CHAPTER 9

Breastfeeding and HIV

Breastfeeding is the most natural and healthy way to feed all babies — even if the mother has HIV. Taking ART during breastfeeding lessens the chance of HIV infection from breast milk, so much that it is rare for a baby to get infected by breastfeeding. So if you, your baby, or both of you take antiretrovirals during breastfeeding, your baby will have all the benefits of breastfeeding with little risk of HIV infection, especially if you started taking ART before or early in your pregnancy.

HIV can spread to some babies from breast milk, but this mostly happens when a breastfeeding mother is very ill from HIV, or if the mother is first infected with HIV during the months she is breastfeeding. Both of those times are when the amount of HIV in her body (her viral load) is highest. But if she is on ART, and her HIV is well controlled, breastfeeding is unlikely to spread HIV.

Breastfeeding will help a baby with HIV grow and stay healthy. Breastfeeding is recommended for at least 6 months and up to 2 years or beyond.

Why breastfeeding is good for a baby who might have HIV

- Breast milk protects babies against diarrhea, pneumonia, and other infections that are especially common and dangerous for babies with HIV.
- Breastfeeding makes it easier to feed a baby enough food to grow and develop well. Babies with HIV need even more food than those without HIV.

Even if you can only breastfeed for a while, until you return to work or school, for example, it is helpful for your baby. And if you have HIV but do not have access to ART, it is still usually safer for your baby to breastfeed for the first 6 months. For how to do this most safely, see page 145.
Breast is best

Breast milk is better for a baby than any mix or formula. Breast is best for ALL babies because breast milk:

- is easy for a young baby to digest and has all the nutrition and fluids he needs.
- is always fresh, ready-to-eat, and at the right temperature, unlike formulas.
- does not need water or bottles, which are difficult to keep clean.
- protects a baby from diarrhea, pneumonia, and other illnesses.
- does not cost anything.

The skin-to-skin touch between the mother and baby also helps the baby feel safe and loved, comforts a baby who is fussy or in pain, keeps a baby warm, and helps a mother and baby be close and learn about each other.

How to breastfeed

Settle yourself. Be calm and relaxed. Hold your baby so she can milk the breast and swallow easily. Then:

- support her head with your hand or arm.
- hold her body straight, turned completely towards you.
- help her get a big mouthful of your breast, with the nipple deep inside her mouth (see the picture on page 149).

Give only breast milk for the first 6 months, and feed the baby as often as she wants, usually every 1 to 3 hours. The more you breastfeed, the more milk you will make. A baby who wets a nappy several times a day is usually getting enough milk.

Do not let anyone make you feel that you cannot make enough milk — even your own crying baby. Babies cry for many reasons besides hunger.
Safer breastfeeding if you have HIV

- Take ART. It controls your HIV and keeps you healthier.
- Give your baby ART as advised by your health worker.
- Feed your baby only breast milk for the first 6 months, along with any needed medicines. (If you do use formula and are taking ART, keep breastfeeding whenever you can.)
- Eat well to keep yourself healthy.
- Use a good feeding position to prevent problems such as cracked nipples and breast infections. Quickly treat any problems that develop. See page 149.
- Use condoms during sex to protect yourself from sexually transmitted infections. Even if you already have HIV, other infections can make your HIV multiply, which can make it spread more easily.

See Chapter 7 for more on how to prevent HIV from infecting a baby.

Why only breast milk? Drinks such as teas, starch or sugar water, juice, cola, and even plain water are not nutritious. These drinks (and formulas) also make a baby breastfeed less, which will make you produce less milk. And other drinks are not as easy to digest as breast milk. They may irritate the baby’s stomach and cause diarrhea, leading to other problems.-Irritation in the baby’s digestive system also provides a way for HIV to infect the baby more easily if the mother’s breast milk has any HIV in it.

Mothers sometimes decide whether to breastfeed or not based on the wishes of the father or grandmother. A health worker or midwife can help a mother by discussing the issues with the mother and her family.

Sometimes a mother with HIV has not disclosed her HIV status to her family. She may worry that how she feeds her baby will show others she has HIV. With support, she may be able to tell her family about her HIV. But if this is too difficult, she can give other reasons for only feeding the baby breast milk.

The baby needs water too. Why can’t I give him some?

Giving only breast milk will mean less diarrhea for the baby. It will also help her breasts make more milk. There is plenty of water in her milk, please do not worry.
Help mothers with HIV feel confident about how they feed their babies

Breastfeeding is the oldest and healthiest thing in the world. But when HIV came, women were told not to breastfeed because it spread HIV.

Yes, we began to fear giving our milk to our babies!

These years with HIV have hurt the confidence of mothers. Even some women without HIV think that packaged formula must be better than breast milk.

Now we are told to breastfeed again, even with HIV, and ONLY breastfeed. This is good, but there is a lot of pressure to give more than breast milk.

Science has caught up with what we already knew was best for babies — breast milk. How can we spread this message?

We can reassure women that their milk is good, especially if they are on ART.

We need to discuss this with grandmothers and husbands too! The mother can’t be fighting with them about how to feed the baby.
Breast milk or formula

Women who worry that breastfeeding might spread HIV to their babies may think formula is safer. However, formula often has harmful germs that come from the water or dishes used to make it or feed it to the baby. And many families do not realize how much formula is needed to feed a baby. Formula companies promote their products with words and pictures that promise healthy babies, but many babies who feed on formula are not healthy. They may avoid HIV, but still die or grow very poorly because they are not given enough formula.

For babies under 6 months, breast milk is almost always best: from the mother, from a wet nurse who does not have HIV, or using heat-treated breast milk. To give formula safely, see page 150.

Breastfeeding while working

Breastfeeding is easier if you and your baby are together most of the time. If you farm or work at home (or your employer will allow you), you can keep your baby near you while you work, and stop to feed him. However, many women work in other sorts of jobs, such as shops, offices, or factories, and cannot keep their babies with them. Too many women, especially in HIV-affected families, cannot take much time off work after birth and so decide to use formula. Yet babies who may have HIV need the protections from breastfeeding as much or more than other babies.

To give your baby breast milk while working outside the home:

- have a caregiver bring the baby to your workplace and take breaks to feed him.
- you may be able to express milk at home and at work, and your caregiver can give your milk to the baby. See the next page for how to express milk.

In many countries, workplaces are legally required to provide breaks and a private space so a nursing mother can breastfeed or express milk. Since breastfed babies are healthier, smart employers realize these mothers will miss less work later if they do this.
How to express breast milk

To prepare for times you must leave your baby, you can squeeze milk from your breasts by hand or with a pump. A caregiver can feed it to your baby while you are away.

To milk your breasts, first wash your hands and a jar with a wide opening. If possible, boil the jar.

It can help to give your breast a little massage before you begin. Sit comfortably and think about your baby — this will help the milk come down. Hold your breast with your thumb on top. Gently press back toward your chest. Then press your thumb and fingers together and forward toward your nipple. After a few squeezes breast milk should start to come out. It should not hurt. As you squeeze out the milk, move your hand around your breast and squeeze different parts. Keep on until the milk slows and comes out a bit thicker. Change to your other breast and do the same thing. Do this to both breasts again, until they feel soft.

Use expressed breast milk within 8 hours, or refrigerate and use within 3 days.

How to heat-treat breast milk

Gently heating breast milk will kill any HIV in the milk. To heat-treat breast milk, put the milk in a glass jar that can be covered later with a lid. Place the jar in a pot of water. The water should be above the level of milk in the jar, but not as high as the opening. Heat the pot until the water reaches a full boil. Then take the pot off the heat and carefully take out the jar. Cover the jar and let the milk cool before you feed it to the baby.

Heat-treated breast milk can be stored at room temperature for 8 hours, in a refrigerator for 3 days, or in a freezer for 6 months.

Common problems with breastfeeding

For many new mothers, breastfeeding starts easily. But sometimes it takes time to find a comfortable position that also works for the baby. Encouragement from experienced family members, friends, midwives, or health workers can help women keep trying when there are problems at first.
Some common breastfeeding problems can be more serious for women with HIV. For example, infections let HIV spread more easily to the baby, and any discomforts or other feeding problems make the mother less confident. Preventing and treating problems keeps both you and your baby healthy.

**Sore or cracked nipples:** If you feel pain when the baby feeds, she probably does not have enough of your breast in her mouth. Be sure to hold her close so she can get a good mouthful. Do not pull your breast from the baby’s mouth while she is suckling. Use a clean finger to loosen the baby’s hold.

Soothe sore or cracked nipples with breast milk. At the end of feeding, squeeze out a few drops of milk and rub them on the sore places. Do not use soap or cream on your nipples. Avoid rough or tight clothing and leave your breasts open to the air when possible. Try to continue breastfeeding from both sides. If the pain is too great, remove the milk by hand and feed the baby with a cup and spoon. See page 148.

**Pain, swelling, or infection:** Your breasts can become swollen or painful when they are too full of milk. Swollen breasts can also lead to a blocked milk duct or breast infection (mastitis). To prevent this, make sure you empty your breasts. Feed often and as much as the baby will take.

Place a warm, wet cloth on swollen and painful breasts for 15 minutes before feeding. Do this at least 3 times a day. Also, squeeze your breast so a little milk comes out before you start feeding. This can soften your breast and make it easier for the baby to get enough breast in her mouth. If the pain continues or if you develop a fever, you may need antibiotics. Talk to a health worker.

**Yeast infection** on your nipple or baby’s mouth: If you have burning or itching nipple pain that lasts longer than a week, or spots or sores on your nipples, you may have candida, a yeast infection. Your baby may also cry more, and be fussy while feeding. Look in your baby’s mouth to see if inside, on the baby’s cheeks, there are white spots or sores, called thrush. To treat your skin or your baby’s thrush, see page 238.
When breastfeeding is not possible or you want to stop

There are some situations when a baby must be given other milks: if the mother has died or is separated from her baby for a long time, if there is no other woman who can safely breastfeed the baby, if a mother truly is not making enough milk, or if she has another problem stopping her from breastfeeding. For information on how to wean a baby and make sure he gets enough nutrition, see page 154.

If you use canned or powdered formula

If you use formula, you must be sure you will be able to buy enough formula to feed the baby well for many months, and you must be able to prepare it cleanly. You will need about one kilogram of formula each week after the first month, or a total of at least 50 tins for the first year. If you start feeding with formula, it is difficult to begin breastfeeding later. To make formula feeding healthiest:

- do not mix formula with extra water to make it go further. This is very dangerous for babies, especially babies with HIV, because watered-down formula does not give them enough nutrition.

- boil, or filter and disinfect, the water you use to make the formula. Also boil, or filter and disinfect, the water you use to clean dishes you use to store the formula or feed it to your baby. Otherwise it can cause illness. See pages 161 to 163.

- do not give a baby under 6 months any other drinks, except breast milk.

Animal milk for babies older than 6 months

After 6 months, boiled animal milk can be fed to babies along with other foods. Here are 2 recipes:

**cow, goat, or camel milk**

![Milk mixture](image)

- 2 parts milk
- 1 part water

For each 150 ml of the milk mix, add 10 g (2 teaspoons) of sugar.

**sheep or buffalo milk**

![Milk mixture](image)

- 1 part milk
- 1 part water

For each 100 ml of the milk mix, add 5 g (1 teaspoon) of sugar.