

Common Supplements and Vitamins for Breastfeeding Mothers and Babies

Fluoride Supplements for Babies

Fluoride has been instrumental in decreasing the incidence of dental caries (cavities). Most communities put fluoride in their drinking water in order to conveniently provide fluoride to a large number of people.

The American Academy of Pediatrics (AAP) recommends that breastfed infants younger than 6 months of age NOT be supplemented with fluoride. Infants older than 6 months should be supplemented only if the community's drinking water has less than 0.3 ppm of fluoride. Lincoln's city water and Omaha's Metropolitan Utility District supplement their water with fluoride and monitor levels.

The most recent recommendations from the AAP also includes visiting a dentist by the age of 1 year, and brushing your baby's teeth daily with a "smear" (about the size of a grain of rice) of fluoride toothpaste as soon as teeth erupt. Do NOT offer water to rinse out the toothpaste, as they will swallow it, and the fluoride is more helpful in the mouth. Encourage them to spit out any excess as they are able.

Iron Supplements for Babies

Sufficient levels of iron help a baby to make hemoglobin, a complex protein that carries oxygen around the body. Low levels of iron in a baby can cause developmental delays, fatigue and recurrent infections.

Iron in a mother's breastmilk is better absorbed than iron in an iron-fortified formula or cow's milk. A full term healthy breastfeeding newborn usually has no need for extra iron until approximately six months of age, when a baby's iron stores that were acquired during pregnancy can become low. When solids are started at around 6 months of age, it is wise to start iron-rich foods, such as pureed meat or poultry, or iron fortified grains. If it is determined that a baby needs iron before that, it is recommended they receive iron drops, rather than iron-fortified food, as introducing solids early decreases breastmilk intake.

Prenatal Vitamins for Mothers

The American Academy of Pediatrics (AAP) suggests that a well-balanced diet is the best way for breastfeeding mothers to get adequate vitamins. However, pediatricians recommend that mothers continue taking their daily prenatal vitamin supplement to ensure a proper nutritional balance. The AAP recommends an extra B-complex supplement if a mother is a strict vegetarian and does not eat meat, poultry, or fish.

Omega 3 Fatty Acid (EPA and DHA) Supplements for Mothers

Sufficient levels of Omega 3 fatty acids in a breastfeeding mother have been associated with good brain development in babies and lower rates of depression in mothers. Omega 3 fatty acids are naturally found in oily fish and tend to be deficient in the American diet.

It is recommended that a breastfeeding mother eat oily fish that are low in mercury, like salmon or halibut, twice a week, or take an Omega 3 supplement of at least 300 mg daily. It is important that the Omega 3 supplement be free from contaminant. Visit <http://www.usp.org/> for this information.



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For additional
information:
www.milkworks.org

There are currently no vegetarian sources for Omega 3 supplements. Flaxseed is an Omega 3, however, it primarily contains ALA, which does not convert easily to EPA and DHA, which are the fatty acids that appear to help protect against depression. If the Omega 3 supplement you are taking causes indigestion, try storing the capsules in the freezer.

Vitamin D Supplements for Mothers and Babies

Vitamin D is actually a hormone that is produced during exposure to natural sunlight. It plays a vital role in promoting healthy bones, and building a strong immune system. Vitamin D deficiency is thought to be widespread among the general population due to decreased exposure to sunlight, the main source of vitamin D. The use of sunscreens, limited time spent out of doors, and people with dark skin living further from the equator have all contributed to vitamin D deficiencies.

The American Academy of Pediatrics (AAP) recommends that all exclusively, or partially, breastfed infants receive a supplement of 400 IU of vitamin D each day. (Infant formula is supplemented with vitamin D.)

Randomized trials have found that mothers who exclusively breastfeed can take high doses (6,400 IU/day) of vitamin D3 to increase the levels of vitamin D in their milk and in their breastfed infant (up to seven months of age). Some mothers find this appealing if their baby refuses to take a vitamin D supplement. The American Academy of Pediatrics has not changed their recommendation regarding supplementation of babies, recommending that all breastfed infants be directly supplemented a minimum of 400 IU of vitamin D a day.

From The Academy of Breastfeeding Medicine (2018):

“Randomized trials demonstrate that safe vitamin D supplementation may be provided to a nursing mother to achieve healthy vitamin D status in her breastfeeding infant, when there is objection or contraindication to direct infant supplementation. A maternal dose of 160lg/day (6,400 IU/day) is suggested”.

Further research is needed to determine how to best supplement a breastfeeding baby with vitamin D past seven months of age. As your baby starts solids, and eventually weans from your breast milk, we encourage you to discuss your baby’s need for vitamin D supplementation with your baby’s health care provider.

Source: ABM Clinical Protocol #29: Iron, Zinc, and Vitamin D Supplementation During Breastfeeding
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