Covid-19 and Breastfeeding
Global Guidance – who should we trust?

BPNI Webinar 19th June 2020
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IBFAN Global Council
International Baby Food Action Network, founded in 1979 - a people’s network of over 273 groups in over 168 countries working to protect child health and end harmful marketing.

IBFAN’s independence: IBFAN members are not allowed to take funding from the baby food industry. Conflicts of interest is at the heart of the International Code of Marketing of Breastmilk Substitutes and the 19 World Health Assembly Resolutions that have been passed since 1981.
WHO: consistent, updated guidance

• WHO Guidance unequivocally recommends breastfeeding, skin-to-skin including for COVID-19 infected mothers.


• 27th May Clinical Management of COVID-19

• Interim guidance 13 March 2020,

• 26th March Advice for the Africa region
**Can COVID-19 be passed through breastfeeding?**
Transmission of active COVID-19 (virus that can cause infection) through breast milk and breastfeeding has not been detected to date. There is no reason to avoid or stop breastfeeding.

**Following delivery, should a baby still be immediately placed skin-to-skin and breastfed if the mother is confirmed or suspected to have COVID-19?**
Yes. Immediate and continued skin-to-skin care, including kangaroo mother care, improves the temperature control of newborns and is associated with improved survival among newborn babies. Placing the newborn close to the mother also enables early initiation of breastfeeding which also reduces mortality.
The numerous benefits of skin-to-skin contact and breastfeeding substantially outweigh the potential risks of transmission and illness associated with COVID-19.

**Can women with confirmed or suspected COVID-19 breastfeed?**
Yes. Women with confirmed or suspected COVID-19 can breastfeed if they wish to do so. They should: Wash hands frequently with soap and water or use alcohol-based hand rub and especially before touching the baby etc etc.
UNICEF: Guidance on breastfeeding, maternal diet, wasting and funding

- **30th March** *Infant and Young Child programming in the context of COVID-19. Brief 2 V1*. Mothers with suspected or confirmed COVID-19 should follow hygiene advice and “…should be counselled/advised to continue breastfeeding should the infant or young child become sick with suspected, probable, or confirmed COVID-19 or any other illness.” Refers to the Code, donations etc

- **22nd April** *Protecting Maternal Diets and Nutrition Services and Practices in the Context of COVID-19* "Ensure safeguards are in place to avoid conflict of interest from companies marketing breastmilk substitutes and foods for infants and young children and women and ensure that donations or free supplies are prohibited. Prevent commercial exploitation of COVID-19 through unnecessary use of specialized foods and supplements, and spillover to those who do not need them."

- **Unicef UK Guide for local authorities** First Steps Nutrition Trust. UK UNICEF Baby Friendly Initiative (see next slide)
In countries where breastfeeding is not necessarily the norm, it is important to provide consistent messages that promote, protect and support breastfeeding – acknowledging a mother’s right to decide how she feeds her baby.

In the UK, this child-rights-focused Guidance for Local Authorities prepared by UNICEF UK, FSNT and the National Infant Feeding (a network of over 700 infant feeding specialists) covers all aspects of infant feeding including for babies not breastfed. The briefing gives sound advice on financial aspects, food banks, baby foods etc.

It highlights the wealth of evidence showing that breastfeeding reduces the risk of babies developing infectious diseases, its live constituents, immunoglobulins, antiviral factors that boost the baby’s immune system.

UNICEF also tackles exploitation

- 29th April *Response to COVID-19: Guidance Note on Financial Contributions or Contributions in-kind from Food and Beverage companies* Version 2
- This is an **important guidance** in the context of the response to the COVID19 pandemic. Its recommendations forbid many of the tactics that manufacturers of baby foods and ultra-processed foods companies are now using, eg cause-related marketing, contributions in kind, partnership language, co-branding.

- https://www.nutritioncluster.net/Resources_Financial_In-kind_contributions_Food_Beverage_companies
If You Are Pregnant, Breastfeeding, or Caring for Young Children

Protect yourself and your family from COVID-19

Although there are currently no data showing that COVID-19 affects pregnant people differently than others, we do know that pregnant people are at greater risk of getting sick from other respiratory viruses than people who are not pregnant. Sometimes, this causes adverse outcomes for the mother or child. Therefore, if you are pregnant, be mindful about reducing your risk of getting sick. If you are caring for children, you can teach them everyday steps (such as proper handwashing) to help them stay healthy and, in turn, help protect yourself and your family.

Practice social distancing

On This Page:
- Protect yourself and your family from COVID-19
- COVID-19 and pregnancy considerations
- Newborns born to mothers with suspected or confirmed COVID-19
- COVID-19 and Breastfeeding
- COVID-19 and children
- Face shields for newborns and infants
- Cloth face coverings for children, parents, and other caregivers
- Safe sleep for infants during the COVID-19 pandemic
CDC has global influence

“CDC is a unique agency with a unique mission: We work 24/7 to protect the safety, health, and security of America from threats here and around the world. CDC is the Nation’s leading science-based, data-driven, service organization that protects the public’s health”.

Although targeted to the USA, CDC advice is influential globally – in Latin America and, for example, in India. The National Institute for Research (ICMR) uses them in its Guidance for Management of Pregnant Women in COVID-19 Pandemic recommending separation on a case by case basis:

“These recommendations are adapted based on guidelines from international agencies like CDC, ACOG, RCOG, FOGSI and Lancet publications. However, they are simplified and made user friendly for Indian context. This guidance is prepared considering resources in our government health settings.”
• **Temporary separation of the newborn from a mother with suspected or confirmed COVID-19 should be considered to reduce the risk of spreading the virus to the newborn ...** Decisions about temporary separation should be made with respect to the mother’s wishes. *If the mother chooses a temporary separation to reduce risk of spreading the virus and would like to breastfeed, she should express breast milk and have a healthy caregiver who is not at high-risk for severe illness from COVID-19 bottle feed the newborn the expressed breast milk if possible.*

• **If the mother with suspected or confirmed COVID-19 does not choose temporary separation in the hospital, she should take precautions to avoid spreading the virus to the newborn, including washing her hands and wearing a cloth face covering when within 6 feet of her newborn.** *The newborn should be kept ≥6 feet away from the mother, as much as possible, including the use of physical barriers (e.g., placing the newborn in an incubator).*

Evaluation and Management Considerations for Neonates At Risk for COVID-19

Mother/neonatal contact
Although it is well recognized that the ideal setting for care of a healthy term newborn while in the hospital is within the mother’s room, temporary separation of the newborn from a mother with confirmed or suspected COVID-19 should be strongly considered to reduce the risk of transmission to the neonate. Efforts are under way to address the knowledge gap of transmission between mother and neonate during pregnancy, delivery and in the postpartum period, and recommendations will be updated as new information informing the risk-benefit of maternal-infant separation is available.

Temporary separation in the clinical setting can be achieved in many ways, including a separate room, maintaining a physical distance of ≥6 feet between the mother and neonate, and placing the neonate in a temperature-controlled isolette if the neonate remains in the mother’s room. For mothers whose test results are negative, separation precautions may be discontinued.

Although temporary separation of a neonate from a mother with confirmed or suspected COVID-19 should be strongly considered in healthcare settings, it may not always be feasible. For these situations, the risks and benefits of temporary separation of the mother from her baby should be discussed with the mother by the healthcare team, and decisions about temporary separation should be made in accordance with the mother’s wishes.
Can my baby continue breastfeeding or drinking expressed breast milk if I test positive for COVID-19 or if I am a person under investigation?

Yes, babies can still receive breast milk even if you test positive for COVID-19. It is recommended that you pump or express your breast milk after carefully cleaning your breasts and hands and have a healthy caregiver feed your baby the expressed breast milk.

If I have COVID-19, can I stay in the same room with my infant?

If you have COVID-19 or are suspected of having COVID-19, staying in a different room from your baby is the safest way to keep your newborn healthy. A healthy caregiver should take care of the baby and can feed expressed breast milk.

If you and your family decide to keep your baby in the same room as you, keep a distance of at least 6 feet from your baby. When closer than 6 feet, wear a mask and make sure your hands are clean.

If you have COVID-19, you can stop isolating yourself from your baby once you are fever-free without use of fever medicines (acetaminophen or ibuprofen) for at least 72 hours; when your other symptoms of COVID-19 are improving; and when at least 10 days have passed since your symptoms started.

Tip: Ask your paediatrician for help with getting your baby to latch on again once you can restart breastfeeding.
AAP’s baby food industry partners

• **Why Partner with the AAP?**
• **We are trusted.** Recognized by parents, media, politicians and advocates as the authoritative voice on what’s best for children’s health and well-being.
• **We are world renowned and locally active.** ....
• **If your business, trade association, or organization is committed to the health and well-being of children, let’s talk about a partnership opportunity.** To get started, contact Donor Services or call 888-700-5378, Monday-Friday, 8:00 am -4:00 pm Central.

The AAP would also like to thank the following companies for their support of the Friends of Children Fund. Through an annual membership contribution to the Fund, these companies are invited to a Corporate Summit held each summer at the AAP National Headquarters in Itasca, IL.

**President's Circle ($50,000 and above)**

- Abbott Nutrition
- Pampers
- Mead Johnson Nutrition
- Nestle
- MERCK
- sanofi pasteur
- Prolacta Bioscience
- Sobi
Danone uses AAP and CDC in its “expert advice” for Indian mothers

Things to Remember:

- Mother should wear a mask
- Mother should be 6 feet away from the baby
- It is safe to give expressed breast milk to the new born after practising hand and breast hygiene
Indonesia: separating mothers and babies

Giving birth in the pandemic situation makes it even worse

Mother S gave birth to her baby 15 days ago. Baby N was born healthy & weighed 3 kg. It was an emergency cesarean procedure because the obgyn said mother S has a low hemoglobin count even though she was dialed for 7 cm. She did the rapid & swab test in the OR (after she's in the hospital for 12 hours) & she didn't show any sign or symptom of COVID-19. After the baby was born, mother S & baby N was separated for 4 days even though the rapid test shown negative. While in hospital, the baby was formula fed. Mother S called me today (May 19, 2020) for 1 hour & cried because she couldn't latch her baby & she feels like she's failing as a mother.
Exploiting the pandemic in Pakistan

@nestlepakistan has stepped up to help families whose income has been impacted due to #lockdown. Nestle has donated water, juices, Nido, Milk Pack, Lactogrow and Cerelac which will be distributed by PDMA.

وزیراعلی Benjamin Arthur احتمالاً بنیادی کردار کی اورگانیسم بزوئونو کے آیا کا گویا نکتہ کا نو کردار کی

Lactagrow is a breastmilk substitute targeting babies 1-3 (the packshot below is taken from a marketing website.)
Webinars springing up Egypt
Formulas promoted as ‘protection’: Latin America

https://www.youtube.com/watch?v=-We8IEOO8E0&feature=youtu.be

MÉXICO

De cara a COVID-19

Vamos a salir adelante, por lo que más queremos #NestléCuidaDeTi
Bill Gates’ climate-change investment firm bets on lab-produced breast milk

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KEY POINTS

- Biomiqlq is targeting infant nutrition by attempting to reproduce mother’s breast milk in a lab.

- The start-up has just earned the backing of the world’s top investors, by raising $3.5 million in Series A funding from Breakthrough Energy Ventures. Bill Gates’ investment firm focused on climate change.

- The co-founders hope that the breast milk produced by Biomiqlq from culturing mammary epithelial cells will help reduce the carbon footprint from the global infant formula market.
Fear of transmission must not eclipse infant survival

- It is inevitable that the baby food industry will focus on fear of the virus being present in breastmilk rather than the maternal anti-bodies and anti-infective factors in breastmilk that strengthen an infant’s immune system.

- Pre-print publication of a research from the USA on Covid-19 virus in the breastmilk. “Although SARS-CoV-2 RNA was detected in one milk sample from one of eighteen infected women, the viral culture for that sample was negative. This suggests that SARS-CoV-2 RNA does not represent replication-competent virus and that breastmilk itself is likely not a source of infection for the infant.”

- [https://www.medrxiv.org/content/10.1101/2020.06.12.20127944v1](https://www.medrxiv.org/content/10.1101/2020.06.12.20127944v1)
“In less developed countries, the best form of promoting baby food formulas may well be the clinics which the company sponsors”

Nestlé in Developing countries 1970
THANK YOU!

www.babymilkacton.org
www.ibfan.org
http://www.babymilkaction.org/archives/24184
http://www.babymilkaction.org/archives/24341