

# Breastfeeding Following a Natural Disaster

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This sheet is about exposure to natural disasters in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare providers.

## ***What could I be exposed to in a natural disaster?***

While many substances enter breast milk, most are not likely to harm a breastfed baby. In most cases, the benefits of breastfeeding far outweigh any risk from an exposure. However, if you notice anything unusual in your nursing baby, tell your healthcare providers right away. This is especially important after a natural disaster, when you or your baby could be exposed to things you wouldn't usually be around.

## **Vaccinations**

Vaccinations are given to protect people from serious diseases. Vaccinations are important for both the person who is breastfeeding and the nursing baby for their individual health. Vaccines can be “live” or “inactivated”. Inactivated vaccines do not contain a live virus. This means they are noninfectious and cannot give a person the disease that it is given to prevent.

Vaccinations that you might be given following a natural disaster include hepatitis A, hepatitis B, and/or tetanus. In most cases, these vaccinations are compatible with breastfeeding. Other vaccinations might be needed after some disasters. Check with your healthcare provider and local health officials about which vaccines are recommended if a natural disaster has occurred in your area.

## **Infections**

Some infections are common after a natural disaster. A local infection on the skin of a person who is breastfeeding is not usually dangerous to a breastfeeding baby. More serious infections such as those caused by methicillin-resistant ***Staphylococcus aureus*** (MRSA), ***Vibrio***, West Nile virus, hepatitis A virus, hepatitis B virus and others can be more complicated. If you think you have an infection, talk to a healthcare provider right away.

In general, a person who has an infection can continue to breastfeed. Be sure to drink plenty of liquids when you have an infection or other illness to help keep you hydrated. If you become severely dehydrated, you may become ill and it might reduce the amount of milk you are able to make.

## **Medication**

There are many reasons why a person may need to take medication after a natural disaster, such as having an infection or other illness. Many medications are compatible with breastfeeding. Other medications might affect a breastfeeding baby. If you need to take medication, for any reason, be sure to tell your healthcare provider that you are breastfeeding, so you get the medication that is right for you and your baby. Watch the baby for side effects while you are taking any medication. If your baby develops a rash, hives, or if you notice anything else unusual, tell your healthcare provider right away.

## **Insect Repellent**

Using insect repellent is an important way to help protect from infections spread by mosquitoes and ticks. A bite from an infected mosquito could give you a serious illness such as West Nile virus or Zika virus. Lyme disease comes from an infected tick. The most common active ingredient in insect repellent is DEET. It is not known whether the DEET you put on your skin passes into breast milk. However, only about 6-8% of the DEET put on your skin gets into your body. This means that very little DEET is expected to get into your breast milk. A person who is breastfeeding should follow the same recommendations that are given for the use of DEET in children. These include applying the insect repellent with DEET to your clothing and then only putting it on exposed skin such as your hands and face. Never apply insect repellent to the breast area. Wash your hands after applying insect repellent and before handling your baby or breastfeeding so that the baby's mouth is not exposed to DEET.

Other ways to lower your chance of being bitten by a mosquito or tick include staying indoors with proper screens during peak times of mosquito activity (usually overnight from dusk through dawn) and wearing long pants, long-

sleeved shirts, a hat, and shoes with socks while outdoors when possible.

### **Cleaning Agents**

Typical household use of cleaning agents is not expected to produce levels in breast milk that could hurt a baby. To help protect yourself, wear gloves when using cleaning agents; also keep fresh air moving into your work area (open windows/doors and/or run a ventilation fan). Wash hands well after handling cleaning supplies.

### **Pollutants**

Exposure to low levels of environmental chemicals is usually not a reason to stop breastfeeding. If you think that you may have been exposed to high amounts of a harmful chemical, contact your healthcare provider as soon as possible.

If you have been exposed to lead, a blood test can tell if the level is high. The level of lead in breast milk is usually lower than what is measured in the person's blood. Usually, a person does not have to stop breastfeeding unless the level of lead in their blood is very high.

### ***What if I need to give my baby formula?***

If you give your baby formula, it is best to use single serving containers of ready-to-feed formula whenever possible. This is especially important if the water supply is not clean or safe to drink or if the electricity is off. Ready-to-feed formula does not need added water and it does not need to be kept in a refrigerator. Local authorities will tell you if your water supply is safe to drink or to use for cooking or bathing.

If ready-to-feed formula is not available, use bottled water to mix powdered or concentrated formula. If bottled water is not available, use boiled water. Bringing water to a rolling boil for 1 minute will kill most disease-causing organisms, but it will not remove chemicals.

Do not use water that has been treated with iodine or chlorine tablets to prepare formula unless you do not have bottled water and cannot boil your water. Be sure to clean bottles and nipples thoroughly with bottled, boiled, or treated water before every use. Always wash your hands before preparing formula and before feeding your baby. If you do not have clean water for washing hands, use alcohol-based hand sanitizers.

### ***Where can I find more information on specific exposures through breast milk?***

MotherToBaby has fact sheets about many exposures which include information about breastfeeding (<https://mothertobaby.org/fact-sheets-parent/>). The International Lactation Consultant Association maintains a directory of individual lactation consultants who can help with breastfeeding concerns such as reduced milk supply. (<https://www.ilca.org/main/home>).

**Please click [here](#) for references.**

**Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://mothertobaby.org).**

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