

# Should You Breastfeed if You Have the Coronavirus?

Here's how to navigate the emerging guidance on breastfeeding in a pandemic.



By Christina Caron

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*As coronavirus continues to spread across the globe, we're working to answer the questions on many parents' minds. This is a fast-moving situation, so some information may be outdated. For the latest updates, read The New York Times's live coronavirus coverage here.*

If you have a newborn and have tested positive for the coronavirus or if you are breastfeeding an infant and worried about getting infected, you may be feeling a bit overwhelmed and confused by the conflicting guidance about how to best deliver breast milk to your baby.

Should it be from a bottle, using pumped breast milk? Or should it be directly from the breast? Should a mother be separated from her baby? And if so, for how long?

Currently, the advice differs depending on which organization you consult.

The latest set of recommendations, published on April 2 by the American Academy of Pediatrics, advises temporarily separating infected mothers from their babies and pumping breast milk (rather than feeding from the breast) until the mother is no longer infectious, to protect a newborn from getting the coronavirus.

In an interview on April 3, Dr. Mark Hudak, M.D., a co-author of the guidelines and the chair of the A.A.P. section on neonatal and perinatal medicine, called the new guidelines the “safest, most conservative recommendation made out of an abundance of caution — until we know what we're really dealing with.”

The A.A.P. guidelines differ markedly from those of the World Health Organization, the Academy of Breastfeeding Medicine and the Centers for Disease Control and Prevention, none of which promote separation over direct breastfeeding or sharing a room with a baby.

Clearly, health experts have not yet reached a consensus. Here's a look at all of the latest guidance on breastfeeding in the age of coronavirus, but keep in mind that guidelines may change rapidly as we continue to learn more about Covid-19.

## If I test positive for the virus, should I stay in the same room as my newborn and breastfeed?

Ultimately, it is your choice. Health experts advise women to speak with their ob-gyn and their baby's pediatrician well in advance of delivery to best understand the different options and learn what we know so far about coronavirus.

The W.H.O. clearly says that infected mothers can stay in the same room and breastfeed with proper hygiene precautions like wearing a mask while your baby is feeding and washing your hands before and after touching the baby. If a mother is too sick to care for her newborn, she should be supported to provide breast milk in another way, the W.H.O. adds. Guidance published on April 3 by the Italian Society of Neonatology echoes that advice.

The A.A.P., as mentioned earlier, takes a different stance. It advises infected mothers to temporarily separate from their newborns and either pump or manually express their breast milk. If a mother wishes to ignore that recommendation and stay in the same room with her baby and breastfeed, the A.A.P. offers additional guidelines for keeping your baby as safe as possible.

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The C.D.C. stops short of saying infected mothers ought to be separated from newborns, but adds that hospitals “should consider” temporarily separating mothers and babies into different rooms if a mother is infected with the coronavirus or suspected of having the infection. The agency also says that if infected mothers are symptomatic, they can consider having someone who is well feed expressed breast milk to the infant.

Dr. Melissa Bartick, M.D., an assistant professor of medicine at Harvard Medical School and a breastfeeding expert, said on April 3 that the decision to breastfeed was up to the mother after a discussion of the risks and benefits.

“There is insufficient evidence to support their recommendations to separate infants from their infected mothers at birth and give only expressed milk,” she said, referring to the new A.A.P. guidelines. “Breastfeeding is a key public health strategy for infant health during this pandemic.”

Studies have shown that skin-to-skin contact with your newborn can promote mother-infant bonding and increase the amount and duration of breastfeeding.

But for mothers with the coronavirus, these benefits have to be weighed against the potential risk of infecting a newborn, Dr. Hudak said. A study in the journal *Pediatrics* suggested that infants under 1 year of age in China were at risk for severe cases of Covid-19, although this was a relatively rare outcome.

“There is data out of China that demonstrate a very low number of newborn babies have positive tests for Covid-19,” Dr. Hudak said. “Those data really don’t help us a great deal because in China the standard procedure was usually to deliver the mothers by scheduled C-section and then immediately remove the baby from the mother and isolate the baby for 14 days.”

## If I’m temporarily separated from my baby, will that make it more difficult to breastfeed later?

Being temporarily separated from your newborn should not prevent you from breastfeeding when you are well again if you’re given the support you need to express milk, said Dr. Lori Feldman-Winter, M.D., chairwoman of the A.A.P. section on breastfeeding and a pediatrician at Cooper University Health Care in Camden, N.J.

In the first hour after delivery, even if it’s a surgical delivery, use your hands to massage your breasts, gently squeezing the forefinger and thumb in a rhythmic way to trigger milk ejection, Dr. Feldman-Winter suggested.

“If that happens right in the first couple of hours after delivery, it’s almost magical,” she said.

When milk is drawn out that early, it’s much easier to keep the milk flowing and to produce as much milk as the baby needs, even if you are separated from your baby for a week or two, she added.

Later, when you’re no longer infected, hold your baby skin-to-skin and use your hands to express a little bit of milk. The baby “will smell that and tend to root themselves over,” Dr. Feldman-Winter said.

It might take a little bit of patience, she added, but the baby will eventually find its way to the milk.

“That’s something we often do with former NICU babies,” she said.

## Can the coronavirus be transmitted to an infant via breast milk?

So far, the virus has not been detected in breast milk, but we don’t know for sure if the virus can be transmitted this way.

Researchers at the University of California, San Diego are currently gathering milk samples from infected mothers and creating a special test to determine how much of the virus — if any — is present in breast milk.

“Based on everything we’ve seen so far, I would think that the chances that the virus is in milk at a high load are probably very slim,” said Lars Bode, Ph.D., the director of the Mother-Milk-Infant Center of Research Excellence at U.C. San Diego. “But we want to rule out that that’s actually not the case.”

Those wishing to participate in the study can learn more at the website [Mommy’s Milk](#), Dr. Bode said.

If you are pumping your milk instead of breastfeeding, wash your hands before touching any pump or bottle parts and make sure to clean the pump parts thoroughly by following the C.D.C.’s recommendations for proper pump cleaning.

## How do I receive help with breastfeeding when everyone is practicing social distancing?

Getting lactation help at home during the coronavirus pandemic is challenging, given that everyone is expected to maintain at least six feet of distance from one another.

“We feel for you, and we are trying our best,” said Freda Rosenfeld, a certified lactation consultant in Brooklyn with 30 years of experience.

Rosenfeld advises women against doing any in-person home visits with lactation consultants and said women ought to use Skype or a similar type of video platform when receiving guidance.

“It’s not perfect, but at least it’s a tool in this difficult time,” she said.

Providing guidance over video makes it more difficult for a lactation consultant to do her job, Rosenfeld acknowledged, because she cannot physically touch the mother or infant, nor can she weigh the baby.

“Not being able to do that is exceedingly painful for me,” she added.

In addition to using video, Rosenfeld is advising mothers to buy inexpensive scales online, if they can. These scales will not offer the same accuracy as the type of scale that lactation consultants typically use. But if they are used to weigh the baby every two or three days, and the baby is eating enough, parents should see an increase in the baby’s weight, Rosenfeld said.

## Can breast milk protect infants from Covid-19?

Based on what we know about other viruses like the common cold, there is every reason to believe researchers will find antibodies to Covid-19 in the breast milk of women who have been infected by the coronavirus, said Christina Chambers, Ph.D., co-director of the Center for Better Beginnings at U.C. San Diego and the program director of the Mommy’s Milk Human Milk Research Biorepository.

But we don’t yet know for sure.

“If a mom is infected, the hope is that she is producing antibodies to Covid-19 that are present in her breast milk,” which “could be a tremendous benefit to the child,” Dr. Chambers said.

Regardless of how the breast milk is delivered, health experts agree that it’s important to give a newborn as much breast milk as possible right now.

Don’t worry if you can’t breastfeed exclusively and have to supplement with formula. Your baby will still receive important immunological and nutritional benefits from whatever breast milk you are able to provide, the experts said.

“We recommend exclusive breastfeeding but the next best thing to that is partial breastfeeding,” Dr. Feldman-Winter said.

## Is it OK to feed a newborn donor milk during this pandemic?

At this time, donor milk is still considered safe because it is pasteurized, said Lindsay Groff, the executive director of the Human Milk Banking Association of North America. In a statement, the milk banking association said research was underway to prove that Covid-19 is eradicated by Holder pasteurization, the heat processing method used by H.M.B.A.N.A.-accredited nonprofit milk banks.

“In the meantime, it is known that all past coronaviruses were heat sensitive and destroyed by this pasteurization process,” the statement said.

Dr. Lisa Stellwagen, M.D., a clinical professor and a pediatrician who sees newborns at U.C. San Diego Health, is starting a new nonprofit milk bank in California (currently the state only has one nonprofit milk bank). She encouraged women to donate breast milk if they could. It’s especially important for medically fragile infants.

“Supply chains may be interrupted and there are still going to be preemies who need to be fed,” she said.

If you wish to donate, contact your local milk bank or the H.M.B.A.N.A. to find out more.

## I’m thinking about weaning my infant or toddler — is now the right time?

If breastfeeding is going well, you may want to hold off on any plans to wean during the pandemic, experts said.

“If you’re able to continue to breastfeed right now, to keep your baby healthy to prevent those ear infections, to prevent the other infections circulating, and keep you and your child out of the doctor’s office and hospital environment, that’s really important,” Dr. Stellwagen said.

Dr. Feldman-Winter agreed, not only because of the immunologic protective factors, but because of the nutritional and emotional benefits, too.

“Whatever we can do to support continued breastfeeding we should,” she said. “It’s just a good feeling that during this time of stress that you’re doing something so important for your baby, and for you.”

That being said, every woman should make the decision that’s best for her and her family. If breastfeeding is not going well, or you have other concerns about continuing to breastfeed, it may not make sense to continue.

“It’s such an individual decision,” Dr. Stellwagen said.

**The Coronavirus Outbreak >**

## Frequently Asked Questions and Advice

Updated April 11, 2020

- **When will this end?**

This is a difficult question, because a lot depends on how well the virus is contained. A better question might be: “How will we know when to reopen the country?” In an American Enterprise Institute report, Scott Gottlieb, Caitlin Rivers, Mark B. McClellan, Lauren Silvis and Crystal Watson staked out four goal posts for recovery: Hospitals in the state must be able to safely treat all patients requiring hospitalization, without resorting to crisis standards of care; the state needs to be able to at least test everyone who has symptoms; the state is able to conduct monitoring of confirmed cases and contacts; and there must be a sustained reduction in cases for at least 14 days.

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