



Alcohol & Breast Milk

Alcohol passes through your breast milk to your baby, so the American Academy of Pediatrics (AAP) recommends avoiding drinking alcohol while breastfeeding.

What You Should Know:

- Drinking beer **does not** increase your milk supply, as urban myth(s) suggests.
- Consuming alcohol of any kind may decrease the amount of milk (/English/ages-stages/baby/breastfeeding/pages/Making-Sure-Your-Baby-is-Getting-Enough-Milk.aspx) your baby drinks.
- Alcohol can change the taste of your milk, and some babies may not like it.
- Breastfeeding your baby while consuming alcohol can pose a risk to your infant if he or she consumes breast milk with alcohol.
- Expressing or pumping milk after drinking alcohol, and then discarding it ("pumping and dumping"), **does NOT** reduce the amount of alcohol present in your milk quicker. As your alcohol blood level falls over time, the level of alcohol in your breast milk will also decrease. Breast milk continues to contain alcohol if alcohol is still in your bloodstream.



If You Choose to Have an Alcoholic Drink:

If you are going to have an alcohol containing beverage, it is best to do so just after you nurse or pump milk rather than before.

Breastfeeding or pumping breast milk is ok 2 hours after your last drink. That way, your body will have as much time as possible to rid itself of the alcohol before the next feeding and less will reach your infant.

1 alcoholic drink

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12-oz of beer or **1-oz hard liquor** or **4-oz glass of wine**

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Caring for a baby while intoxicated is not safe!

Drinking alcohol could impair your judgment and your ability to safely care for your baby. If you drink excessively, arrange for a sober adult to care for your baby during this time.

Know the Effects of Repeated Alcohol Exposure to Your Breastfed Baby:

There are increasing concerns about long-term, repeated exposure of infants to alcohol via the mother's breast milk, so moderation is advised. Chronic consumption of alcohol may also reduce milk production (/English/ages-stages/baby/breastfeeding/Pages/Milk-Supply.aspx).

[Back to Top](#)

More things to avoid when breastfeeding:

Caffeine. Breast milk usually contains less than 1% of the caffeine ingested by the mom. If you drink no more than three cups of coffee spread throughout the day, there is little to no caffeine detected in the baby's urine. However, if you feel that your infant becomes more fussy or irritable when you consume excessive amounts of caffeine—usually more than five caffeinated beverages per day—consider decreasing your intake.

Mercury. Most people are not affected by these tiny amounts of mercury, but mercury can cause damage to the nervous system in babies and small children. The American College of Obstetricians and Gynecologists (ACOG) encourages breastfeeding mothers to follow the FDA and U.S. Environmental Protection Agency (EPA) advice (<https://www.federalregister.gov/documents/2017/01/19/2017-01073/advice-about-eating-fish-from-the-environmental-protection-agency-and-food-and-drug-administration>) regarding fish consumption:

- Eat 2-3 servings a week (8 to 12 ounces in total) of a variety of fish
- Eat only 1 serving a week (no more than 6 ounces) of some fish, such as albacore (white) tuna and fish with similar mercury concentrations to albacore (white) tuna
- Avoid certain fish with the highest mercury concentrations
- Check for advisories for fish caught by family and friends and where no advisories exist; limit eating those fish to one serving a week and do not eat other fish that week.

Marijuana. No amount of marijuana (</English/ages-stages/prenatal/Pages/Marijuana-Use-During-Pregnancy-Breastfeeding.aspx>) has been proven safe to use during pregnancy or while breastfeeding. You may pass the chemicals from marijuana to your baby through breastmilk. A study (<https://pediatrics.aappublications.org/content/142/3/e20181076>) in the September 2018 *Pediatrics* confirms earlier findings (<https://www.ncbi.nlm.nih.gov/pubmed/29630019>) that THC can transfer into breastmilk. The AAP also reminds that a mother's ability to care for an infant may be impaired while using marijuana. Bottomline: If you are breastfeeding, don't use marijuana.

Tobacco, including e-cigarettes (</English/ages-stages/prenatal/Pages/E-Cigarette-Use-During-Pregnancy-Breastfeeding.aspx>). Inhaled nicotine enters a mother's blood through her lungs, and then easily passes into breastmilk. Research (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2277470/>) shows that nicotine in a mother's breastmilk can affect infant sleep pattern. Nicotine is also thought to decrease milk supply (</English/ages-stages/baby/breastfeeding/Pages/Decreased-Milk-Supply.aspx>) in nursing mothers, possibly by lowering levels of the breastmilk-stimulating hormone prolactin.

Note: Because of the many benefits breastfeeding has for infants and moms, the AAP and the ACOG recommend breastfeeding even if you continue to use e-cigarettes. If it's not the right time for you to quit, make a plan to reduce your baby's exposure to cigarette smoke. Learn more here (</English/ages-stages/prenatal/Pages/E-Cigarette-Use-During-Pregnancy-Breastfeeding.aspx>).

Additional Resources:

- HealthyChildren.org: Breastfeeding (</English/ages-stages/baby/breastfeeding/Pages/default.aspx>)
- The Transfer of Drugs and Therapeutics Into Human Breast Milk: An Update on Selected Topics (<http://pediatrics.aappublications.org/content/132/3/e796>) (AAP Clinical Report)
- LactMed (<https://toxnet.nlm.nih.gov/newtoxnet/lactmed.htm>), search "alcohol" (U.S. National Library of Medicine)
- The Basics of FASDs: Information for Families (https://www.aap.org/en-us/Documents/Basics_FASDs_Families_FASD_1-Page_Resource_FINAL_no_bleed.pdf) (PDF)
- Diagnosing FASDs: What Families Need to Know (https://www.aap.org/en-us/Documents/Diagnosing_FASDs_Families_FASD_1-Page_Resource_FINAL_no_bleed.pdf) (PDF)

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