medications) for the first 6 months. Breastfeeding is especially important for infants during flu season, when there are more reported cases of influenza and complications such as diarrhea, pneumonia, and other respiratory problems. Exclusive breastfeeding has been found to dramatically reduce the risk of respiratory problems, including viral infections, and gastrointestinal problems such as diarrhea.

Infection Control

Standard Precautions

- **Vaccinations.** Encourage pregnant and breastfeeding women to become immunized with the influenza vaccines. During 2009, both the seasonal and H1N1 influenza vaccines should be strongly encouraged among mothers and other adults who are or will be caring for infants.
- **Hand Washing.** Maternity care staff, patients, and visitors should be advised to wash hands frequently with soap and warm water or alcohol-based hand rubs, especially before handling infants.
- **Good Hygiene.** Since flu viruses spread easily through talking, coughing, and sneezing, adults should practice good health habits such as covering their mouth and nose with a tissue when coughing or sneezing, using disposable tissues that can be discarded after use, and avoiding touching their mouth and nose with their fingers.
- **Rooming-In.** Keep mothers and babies together during the postpartum period to help reduce the risk of transmitting viruses and germs among infants. This includes performing routine exams and procedures, when possible, in the mother's room.

- **Pacifier Use.** Pacifiers cannot be adequately sterilized from viruses, and should be avoided for routine use unless medically indicated. Pacifiers have also been found to be detrimental to the establishment of exclusive breastfeeding in the early weeks.
- **Environmental Cleaning.** Rooms and other settings where infectious patients have been should be thoroughly cleaned.

Managing Visitors

- Limit the number of visitors in birthing and postpartum areas to minimize potential influenza transmission.
- Family members and visitors who have flu symptoms should avoid close contact (arms length) with the mother and baby until they are no longer contagious.
- Family members and visitors with flu symptoms can be instructed on the proper use of a surgical mask to wear when near the baby.

When Mothers are Ill

- Mothers who are ill with the flu should be referred to their physician for treatment. Antiviral therapies are most effective when begun within 48 hours of the onset of symptoms, and are safe to use while breastfeeding.
- Mothers who are ill should be encouraged to continue breastfeeding, including during the immediate postpartum period, to provide important immunity protection to their baby. Mothers and babies should be kept together since the benefits of remaining together outweigh the potential risks of separation, according to current guidance from the U.S. Centers for Disease Control and the World Health Organization.

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- If a mother is NOT able to directly breastfeed her baby for any reason, she should be provided a hospital-grade electric breast pump so her antibody-rich colostrum can be removed and provided to their baby. Removing milk will also help with the important early establishment of milk production.
- Mothers who are ill with the flu can be given a surgical mask to wear when near the baby to minimize airborne transfer of germs, as long as the mask is tolerable and mothers are given instructions for proper use of the mask.
- Mothers should sleep at arms-length (around 1 meter) from their baby when they are ill.
- Encourage mothers to practice good hygiene practices.
- Other healthy adults can be asked to assist in other care needs of the infant if the mother is not feeling well. This can include bathing, diapering, and burping the baby.

Breastfeeding Support

During flu season and any season of the year, health care professionals can promote, protect, and support breastfeeding by following UNICEF's "Ten Steps to Successful Breastfeeding" (available at <http://www.unicef.org/newline/tensteps.htm>), which is endorsed by the American Academy of Pediatrics. Health care professionals can also give families information on:

- The importance of breastfeeding for both infant and maternal health, including how human antibodies can help infants prevent influenza illness or lessen its severity.
- Strategies to get breastfeeding off to a good start, including:
 - Early skin-to-skin contact in the first hour after birth
 - Frequent breastfeeding 8 to 12 times every 24 hours
 - Rooming-in with baby to observe for feeding cues and to keep baby away from other germs
 - Avoiding formula supplements unless medically necessary. Even one feeding of infant formula alters the infant's gut flora and increases the likelihood of exposure to germs and bacteria.
- How to access an International Board Certified Lactation Consultant should mothers have questions or concerns about breastfeeding.

How an IBCLC Helps

An International Board Certified Lactation Consultant (IBCLC) is a credentialed health care professional with the expertise and skills to support breastfeeding mothers and babies. Lactation consultants can assist mothers with getting breastfeeding off to a good start, establishing milk production, overcoming concerns, and using a breast pump, if needed.

To find an IBCLC check the "Find a Lactation Consultant Directory" at www.ilca.org, or contact:

Helpful Resources

Agency for Healthcare Research and Quality. 2007. Breastfeeding: Maternal and Infant Health Outcomes in Developed Countries. Washington, D.C.: U.S. Department of Health and Human Services. Available online at: www.ahrq.gov.

Centers for Disease Control. 2009. Pregnant Women and Novel Influenza A (H1N1) Virus: Considerations for Clinicians. Atlanta, GA: Centers for Disease Control and Prevention. Available online at: www.cdc.gov/h1n1flu/clinician_pregnant.htm

New South Wales Department of Health. 2009. Maternity – Influenza Guidelines for Maternity Services. Sydney, NSW. Available online at: www.health.nsw.gov.au/policies/gl/2009/pdf/GL2009_015.pdf

World Health Organization. 2009. Infection prevention and control in health care for confirmed or suspected cases of pandemic (H1N1) 2009 and influenza-like illnesses. Available online at: http://www.who.int/csr/resources/publications/SwineInfluenza_infectioncontrol.pdf

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