

Infant Feeding during COVID-19 Pandemic some FAQs

Can women with Covid-19 breastfeed?

Yes. There is a wealth of evidence that breastfeeding reduces the risk of babies developing infectious diseases. There are numerous live constituents in human milk, including immunoglobulins, antiviral factors, cytokines and leucocytes that help to destroy harmful pathogens and boost the baby's immune system. There is currently no evidence that Covid-19 can be passed to the baby through breastfeeding. Considering the protection that human milk and breastfeeding offers the baby and the minimal role it plays in the transmission of other respiratory viruses, it seems sensible to do all we can to continue to promote, protect and support breastfeeding. To facilitate breastfeeding, mothers and babies should be enabled to stay together as much as possible, to have skin-to-skin contact, to feed their baby responsively and to have access to ongoing support when this is needed.

Can parents touch and hold their newborn baby if they have Covid-19?

Yes, touch, comfort and communication are vital for the baby's wellbeing and development. Good hygiene habits are important and will keep the risks to baby as low as possible

What practical information do parents need if they have Covid-19 and are caring for their baby?

If parents/carers are infected, take precautions to limit the spread of Covid-19 to the baby by:

- Washing hands thoroughly before and after contact with the baby
- Routinely cleaning and disinfecting any surfaces touched
- Cleaning any infant feeding equipment, including breast pumps, thoroughly before and after use
- Practicing respiratory hygiene, including during feeding, for example by avoiding coughing or sneezing on the baby and by wearing a face mask or suitable alternative if available
- If a breastfeeding mother is feeling unwell, continuing breastfeeding rather than expressing may be easier and less stressful during this time. Alternatively, she may prefer for someone who is well to feed expressed breastmilk to the baby.
- If a baby is being bottle fed with formula or expressed milk, wash equipment in hot, soapy water and sterilise carefully before each use
- If the mother is too unwell to breastfeed or express breastmilk, she may be [supported to](#) once well enough.

What can a mother do if she has Covid-19 but is too unwell to breastfeed?

This mother should be supported to safely provide her baby with breastmilk in a way that is possible, available and acceptable to her. Consider breastmilk expression by hand/pump and give via a suitable alternative method (see responsive and paced bottle feeding). Maximising breastmilk is important during this time. When the mother is feeling better, encourage skin-to-skin contact and return to full breastfeeding where possible.

Should mothers and babies be separated during the Covid-19 outbreak?

Whether or not the mother or her baby has suspected, probable or confirmed Covid-19, she should be enabled to remain with her baby, practice skin-to-skin contact and room-in throughout the day and night, especially after birth and during the establishment of breastfeeding. See [WHO guidance](#)

Can mothers still express breastmilk for a baby on the neonatal unit?

Yes. Breastmilk is essential for sick and preterm babies as it significantly reduces the risk of serious complications both in the short and long term. Mother's own milk should always be the first choice as this is responsive to her and her baby's environment (particularly important during Covid-19). Mother should be supported to express as soon as possible after birth (ideally within 2 hours) and thereafter at least 8-10 times in 24 hours, including at night.

Can mothers who have suspected or confirmed Covid-19 still provide expressed breastmilk for their baby on the neonatal unit?

The importance of breastmilk and breastfeeding for all babies during the crisis has been confirmed by [WHO](#) and [PHE](#). Therefore, [supporting breastfeeding](#) through this crisis and in particular [on neonatal units](#) remains very important. However, because the number of Covid-19 positive mothers with a baby on the neonatal unit has been very small thus far, there is very little evidence to guide practice. We recognise that this is a very difficult situation. Neonatal units can be very short of space, with numerous people caring for babies in close proximity to each other. A mother with suspected or confirmed Covid-19 will be contagious during her illness, meaning that the risk to babies, parents and staff is significant within the neonatal environment. She will therefore be asked to stay at home during her illness. A sensible approach to protect breastfeeding while ensuring safety seems to be to support the mother to maintain her milk supply through expressing, with her milk given to her baby if at all possible. If that is not possible, donor milk would be the second choice. It is also likely that the mother will have some stores of her own milk that can be used if her baby has been on the unit for a while. This situation is a reminder of the importance of supporting early and effective expressing to build up the milk supply. Once the mother is no longer contagious, it is very important that she be reunited with her baby and supported to express, breastfeed and continue building their relationship.

It is worth noting that these recommendations apply only to mothers who are suspected or confirmed Covid-19 positive, at present this applies to a very small number of mothers. It does not apply to the majority of mothers with a baby on the neonatal unit.

Useful links

You can also find more information at:

- [BAPM Perinatal Covid-19 Resources](#)
- [BAPM / BLISS Family Integrated Care for Covid-19 – Frequently Asked Questions](#)
- [Hearts Milk Bank](#)
- [Public Health England – Guidance for households](#)
- [Public Health England – Stay Home, Save Lives](#)
- [Royal College of Obstetricians and Gynaecologists](#)
- [Royal College of Paediatric and Child Health](#)
- [Start4Life](#)
- [UKAMB](#)
- [Unicef Infant & Young Child Feeding in the Context of Covid-19](#)
- [WHO Clinical management of severe acute respiratory infection when Covid-19 is suspected](#)
- [WHO Q](#)