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nutrition + self-care for breastfeeding mamas

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Liquid Gold

There's a reason breast milk is often referred to as liquid gold: it's pretty amazing stuff! If you've decided to breastfeed your baby, you are probably already aware of its benefits: in most cases it's all baby requires for optimal growth + development for the first six months of life, it changes in nutrient composition and antibody content to adapt to baby's needs, its flavour changes depending on the foods you eat (which may help with acceptance of a variety of foods once baby starts solids), reduces baby's future health risks and SIDS risk, and it doesn't cost you anything (aside from the cost of a few extra groceries to fuel your breastfeeding appetite, of course!). Mamas of nursing babies also have reduced risk of developing breast and ovarian cancers, report getting more sleep overall, and report fewer incidences of infant/toddler illness compared to moms of formula-fed babies.

While breastfeeding is how nature intended for babies to be fed, that doesn't mean it's easy. Breastfeeding mamas endure many challenges, and knowing whether we're doing everything correctly isn't always as intuitive as you might anticipate. Support in a variety of forms can help you find your stride with breastfeeding. From family and friends, to maternal health professionals like lactation consultants, public health nurses, dietitians, and physicians, to pro-breastfeeding environments and public spaces, nursing mothers truly need a community of acceptance and support to feel confident in their choice to breastfeed.

Hungry ALL THE TIME?

Breast milk production burns major calories, an average of 550 Calories per day for exclusively breastfeeding or pumping women. That's even higher than your third trimester calorie needs! No wonder so many breastfeeding mamas report being constantly hungry post-baby. There are so many recommendations for calorie intake for breastfeeding out there... depending on the source you might read to eat an extra 300 - 500 Calories per day (on top of your pre-pregnancy calorie needs) in order to support a healthy milk supply for baby and gradually reach your post-pregnancy weight (which may or may not be similar to your pre-pregnancy weight - more on this later!).

If you think the recommendations seem vague, or are in conflict with your hunger, you're not alone. Nutrition for breastfeeding is one of the most common topics of confusion for new mamas I see. Since your hunger levels are affected by the amount of breast milk you produce, how much sleep you're getting, your physical activity, and your food choices, it can be challenging to know if you're getting it right. I've combined my professional and personal experience to develop this resource for breastfeeding mamas to clear up the confusion and simplify healthy eating for breastfeeding. Whether you're exclusively breastfeeding, pumping, or supplementing with formula or donor breast milk, I've got guidance for you. {Please note, this information is intended for general information only and should not replace individualized medical guidance}



Breastfeeding Nutrition

While we know that breastfeeding burns extra calories, I'm a believer that the ideal way of eating for breastfeeding is Intuitive + Mindful Eating. Every woman is different, so there is no one right way to eat for breastfeeding. Burning extra calories for breast milk production means your body may naturally experience greater hunger levels, especially during the newborn phase while breastfeeding is becoming established. Whether you're exclusively breastfeeding, exclusively pumping, or breastfeeding while also supplementing with donor milk or infant formula, Intuitive + Mindful Eating allows you to rely on your individual cues and needs without subscribing to the idea that you need a certain number of extra calories or food servings per day.

My top tips for Intuitive + Mindful Eating while breastfeeding are:

- Rely on internal hunger and satiety cues to guide when and how much you eat and drink, rather than external cues such as time of day or finishing what's on the plate.
- Eat for physical rather than emotional reasons, and allow yourself to experience and work through the many emotions you will have post-baby.
- Choose foods that bring you enjoyment and satisfaction.
- Reject conventional diet culture and its celebration of "sooner is better" for returning to your pre-baby size and shape.



We tend to be most satisfied following a meal or snack when we include variety and a balance of nutrients. Choosing options that you enjoy with a source of protein (like meat, poultry, beans/lentils, eggs, dairy/alternatives, etc) or healthy fat (like nut/seed butters or avocado) and complex carbohydrates (like fruit, veggies, and whole grains) can help keep your energy levels more even throughout the day. Limiting foods that you find don't sustain your physical or mental energy levels may also be helpful (some women find that processed and highly refined foods or caffeinated beverages leave them feeling tired or irritable within 1-2 hours).

Nutrients we require in higher amounts to support breastfeeding include: vitamins A, C, E, all B-vitamins, choline, chromium, copper, iodine, molybdenum, potassium, and zinc. (No wonder most health organizations recommend to continue taking your prenatal vitamin while breastfeeding!). Eating a good balance and variety of foods will also help to ensure you're getting what you need. If you're not menstruating yet, iron is actually the only nutrient requirement that declines for breastfeeding (if you've begun menstruating again, your iron needs are the same as for pre-pregnancy again, at 18mg/day).

Dieting or intentional calorie restriction to lose weight while establishing breastfeeding can backfire with reduced milk supply and irritability. Remember that your body has been through a lot in pregnancy and delivery; giving yourself the time to recover gradually and truly listening to what, when, and how much to eat is an important part of post-pregnancy self care. (More on this topic later!)

A new breastfeeding baby also brings changes to your hormones as well as some degree of sleep deprivation, which can leave you feeling like you're riding an emotional rollercoaster. Planning and executing meal preparation during this time can be a major challenge, so don't hesitate to ask your partner, family, and friends to pitch in with grocery shopping and cooking.

Fluids

The average breastfeeding mama needs an extra 1.1 litres of fluid per day, for a total of 3.8 litres daily. If you're not exclusively breastfeeding, you may need less. Staying on top of your thirst helps to ensure you're producing enough breast milk for baby while also reducing your risk for dehydration. Keep in mind your needs may increase further with physical activity, hot weather, or illness.

One of the easiest ways to help ensure you're drinking enough is to keep a water bottle next to all of the spaces you typically breastfeed or pump. Give your partner or another support person who lives with you the task of cleaning and refilling the bottles regularly. All fluids count, so listen to your body when deciding between water, milk or milk alternative beverages, juice, smoothies, etc.



Caffeine

As in pregnancy, caffeine while breastfeeding isn't strictly off-limits for most mamas (hurray!!). Since small amounts of caffeine will enter your breast milk, research has shown it's a good idea to keep your intake **under 300mg** per day from all sources (coffee and espresso beverages, tea, chocolate, energy drinks, soft drinks). Consuming more may increase the chance of negative effects on baby such as irritability or trouble sleeping. See below for a few examples of caffeine content in common

food/beverage sources, paying special attention to

serving size. If you like a particular type of coffee or espresso-based drink from a restaurant, check out the Nutrition Information on their website for caffeine content in your favourite beverage and size - some of the larger servings contain well over 300mg (for example, Starbucks True North Blend Blonde Roast Venti contains 475mg of caffeine).

Since your fluid requirements are so high for breastfeeding, I like to recommend drinking a glass of water **before** you drink a coffee or coffee-based beverage (especially first thing in the morning). In my experience, water is the best bet to ensure you stay hydrated and can ward off caffeine-induced headaches if you happen to be prone to them.

Common Food/Beverage Caffeine Sources:

Item	Serving size	Caffeine content or range (mg)
Coffee, brewed	250mL/8oz/1cup	100-170
Espresso	30mL/1oz	64-90
Tea, black	250mL/8oz/1cup	43-80
Tea, green	250mL/8oz/1cup	25-45
Energy drinks	250mL/8oz/1cup	80-100
Soft drinks (Cola, diet Cola, root beer, Dr Pepper)	355mL (1 can)	23-43
Chocolate, dark	40g	27

Source/For more info on caffeine content in foods: [click here](#)



Alcohol

Alcohol does enter your breast milk when you consume it, and has the potential to negatively impact a nursing baby if the concentration of alcohol your milk is high enough since babies' bodies do not break down and excrete alcohol as quickly as adults. How much is too much? Most research points to no adverse effects to baby if you've had just a standard drink or two, but since your body's individual ability to metabolize alcohol is unique to you it's best to focus on whether you can safely care for baby if you've consumed alcohol and have a safe feeding alternative available if needed (such as pre-expressed breast milk or infant formula). You may find that after many months of alcohol avoidance in pregnancy, you feel the effects of alcohol with even just a single drink. What's typically of most important concern is safe parenting while drinking; alcohol can impair our decision-making and increases the risk of harm to an infant/child (ie. accidentally dropping or falling while holding your child) so if you plan to have more than 1-2 drinks, plan in advance for safe childcare.



Contrary to the old saying, you actually don't need to "pump and dump" after consuming alcohol since alcohol will also leave breast milk just as it leaves your bloodstream once it's metabolized by your body (unless you're pumping to simply relieve the pressure or stick to a supply-demand schedule). The rule of thumb is to wait 2 hours for every serving of alcohol before breastfeeding or pumping breast milk for later use. You should also be aware that while alcohol intake may hasten your letdown reflex, it can reduce how much milk you produce in the short term. So ideally, you could have some pre-pumped/expressed breast milk or formula ready if you anticipate baby may need to nurse before your body is ready for a safe and adequate feeding.

Supplements + Herbal remedies

Many people mistakenly believe that nutrition supplements and herbal remedies are always safe to consume while breastfeeding; while many are known to be safe, others are known to be unsafe, and still more have insufficient evidence of safety. More confusing still, is that some herbal remedies that are commonly used to increase breast milk supply (known as herbal galactagogues) may pose risks depending on your health history. For example, Fenugreek is commonly recommended as a herbal galactagogue (although scientific evidence is mixed for its effectiveness) but since it may lower blood sugars, may not be the ideal choice for women with a history of hypoglycemia or insulin-dependent diabetes.

While most nutrition supplements you might have been taking during pregnancy are typically ok to continue in breastfeeding, such as a prenatal multivitamin, omega-3s, or vitamin D, always check with a qualified health professional who knows your personal medical history before taking any new supplements or herbal remedies.



Allergy prevention through breast milk?

Some really exciting research has been happening in the allergy world. In recent years, previous recommendations for allergy prevention in infants have been turned upside down as a result of some very well-conducted studies on introducing common allergens to infants under the age of 1. Now, even amongst high risk infants (those with at least one parent who has a food allergy) early introduction of common food allergens (such as peanuts, tree nuts, eggs, cow's milk protein, soy, wheat, fish, and shellfish) is recommended before age 1, any time after 6 months (in age-appropriate textures/forms).

More recently, research has also suggested that what mama eats during breastfeeding has additional impact on reducing a baby's risk of developing a food allergy. A recent Canadian study showed in a group of infants at genetically higher risk for developing allergy, that if mom ate peanut regularly while breastfeeding and also introduced peanut to her infant before age 1, the lowest risk of the infant developing peanut allergy was observed. It's likely that consuming common allergens while you're breastfeeding provides your baby with a form of early exposure to them, which can help baby's body and immune system to develop in a way that it doesn't perceive the allergen as a threat to the body. If your baby has a suspected sensitivity or allergy to any particular foods then this would be reason to see a Registered Dietitian specializing in pediatrics or food allergy.

The Last 10lbs...

Many women find they lose weight pretty steadily over the first several months post-baby only to get stuck with the “last 10lbs” that doesn’t seem to budge (maybe more, maybe less, depending on the individual). There are a few reasons why this might happen. If baby has started on solid foods or is receiving supplemental formula feedings, her breast milk intake may decrease; if you’re still consuming around the same amount of food as when you were producing more milk, it could be causing you to hold onto extra weight. If you think this might be the case, reflecting on your intake and practicing mindful eating strategies as discussed above can help you to realign your eating with your body’s needs. Other factors may also impact your body’s willingness to let go of extra fat, such as sleep, stress, and physical activity.

For many breastfeeding mamas, however, despite having healthy + mindful eating habits, working on sleep routine and practicing regular physical activity, those last few pounds simply seem to hang on until your little one weans from nursing. It’s also possible that your body has adapted to a new “set point” weight where it’s most comfortable, even after your little one has weaned. Accepting this reality may require an adjustment in your mindset, especially since we live in a society that praises a speedy return to pre-pregnancy weight/shape. Establishing healthy habits, focusing on feeling good, and engaging in functional and enjoyable activities are much more important than achieving your pre-pregnancy weight or body size. Dieting or excessive and unsustainable weight loss measures do not work for long-term weight management, and have the potential to leave lasting negative impacts on both your physical and mental health.



Self-Care + Support in Breastfeeding

There's no doubt about it, breastfeeding is a time- and energy-consuming endeavour. While many mamas enjoy the bonding time during nursing (helped in part by the release of breastfeeding hormones prolactin and oxytocin), others are disheartened and guilt-ridden when they feel bored, trapped, exhausted, or even resentful toward the breastfeeding experience or their little nursling. The most important components for establishing a positive breastfeeding experience are basic self-care and reaching out to a community of support.

Tips for self-care + support if you're feeling breastfeeding overwhelm:

1. Eat regularly, drink plenty of water
2. Take time every single day to do something you enjoy without baby (even just 15 mins)
3. Pass off a feeding to your partner or a family member or friend, if possible (with expressed/pumped breast milk or formula)
4. Join a breastfeeding support group (in person, with your local La Leche League chapter, or online)
5. Fill out my [Self Care + Support planning worksheet](#), or re-visit it if you're feeling that your current support and self-care plans aren't meeting your needs
6. If you're experiencing any [signs or symptoms of postpartum depression](#), or [dysphoric milk ejection reflex](#), let a trusted Health Care Provider know.



If there's anything I can do to help support you in your breastfeeding endeavours, please don't hesitate to [reach out to me](#). You've got this, mama!

- *Sarah xo*