

## Media Release:

### La Leche League International Encourages Continuing to Nurse Your Baby Through the Flu

### 国际母乳会鼓励在流感中继续哺喂你的宝宝

(22. January 2018) Raleigh, NC – La Leche League International encourages all families to recognize the importance of breastfeeding in providing immunological protection to the breastfed child. Most often, babies who are being nursed remain healthy even when their parents or other family members fall ill with an infectious illness, because they benefit from the antibodies provided in the lactating parent's milk. Lactating parents who are infected or immunized with an appropriate vaccine during the antenatal period will produce sufficient quantities of specific secretory IgA antibodies in their milk to protect their nursing infants against infection from the influenza virus. Following good hygiene practices will also help reduce transfer of the virus.

(22. January 2018) Raleigh, NC –国际母乳会鼓励所有家庭了解哺乳为儿童提供免疫保护的重要性。很多时候，宝宝的父母或其他家人因传染性疾病而生病时，哺乳中的宝宝却依然健康，因为他们受到母乳中抗体的保护。曾受感染或曾在孕期接受疫苗的哺乳期母亲会在母乳中制造足量特制的 IgA 抗体，用以保护哺乳中的婴儿免于感染流感病毒。遵循良好的卫生习惯也有助于降低病毒的传播。

The Centers for Disease Control (CDC) recently re-released an older report suggesting that breastfeeding should be temporarily discontinued and the lactating parent and baby separated when the parent exhibits flu symptoms. Members of La Leche League International's Health Advisory Council have responded to concerns about the current applicability of the guidance offered. It is important to recognize that the report, originally developed during the 2009 H1N1 pandemic and updated in 2011, was based on concerns for newborns in labor, delivery, recovery, and postpartum hospital settings when their mothers have or are suspected of having influenza.

美国疾病预防控制中心（CDC）最近重新发布一份旧文件，建议当母亲出现流感症状时，应该暂停哺乳，而且母亲和宝宝要分开。国际母乳会健康咨询委员会的成员对该指南目前的适用性表示担忧。知晓以下信息非常重要：这份报告最早发布于 2009 年 H1N1 新型流感蔓延期间，并于 2011 年更新。该指南针对设有待产、分娩、恢复和产后等设施医院中的新生儿，他们的母亲已经感染流感或怀疑正在遭受感染。

Beyond the newborn stage, nursing babies or toddlers and nursing parents are generally living together in the same environment; they are exposed to the same germs. As the CDC explains, the “incubation period for influenza is 1-4 days (average: 2 days),” and “healthy adults may be able to infect others beginning 1 day before symptoms develop” (Centers for Disease Control and Prevention). Once the lactating parent has been exposed, so have the baby and the rest of the family. In addition, not every respiratory infection, even accompanied by fever, is the flu; winter is the season of many viral upper respiratory infections. Even colds may be accompanied by a fever at times.

新生儿阶段之后，哺乳中的婴儿和幼儿与哺乳的母亲通常在同一个环境中一起生活，他们暴露在同样的致病菌中。根据 CDC 的解释，“潜伏期约 1-4 天（平均 2 天）”，“健康成年人在受感染的第一天尚未有任何征状时就能传给其他人”（疾病控制与预防中心），一旦哺乳的母亲受到感染，宝宝与其他家人可能也已经受到感染。此外，即使伴随发烧症状，并不是每一种呼吸道感染都是流感。冬天是许多病毒性上呼吸道感染的多发季节，即使是普通感冒，有时也会伴随发烧。

Separating the baby from the lactating parent may have serious consequences. Being refused the breast can be emotionally traumatic for nursing babies and toddlers and may not prevent the baby or toddler from developing the illness. The stress of separation may actually increase the risk of illness in the infant or toddler. In addition, it is important not to interrupt the immunological protection that nursing provides or to risk early weaning.

将哺乳中的宝宝与母亲分开可能造成严重的后果。对哺乳中的婴幼儿而言，被拒绝吸吮乳房可能造成情绪受创并且无法避免生病。事实上，分离所带来的压力会增加婴幼儿生病的风险。此外，非常重要的是：不应中断哺乳所提供的免疫保护，也不应冒着可能提早离乳的风险而去中断哺乳。

In normal circumstances, there is no need to interrupt direct breastfeeding. Instead, parents who believe they may have the flu are encouraged to follow good hygiene practices, such as thoroughly washing their hands and wearing a protective mask to prevent

spread of the virus. In unusual circumstances, when an interruption of nursing is deemed medically necessary, pumping or hand expression is encouraged. In such cases, the expressed milk, which contains antibodies specifically produced against the influenza virus, may be fed to the baby to help prevent the infection in the baby or to help reduce the severity and duration of the infection.

在正常情况下，不需要中断母乳亲喂。当然，我们鼓励认为自己受到感染的父母遵循良好的卫生习惯，例如：彻底洗净双手并戴防护性口罩，避免散播病毒。在特殊状况下，当中断母乳亲喂被认定为医学必要时，鼓励母亲用吸奶器吸出或徒手挤出奶水。在此情况下，这种带有特制的抗流感病毒抗体的乳汁可以喂给宝宝，帮助宝宝避免感染或降低感染的严重性和持续的时间。

The LLLI Health Advisory Council suggests families discuss the pros and cons of influenza vaccines with their health care practitioners. Public health services in families' own countries may have recommendations about influenza vaccination for those who may be interested. The World Health Organization's (WHO) Global Influenza Programme provides guidance to member states regarding influenza as it develops around the world. In the US, the CDC recommends vaccination for anyone who is lactating or pregnant, based on several studies conducted over a period of years, which have demonstrated that influenza immunization of mothers, either while pregnant or postpartum, protects both mothers and young infants up to about six months of age from acquiring influenza infections (e.g., Eick, et al., 2010; Schlaudecker, et al., 2013; Steinhoff, et al., 2010; Zaman, et al., 2008). Schlaudecker and her colleagues found that neutralizing IgA antibodies formed in human milk after influenza immunization of the mother. The American Academy of Pediatrics (AAP) also offers information regarding influenza vaccination for children. The UK offers information about influenza vaccination on its website (see Gov.UK). Please see a local health care provider for additional information.

国际母乳会健康咨询委员会建议家庭与他们的医护人员讨论流感疫苗的利弊。在不同国家，公共卫生服务机构会提供对流感疫苗的建议，供感兴趣的大众参考。世界卫生组织（WHO）「全球流感方案」会针对流感在世界各地的发展，提供指南给会员国。在美国，CDC 建议所有哺乳期女性或孕妇接种疫苗，基于多个长期研究证实，不论是在怀孕期间或产后接种疫苗，都能保护母亲和小婴儿在六个月内免于感染流感（e.g., Eick, et al., 2010; Schlaudecker, et al., 2013; Steinhoff, et al., 2010; Zaman, et al., 2008）。Schlaudecker 与他的同事发现，在母亲注射疫苗后，母乳中有中和性 IgA 抗体形成。美国儿科医学会（AAP）也提供关于儿童注射流感疫苗的信息。英国在网站（Gov.UK）上提供关于流感疫苗注射的信息。请向当地医疗卫生机构索取更多的信息以供您参考。

Note of interest: February 12, 2018, CDC revised its guidance regarding breastfeeding mothers who exhibit symptoms of influenza.

特别附注：CDC 于 2018 年 2 月 12 日修订了关于出现流感症状的哺乳期母亲的指南。

## 数据源

- American Academy of Pediatrics (AAP). (2017). Recommendations for prevention and control of influenza in children, 2017-2018. Accessed 21. January 2018 from <http://pediatrics.aappublications.org/content/140/4/e20172550>
- Centers for Disease Control and Prevention (CDC). (2009-2016). Clinical signs and symptoms of influenza. Downloaded 20. January 2018 from <https://www.cdc.gov/flu/professionals/acip/clinical.htm>
- Centers for Disease Control and Prevention (CDC). 2011-2018. Influenza. Downloaded 12. February 2018 from <https://www.cdc.gov/breastfeeding/disease/influenza.htm>
- Eick, A. A., Uyeki, T. M., Klimov, A., Hall, H., Reid, R., Santosham, M., O'Brien, K. L. (2011). Maternal influenza vaccination and effect on influenza virus infection in young infants. *Archives of Pediatrics & Adolescent Medicine* 165(2), 104-111. DOI: 10.1001/archpediatrics.2010.192.
- Gov.UK. (2017). Seasonal influenza: Guidance, data, and analysis. Accessed 21. January 2018 from <https://www.gov.uk/government/collections/seasonal-influenza-guidance-data-and-analysis>
- Schlaudecker, E. P., Steinhoff, M. C., Omer, S. B., McNeal, M. M., Roy, E., Arifeen, S. E., . . . , Zaman, K. (2013). IgA and Neutralizing Antibodies to Influenza A virus in human milk: A randomized trial of antenatal influenza immunization. *PLOS ONE* 8(8) e70867. DOI: 10.1371/journal.pone.0070867.
- Steinhoff, M. C., Omer, S. B., Roy, E., Arifeen, S. E., Raqib, R., Altaye, M., . . . , Zaman, K. (2010). Influenza immunization in pregnancy—Antibody responses in mothers and infants. *The New England Journal of Medicine* 362(17), 1644-1646.
- World Health Organization (WHO). (2017). Influenza. Accessed 21. January 2018 from <http://www.who.int/influenza/en/>
- Zaman, K., Roy, E., Arifeen, S. E., Rahman, M., Raqib, R., Wilson, E., . . . , Steinhoff, M. C. (2008). Effectiveness of maternal influenza immunization in mothers and infants. *The New England Journal of Medicine* 359(15), 1555-1564. DOI: 10.1056/NEJMoa0708630.