

# On promoting breastfeeding of infants born to women with COVID-19

COVID-19'lu kadınların bebeklerinde emzirmenin desteklenmesi üzerine

Cite this article as: Öncel S. On promoting breastfeeding of infants born to women with COVID-19. Turk Pediatri Ars 2020; 55(4): 457–9.

Dear Editor,

I have read Erdeve et al. (1) review on behalf of the Turkish Neonatal Society (TNS) concerning the decision to breastfeed an infant born to a severe acute respiratory syndrome coronavirus (SARS-CoV)-2-positive women with interest.

Although, in my opinion, the TNS should be congratulated for this effort, I felt obliged to comment on the authors' overly-cautious approach to breastfeeding by women with probable, possible or confirmed coronavirus disease 2019 (COVID-19) instead of being in favor of giving mother's milk to her infant. The authors give an impression of discouraging breastfeeding by stating "we are not completely sure that the virus cannot be transmitted via breast milk." This statement is correct according to the Chinese Pediatrics COVID-19 working group's recommendation of routinely separating the newborn from the mother precluding breastfeeding (2); however, a considerable amount of evidence has accumulated since the issuance of these recommendations and many authoritative scientific institutions including the World Health Organization, Centers for Disease Control and Prevention, and the Royal College of Obstetricians and Gynaecologists, have issued guidelines on safe breastfeeding of women with COVID-19 (3-5).

Also, the recommendation of "feeding the infant with mother's milk on condition that maternal milk COVID-19 polymerase chain reaction testing is found negative in institutions capable of analyzing mother's milk" should be removed from the document entitled "Turkish Neonatology Society Recommendations on Approach to Newborn Infants in Neonatal and Perinatal Period" because novel research has shown that SARS-CoV-2 ribonucleic acid detected in human milk does not represent viable, proliferous viruses (6, 7).

In the light of these advances, I think the time has come to stand for mother milk's more firmly, opting for more favorable statements in our guideline texts, such as "We recommend that mothers with suspected or confirmed COVID-19 should be encouraged to initiate and continue breastfeeding" to maintain, even boost mothers' and healthcare workers' enthusiasm for breastfeeding in this era of pandemic (3).

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**Peer-review:** Externally peer-reviewed.

**Conflict of Interest:** The author have no conflicts of interest to declare.

**Financial Disclosure:** The author declared that this study has received no financial support.

**Hakem Değerlendirmesi:** Dış bağımsız.

**Çıkar Çatışması:** Yazar çıkar çatışması bildirmemiştir.

**Mali Destek:** Yazar bu çalışma için finansal destek almalarını beyan etmiştir.

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Received / Geliş Tarihi: 04.09.2020

Accepted / Kabul Tarihi: 13.10.2020

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DOI: 10.14744/TurkPediatriArs.2020.56514



#### Authors' Response

Dear Editor,

We received a letter in which the author named Turkish Neonatal Society's breastfeeding suggestions as 'overly-cautious approach' for a mother with possible or confirmed coronavirus disease 2019 (COVID-19) instead of being in favor of giving mother's milk to her infant. The author also claimed that Turkish Neonatal Society's (TNS) proposal gives an impression of discouraging breastfeeding by stating "we are not completely sure that the virus cannot be transmitted via breast milk" (1, 2). We want to discuss this important subject with the chronologic progression of the pandemic in Turkey and two recently published articles by the TNS.

The first COVID-19 case was reported on March 11<sup>th</sup>, 2020, in Turkey, where 1.2 million infants are born annually. In the context of COVID-19 in a country with a high birth number, the TNS established a Task Force immediately which worked in coordination with the Ministry of Health COVID-19 Scientific Committee, and published a proposal with the evidence available in March 2020, to handle newborns with SARS-CoV-2 infections and outbreaks in neonatal intensive care units (NICU). The Task Force specially mentioned in the introduction of the proposal that recommendations should be modified based on accumulated clinic evidence and experience because of the limited cases and clinical evidence in neonatal COVID-19 at that time (2). The TNS proposes that breastfeeding decision may be given individually based on the 'mother's health status', and encourages mothers to express their breast milk to establish and maintain milk supply even they are hospitalized or are apart from their newborns. It includes that while feeding at the breast, all possible precautions should be taken to avoid contamination of the virus, including careful handwashing and wearing a face mask, which are universal recommendations nowadays. These cautions are preventive measures to decrease the risk of contamination, and should not be interpreted as an impression of discouraging breastfeeding.

The TNS founded a Neo-Covid Research Group to evaluate epidemiologic and clinical characteristics of COVID-19 in mother-infant dyads and published two studies recently that we believe may represent the current condition in our country. The first study was a multicenter cohort study conducted among newborns born to 125 mothers with COVID-19 in 34 NICUs in Turkey. The majority of the newborns (n=108, 86.4%) born to COVID-19 mothers were followed in isolation rooms in the NICU for a while, whereas others were monitored with a distance of two meters away from the mother (n=11, 8.8%) or cared for by family members in a separate room (n=6, 4.8%). Concerning breastfeeding, most of the neonates were fed with formula (n=71, 56.8%) or expressed breast milk (n=45, 36%), followed by breastfeeding (n=9, 7.2%) with caution. All neonates with COVID-19 (n=4) were fed with formula. Öncel et al. commented that in contrast to the recommendations in the TNS proposal, isolation of the patients in the NICU, health status of the mothers, and the anxiety of both parents and physicians on the possible contamination to breast milk could have affected the rate of breastfeeding in their cohort, and suggested that family support should be a part of the care in the NICU (3). Similarly, the Neo-COVID-19 Research Group from Spain reported a multicenter study, which also gave data regarding feeding type. Only 41.7% of the newborns received exclusive breastfeeding at discharge, which was lower than expected (4).