

UNICEF UK BABY FRIENDLY INITIATIVE

STATEMENT ON INFANT FEEDING ON NEONATAL UNITS DURING THE CORONAVIRUS (COVID-19) OUTBREAK



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The Unicef UK Baby Friendly Initiative has received a number of queries regarding best practice for infant feeding on neonatal units during the Covid-19 outbreak. We suggest that all practitioners follow latest updates from the [Royal College of Paediatrics and Child Health](#) and the [World Health Organization \(WHO\)](#) (see Clinical management of severe acute respiratory infection, currently page 13). Note: these documents could change as more information becomes available.

Use of breastmilk and breastfeeding

There is a wealth of evidence that breastmilk and breastfeeding reduces the risk of babies developing infectious diseases. There are numerous live constituents in breastmilk, including immunoglobulins, antiviral factors, cytokines and leucocytes that help to destroy harmful pathogens and boost the baby's immune system. Babies born sick and / or preterm are vulnerable and breastmilk can help to protect them from harmful diseases such as respiratory infections and necrotising enterocolitis. In addition, breastmilk 'primes' the immature baby's gut, helping it to mature and develop. There is no evidence at this time that Covid-19 can be passed through breastmilk. Therefore, considering the protection that breastmilk and breastfeeding provide and the minimal role they play in the transmission of respiratory viruses, it seems sensible to do all we can to continue to promote, protect and support breastfeeding for all sick and preterm babies either in transitional or neonatal care.

To facilitate expressing and breastfeeding, mothers and babies should be enabled to stay together as much as possible, to have skin-to-skin contact, to have regular skilled assessments of and support with expressing, to feed responsively when possible and to have access to ongoing support when this is needed.

When babies are receiving milk, mothers should be encouraged to maximise the amount of breastmilk they are able to provide. When babies can breastfeed, mothers should be encouraged to give as many feeds as possible. If mothers are considering stopping expressing or breastfeeding, it is worth having a sensitive conversation about the value of continuing during the Covid-19 outbreak.

Supporting close and loving relationships

Regardless of feeding method, it is essential that sick and preterm babies' profound need for emotional attachment with their parents / primary caregiver continues to be considered. Keeping mothers and babies together wherever possible and responding to the baby's need for love and comfort will not only enable breastmilk / breastfeeding, but will also protect the baby's short- and long-term health, wellbeing and development. In addition, this will support the mother's mental wellbeing in the postnatal period.

Practical considerations

At present, there is no evidence that Covid-19 is transmitted through breastmilk. Infection can be spread to the baby in the same way as to anyone else. Everyone should be encouraged to:

- Wash their hands before touching the baby, breast pump or bottles
- Clean the breast pump thoroughly following local infection / Covid-19 control procedures
- Practice respiratory hygiene during cares, including when feeding, for example by avoiding coughing or sneezing on the baby and by wearing a face mask if applicable
- Clean and sterilise all pumping and feeding equipment thoroughly following local infection / Covid-19 control procedures
- Express, label and store breastmilk as per unit guidance
- Transport breastmilk to the neonatal unit in a clean freezer bag and an insulated bag that is thoroughly cleaned between use. If there is infection in the family, follow local trust guidance for Covid-19.
- Advocating for the use of infant formula to facilitate earlier discharge should be discouraged. Support should be provided to encourage mothers to breastfeed or provide breastmilk for as long as possible for the baby's health and wellbeing during the Covid-19 outbreak.

Donor breastmilk

Breastmilk is essential for preterm babies, as it significantly reduces the risk of serious complications related to prematurity 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. However, if mother's own milk is not available, donor human milk is the second choice. Speak to your local breastmilk bank to ensure that screening and pasteurisation processes comply with the [NICE clinical guidelines 93](#) and [European Milk Banking Association Covid-19 guidelines](#).

You can also find more information at:

- [Royal College of Paediatric and Child Health](#)
- [BAPM / BLISS Family Integrated Care for Covid-19 – Frequently Asked Questions](#)
- [BAPM Perinatal Covid-19 Resources](#)
- [Hearts Milk Bank](#)
- [UKAMB](#)

UNICEF UK BABY FRIENDLY INITIATIVE RESOURCES FOR PARENTS

- [Baby Friendly support for parents](#)
- [Breastfeeding resources](#)
- [You and your baby: Supporting love and nurture on the neonatal unit](#)