BfN’s Statement on COVID-19 Vaccines while breastfeeding

The information provided is taken from various reference sources. It is provided as a guideline. No responsibility can be taken by the author or the Breastfeeding Network for the way in which the information is used. Clinical decisions remain the responsibility of medical and breastfeeding practitioners. The data presented here is intended to provide some immediate information but cannot replace input from professionals.

This statement aims to address the questions we are receiving. It is for information only and not intended to promote the vaccine or replace advice from a healthcare professional.

If you are breastfeeding or giving your expressed milk, you can have any of the three vaccines currently available in the UK (Astra Zeneca, Pfizer/BioNTech or Moderna), as long as you meet the other conditions for receiving the vaccine (as set out by the JCVI and MHRA). As with other vaccines, there is no evidence that anything other than antibodies passes into your breast milk. These antibodies are not harmful to your baby, and may give some protection against the virus. There is no need to avoid giving your baby your breast milk directly after you have the vaccine, either by missing breastfeeds, or expressing and dumping milk.

The JCVI has recommended that the vaccines can be received whilst breastfeeding. This is in line with recommendations from the USA and the World Health Organization.

FAQs
When should I have the vaccine?
Vaccination is recommended during pregnancy and breastfeeding so you can have the jab as soon as you are invited.

I am pregnant, can I have the vaccine?
The JCVI and RCOG are recommending that you have the Moderna or Pfizer/BioNTech vaccines as these have been studied more extensively in the USA. However, if you have already had one dose of the AstraZeneca vaccine you will be encouraged to have the second dose of the same vaccine as there is no evidence of risk nor of benefit in mixing the vaccines.

I am under 40 and understand that I will be offered the Moderna or Pfizer/BioNTech vaccine. Can I still breastfeed?
Yes. You should not stop breastfeeding in order to be vaccinated against COVID-19. There is currently less experience with the Moderna vaccine but MHRA and JCVI have recommended that you continue to breastfeed as normal. There is no reason to believe that it behaves any differently to the other versions. There is significant data on the Pfizer/BioNTech vaccine in breastfeeding.

To talk to a mum who knows about breastfeeding call the National Breastfeeding Helpline 0300 100 0212

Calls to 0300 numbers cost no more than calls to UK numbers starting 01 and 02 and will be part of any inclusive minutes that apply to your provider and call package.
I am planning to breastfeed after my baby is born, can I still have the vaccine now?
Yes, you can have any of the three licensed vaccines now and breastfeed as normal. In pregnancy
you will normally be offered the Moderna or Pfizer/BioNTech vaccines. They are both compatible
with breastfeeding.

I am breastfeeding, can I have the vaccine?
Yes, you can have any of the three licensed vaccines and continue to breastfeed as normal.

I stopped breastfeeding after I had the vaccine. Can I restart now?
If you want to re-stimulate your milk supply or talk through your experience, then you can contact
the National Breastfeeding Helpline. Our aim is to support individual, informed decisions based on
the best data we have.

I have heard that the vaccines make you feel unwell, will I be able to care for my baby?
Some people report headaches, flu-like symptoms, general aches and pains, nausea, and
gastrointestinal symptoms. Taking paracetamol and drinking plenty of fluids to keep you hydrated
may help alleviate symptoms. Paracetamol can be taken as normal when pregnant or breastfeeding.
As some people report feeling tired in the day or two after the vaccine, you might want to have your
vaccine when someone is around to help you care for your baby and bring them to you for feeding. If
you usually express milk, you could express some extra ahead of time in case you want to use it.
Remember that missing feeds may lower your supply and could lead to blocked ducts or mastitis.

Some people have anecdotally reported symptoms of mastitis and altered milk supply to
breastfeeding supporters. The reports of adverse events are limited and there is no data on the
number of breastfeeding mothers who have been vaccinated.

If you believe you have experienced an adverse reaction to a vaccine, you can report this via the
yellow card system: https://coronavirus-yellowcard.mhra.gov.uk/

Summary: which vaccine can I have and when?

<table>
<thead>
<tr>
<th></th>
<th>AstraZeneca</th>
<th>Pfizer/BioNTech</th>
<th>Moderna</th>
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<tr>
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<tr>
<td>Under 40s</td>
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<td>yes</td>
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Latest research
A recent study has shown that breastmilk from mothers vaccinated against COVID-19 contains
antibodies which could help protect their infants against the virus.

The study included 32 breastfeeding women who had already decided to be vaccinated. They
received the Pfizer–BioNTech vaccine, given in two doses, 21 days apart. The control group included
28 breastfeeding women who were not vaccinated against COVID-19.

COVID-19 antibodies were found in the breastmilk of all vaccinated mothers, but not in the
breastmilk of mothers in the non-vaccinated group. The antibodies reached the highest observed
level at around 29 days after the first dose (7 days after the second dose), and were still present at
around 43 days after the first dose (22 days after the second dose).
Research looking at mothers who have been diagnosed with COVID-19 has shown that their breastmilk also contains antibodies to the virus, and that in a lab, this breastmilk is able to neutralise the virus. This means that breastmilk containing antibodies could give breastfed infants some protection against the virus. A study looking at the breastmilk of vaccinated women showed that the levels of antibodies in their breastmilk were higher than in women who had been diagnosed with COVID-19, showing that vaccination could give breastmilk stronger protective properties than catching the virus.

None of the infants of the vaccinated mothers in the study experienced any serious side effects after their mothers received the vaccination, and most experienced no side effects at all. Overall, this research supports the importance of breastfeeding women receiving the COVID-19 vaccine.

**Maternal and Child Symptoms Following COVID-19 Vaccination Among Breastfeeding Mothers**

This report looked at 4,455 breastfeeding mothers who received either the Pfizer or Moderna COVID-19 vaccination. Of these, 77 mothers (1.7%) reported negative effects on breastfeeding. It was noted that these mothers also reported more severe reactions to the vaccine themselves.

Overall, 7.1% of mothers reported any symptoms in their breastfed children following COVID-19 vaccination. These are shown in the table below. Other perceived symptoms in the children reported by three or more mothers included runny nose and flushing of cheeks.

![Symptoms Table]

The team concluded that COVID-19 vaccination among breastfeeding mothers resulted in minimal impact on breastfeeding and minimal side effects in the breastfed child.

https://www.infantrisk.com/content/results-breastfeeding-and-covid-19-vaccine-survey

**Reference:**

Jakuszko, K. et al. Immune Response to Vaccination against COVID-19 in Breastfeeding Health Workers

Early published results which are promising but very limited in numbers of cases studied:

1. Baird JK et al SARS-CoV-2 antibodies detected in human breast milk postvaccination (published 2 March 2021) that they had identified the presence of SARS-CoV-2 specific immunoglobulins (covid-19 antibodies) in the milk of 6 vaccinated mothers.  

   https://www.medrxiv.org/content/10.1101/2021.02.23.21252328v1.full.pdf?fbclid=IwAR3j5hlpS0L6J-vwuq7odYHJ3aB6P8OjEdu-Fy_vwzCjLh-yLnv0MqMpsl

   The conclusion of the group is:

   "Currently, there is little to no research to guide lactating women and their healthcare providers when deciding whether or not to get vaccinated. We provide the first evidence that mothers vaccinated against SARS-CoV-2 produce antibodies to this virus in breast milk that may be protective for infants."


   https://www.thelancet.com/journals/lanwpc/article/PIIS2666-6065(20)30045-6/fulltext#seccesectitle0001

   Studied 24 mothers with confirmed COVID-19 and 19 with suspected infection compared to a control group of 21 without infection. All 44 breast milk samples tested negative for the SARS-CoV-2 nucleic acid. There was no evidence of the SARS-CoV-2 virus in breast milk. The presence of IgM in some samples suggests the possibility that breast milk might have a protective effect on newborns. Breastfeeding duration was impacted by separation of mothers and babies during infection.

3. Gilbert P, Rudnick C. Newborn Antibodies to SARS-CoV-2 detected in cord blood after maternal vaccination

   https://www.medrxiv.org/content/10.1101/2021.02.03.21250579v1?fbclid=IwAR2Uwu7PKrm1bulzYxYUC8V-AP_ur2_bDAaW99RSUe4wi78YbhUYztpRpYM

   The first report of an infant with SARS-CoV-2 IgG antibodies detectable in cord blood after maternal vaccination. SARS-CoV-2 has already been identified in the milk of mothers exposed to COVID-19 infection. They have also been detected in one mother vaccinated in pregnancy but naïve to COVID-19 infection, in cord blood of her newborn.

4. Mahase E Covid-19: Pregnant women should be offered Pfizer or Moderna vaccine.

   https://www.bmj.com/content/373/bmj.n1013?utm_source=etoc&utm_medium=email&utm_campaign=tbmj&utm_content=weekly&utm_term=20210423

   "Those planning pregnancy, in the immediate postpartum, or breastfeeding can be vaccinated with any vaccine, depending on their age and clinical risk group”


   https://jamanetwork.com/journals/jama/fullarticle/2778766

   Studied 84 women in Israel after 2 doses of Pfizer BioNTech vaccine 21 days apart. Anti–SARS-CoV-2–specific IgG antibodies remained low for the first 3 weeks, with an increase at week 4 (20.5 U/mL; P=.004), when 91.7% of samples tested positive, increasing to 97% at weeks 5 and 6.
No mother or infant experienced any serious adverse event during the study period. Forty-seven women (55.9%) reported a vaccine-related adverse event after the first vaccine dose and 52 (61.9%) after the second vaccine dose, with local pain being the most common complaint. Four infants developed fever during the study period 7, 12, 15, and 20 days after maternal vaccination. All had symptoms of upper respiratory tract infection including cough and congestion, which resolved without treatment except for 1 infant who was admitted for neonatal fever evaluation due to his age and was treated with antibiotics pending culture results. No other adverse events were reported.

**Sources of information on compatibility with the vaccine and breastfeeding:**


- COVID-19: UK offers under 40s alternative to AstraZeneca vaccine to boost confidence. BMJ 2021;373:n1185 [https://www.bmj.com/content/373/bmj.n1185](https://www.bmj.com/content/373/bmj.n1185) (10.5.21)


- Royal College of Obstetricians and Gynaecologists (RCOG) COVID-19 vaccines: pregnancy and breastfeeding [rcog.org.uk](https://www.rcog.org.uk) (checked 16.06.21)


- GP Infant feeding Network (GPIFN) [https://gpinfn.org.uk/covid19/](https://gpinfn.org.uk/covid19/) (updated 11.06.21)

- Hospital Infant Feeding Network (HIFN) [www.hifn.org/covid-interim](https://www.hifn.org/covid-interim) (Jan 21)

- The UNICEF Baby Friendly Initiative information for healthcare professionals [www.unicef.org/babyfriendly/COVID-19/](https://www.unicef.org/babyfriendly/COVID-19/) (checked 17.06.21)

- InfantRisk: [https://www.infantrisk.com/covid-19-vaccine-pregnancy-and-breastfeeding?fbclid=IwAR030NDopMXbF76x1zjCzj22HCrGGlUCirCFZ-ijiHBFUBQeAECKVJQpMds0](https://www.infantrisk.com/covid-19-vaccine-pregnancy-and-breastfeeding?fbclid=IwAR030NDopMXbF76x1zjCzj22HCrGGlUCirCFZ-ijiHBFUBQeAECKVJQpMds0) updated 9.2.21

