Breastfeeding With Diabetes: Yes You Can!

By Marsha Walker, RN, IBCLC

You may have just found out that you have diabetes. Or you may have had it for awhile. Happily, breastfeeding is possible. It is good for both you and your baby.

There are 3 basic types of diabetes [see box]. Breastfeeding is helpful with all 3 types.

- **Type 1 diabetes**
  - The pancreas does not produce enough insulin
  - Requires insulin injection

- **Type 2 diabetes**
  - Obesity and high blood pressure increase the risk for this type of diabetes
  - Is managed by diet or oral medicine
  - A woman may be switched to insulin during pregnancy and breastfeeding

- **Gestational diabetes**
  - Occurs during pregnancy
  - Usually goes away after pregnancy, though it may re-occur
  - Women with gestational diabetes who do not breastfeed the baby from that pregnancy are twice as likely to develop type 2 diabetes

Talk with your baby’s doctor about how to monitor your glucose levels after the birth. About half of babies of diabetic mothers may have low blood sugar soon after birth.

If you have type 1 diabetes, discuss nighttime insulin dosages, calorie needs, and snacks before each breastfeeding.

Contact a lactation consultant to talk about breastfeeding. Learn how to express colostrum from your breasts in case breastfeeding is delayed and/or your baby needs to be supplemented in the hospital.

**After Your Baby Is Born**

Your baby may be taken to a special care nursery. If she needs to be supplemented, ask that she receive your colostrum or milk from a human milk bank instead of formula. Standard formula increases the risk for your baby getting diabetes. If formula must be used, ask that a hypoallergenic formula be given to your baby.

Keep your baby skin to skin with you. Skin-to-skin contact immediately after birth keeps your baby warm and makes it easy to start breastfeeding. It keeps her blood sugar levels from dropping due to separation or crying.

Breastfeed soon after birth and often [see box]. This will stimulate milk production and stabilize your baby’s blood glucose level. If there are times you cannot breastfeed, express your milk until you are able to put our baby to breast.
Put your baby to breast within 1 hour after birth
Nurse once every hour for the next 3 to 4 hours
Nurse every 2 to 3 hours until 12 hours of age
Nurse at least 8 times each 24 hours during your hospital stay

If your baby is a little slow nursing at first, you may need to watch closely for feeding cues [see box].

Place baby skin to skin on your chest
Watch for rapid eye movements under the eyelids (the baby will wake easily)
Move baby to breast when baby shows feeding cues
- Sucking movements of the mouth and tongue
- Hand-to-mouth movements
- Body movements
- Small sounds

Make sure you know how to tell when your baby is swallowing. Use alternate massage if your baby doesn’t swallow after every 1 to 3 sucks.
- Massage and squeeze the breast each time she stops between sucks.
- This helps get more colostrum into her and keeps her sucking longer.

Your blood glucose will be monitored in the hospital. Meal plans often have 3 meals and 3 small snacks. Eating something before every breastfeeding will help you remember to eat and keep your blood glucose steady. Ask a lactation consultant to help you write a plan of how you will feed your baby at home.

After You Go Home
Diabetes may delay the rapid increase in milk usually seen on day 3. It may take a day or two longer for your milk to come in.
- Breastfeed 10 to 12 times each day until your milk supply increases.
- Check for at least 6 wet diapers and at least 3 bowel movements every 24 hours after the first 3 days.

Take your baby to see her doctor for a weight check a day or two after you go home.
Delay feeding cereal or other foods until your baby is 6 months old. This may help protect her from developing diabetes.

Taking Care of Yourself
Monitor your blood sugar closely.
- Your blood sugar may fluctuate while you breastfeed.
- Herbal products can affect your blood glucose levels.

If you have type 1 diabetes, you may have low blood sugar within an hour after breastfeeding.
- Eat a snack with carbohydrate and protein before or while nursing.
- Keep a snack, glucose tablets, or fast-acting sugars in places where you nurse in case of an emergency.

Work with a lactation consultant to help avoid sore nipples as your baby learns to latch on and suck.
Diabetic mothers with sore nipples are more likely to develop a yeast infection or a breast infection (mastitis).

Your Local Lactation Consultant

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