



## **BFE SIG Milk Facts #1**

### **Clinical Lactation Update 5/18/24**

#### **Lactation update:**

The Academy of Breastfeeding Medicine (ABM) recently updated and published ABM clinical protocol #21: Breastfeeding in the Setting of Substance Use and Substance Use Disorder (2023).

- This protocol provides evidence-based recommendations to assist the practitioner in discussing the risks and benefits to breastfeeding for women and infant with maternal substance use/disorder (SUD).
- Application of protocol to practice

#### **Clinical case scenario:**

A G1P1 mother and newborn baby both tested positive for THC (Cannabis) at delivery. The mother admits to daily marijuana use during pregnancy for nausea and anxiety. She reports that her last MJ use was 3 weeks ago. She wants to breastfeed her baby and commits to not using marijuana while breastfeeding.

#### **Clinical Question:**

What is the **most appropriate literature-based recommendations** consistent with the mother's desire to breastfeed for the best maternal and infant outcomes?

Check all that does **NOT** apply:

- 1) Instruct the mother to stop breastfeeding and withhold lactation support due to limited evidence of the effects of breastmilk exposure to marijuana and potential harm to her infant.
- 2) Rather than discourage breastfeeding, encourage cessation and/or reduction of cannabis use during breastfeeding with lactation support post-partum.
- 3) If the mother wants to use cannabis while breastfeeding, discuss the risks and benefits of breastfeeding for shared decision-making, guided by the route and type of cannabis being used, potency and frequency.
- 4) Develop an individualized breastfeeding plan in partnership with the mother and a multidisciplinary team to help manage her anxiety and decrease cannabis use and/or discontinuation.

## **Answer: #1**

According to ABM Protocol #21

“Limited data exist describing the acute or long-term effects related to infant cannabis exposure through breast milk. A 2020 systematic review found only two observational studies on infant outcomes each reporting conflicting results on infant motor development at 12 months. Both studies were unable to control for prenatal cannabis exposure, thus further limiting data on cannabis exposure by breast milk alone. “

Therefore, ABM “encourages cessation and or reduction in cannabis use during lactation”.

“The evidence shows that prenatal care that includes mental health, addiction treatment and social support services have the best maternal and neonatal outcomes.”

“Enhancing breastfeeding education regarding substance use in pregnancy and lactation is essential to allow patient-centered guidance.”

## **Resource:**

Harris, M., Schiff, D.M., Saia, K., Muftu, S., Standish, K.R., & Wachman, E.M. (2023). Academy of Breastfeeding Medicine Clinical protocol #21: Breastfeeding in the Setting of Substance Use and Substance Use Disorder (Revised 2023). *Breastfeeding Medicine*, 18 (10), 715-733. Retrieved from:

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