

they are enrolled in a supervised methadone maintenance program and have negative screening for HIV and illicit drugs.)

- Human T-cell leukemia virus types I and II
- Mothers who are receiving diagnostic or radioactive isotopes or who have had exposure to radioactive materials (for as long as there is radioactivity in milk)

A small number of medications are contraindicated for breastfeeding mothers. Consult a reference such as LactMed, an online source published by the National Library of Medicine/National Institutes of Health (National Library of Medicine, 2015).

Some herbal products are presented as safe and effective alternatives to prescription or over-the-counter medications. Certain herbal agents, called **galactogogues**, are reported to increase breast milk production. However, insufficient data are available to confirm or deny the assertion of increased milk production using herbal galactogogues or to ensure that the herbal preparations are safe for breastfeeding infants ([Jackson, 2010](#); [Zuppa, Sindico, Orchi, et al, 2010](#)). Mothers are cautioned to seek advice from a practitioner to ensure that the herbal preparations do not have the potential for harm.

Breastfeeding with twins and other multiples requires specialized professional support. If both twins are full term, they can begin feeding immediately after birth ([Fig. 7-12](#)); late preterm infants should be evaluated individually but may be breastfed if stable. Simultaneous feeding promotes the rapid production of milk needed for both infants and makes the milk that would normally be lost in the letdown reflex available to one of the twins. When only one infant is hungry, the mother should feed singly. She should also alternate breasts when feeding each infant and avoid favoring one breast for one infant. The suckling patterns of infants vary, and each infant needs the visual stimulation and exercise that alternating breasts provides.