



Every Baby Matters

Guidelines for good nutrition in Bradford and Airedale Diet after pregnancy and when breastfeeding

INTRODUCTION

After childbirth it is important to have a balanced diet to:

- replenish body stores for future pregnancies and long-term health
- help with weight management
- overcome any specific postnatal problems e.g. constipation, anaemia
- help meet the additional nutritional requirements of breastfeeding.

This can be a time when families are motivated to make changes to their lifestyle and health professionals and others working with them should take the opportunity to offer appropriate information and support on healthy eating and physical activity.

Nutritional needs **of women in the postnatal period** can be met by following the principles of healthy eating recommended for the general population whilst taking into account **some additional dietary issues which are relevant to this group**.

Detailed and practical advice about the five food groups and how to eat a healthy diet can be found in the Live Well section of the NHS choices website www.nhs.uk/Livewell and www.nhs.uk/Livewell/Goodfood/Pages/Healthyeating.aspx

Additional food and dietary considerations for women in the postnatal period are outlined below and include:

- eating well when recovering and caring for a baby
- extra nutrients for breastfeeding including calcium, iron, vitamins, fluids, special considerations for vegetarian and vegan mothers
- information about breastfeeding and specific foods/substances e.g. fish, caffeine, alcohol, tobacco, peanuts and infant reaction to maternal diet
- weight management after childbirth /and breastfeeding.

Those working with this group should also be familiar with local breastfeeding policies, guidelines and support as well as the Every Baby Matters guidelines for good nutrition for other groups especially:

- pregnancy - for information about iron containing foods and managing constipation
- preparing for a healthy pregnancy - many new parents may also be preparing for their next pregnancy at some point in the future and may then be seeking or receptive to information that they missed before or have forgotten.

EATING WELL AFTER HAVING A BABY

It is important to encourage women with a new baby to eat and drink fluids regularly, try to relax and include some physical activity daily to help them recover fully, keep well and cope with the extra demands they may be facing. They should be advised to aim for 3 meals per day and nutritious snacks as appropriate to appetite. Keeping meals simple can help to reduce preparation times. Women should be encouraged to seek help from family and friends with shopping and preparing meals.

Some simple practical suggestions for healthy meals and snacks:

- whole grain cereals with semi-skimmed milk and dried or chopped fruit
- toast with baked beans, cheese, tinned fish or scrambled eggs
- baked potato with baked beans, cheese or tinned fish and salad
- vegetable and bean soup or dahl with bread roll or chapatti
- low fat yoghurt with tinned fruit in juice
- fruit scone or currant bun with jam
- milky drink and a piece of fruit
- hummus with pitta bread and vegetable sticks.

ADDITIONAL ADVICE FOR BREASTFEEDING WOMEN

Most women will have the capacity to produce more breast-milk than is required. Any increased demand from the infant will be met by increased production by the woman.

In well nourished women, if the dietary intake of nutrients is inadequate to meet the requirements of breastfeeding then nutrients will generally be supplied from the mother's own body stores. However, even in well nourished women, there are some nutrients where the content in breast-milk is more dependent on dietary intake (for example some vitamins cannot be stored by the body). **It is therefore important that women don't restrict their food choices from the main 4 food groups.**

Women have an increased need for energy, protein and most vitamins and minerals during breastfeeding. Women need approximately 500 extra calories per day to meet the demands of breastfeeding. These requirements will usually be met by eating a balanced, varied diet and eating to appetite. There is no need to "eat for two" during breastfeeding. Increased energy requirements will also be met from fat stores gained during pregnancy and changes in metabolic rate.

Particular attention needs to be paid to the following nutrients and foods whilst breastfeeding:

CALCIUM

Calcium is essential for bone formation and women require 1250 mg per day for breastfeeding (i.e. 550 mg extra). This can be achieved by including 2-3 portions of dairy foods per day and regularly including other foods that are rich in calcium (eg tinned fish with bones such as sardines, pilchards or salmon, green leafy vegetables, white flour products, tofu, pulses).

IRON

Some women of child-bearing age have low iron levels and during pregnancy maternal stores may have been used to meet the needs of the foetus. It is therefore important that women are encouraged to include 2-3 portions of iron rich foods daily to replace these stores. These include meat, poultry, pulses, green leafy vegetables, soya products, eggs, nuts, wholegrains, dried fruit and iron-fortified breakfast cereals.

Vitamin C helps iron to be absorbed in the gut. Food and drinks rich in Vitamin C (eg fruit and fruit juices, potatoes, Vitamin C fortified squash, vegetables, salad) should be eaten at the same meals.

Foods and drinks containing tannin like substances (tea, coffee, chocolate, herbal teas, red wine and beer) should be avoided at the same meal as these greatly reduce the amount of iron absorbed.

VITAMIN D

Vitamin D is needed for the absorption of calcium and both of these are essential for normal teeth and bone development. Normally, the body meets its vitamin D requirement through exposure to sunlight and women should be encouraged to regularly expose skin in the spring and summer months for short periods of time to sunlight without sunscreen. Skin should always be protected before it starts to redden and burn. The darker the skin, the more exposure needed but all skin types should take great care not to burn.

Foods containing vitamin D naturally (e.g. fortified margarine, egg yolk, fortified breakfast cereal, oily fish and evaporated milk) should be encouraged but be aware that it is difficult to obtain enough vitamin D from diet alone.

Breast-milk may not provide adequate amounts of Vitamin D for infants, even in well nourished women. The Department of Health recommends that **pregnant and breastfeeding women should take a supplement of 10mcg per day**. Advice should be provided on the Healthy Start Scheme vitamins for women as some women will qualify for free vitamins until their child is one year old. For further information see www.healthystart.nhs.uk.

FLUID

Breastfeeding increases fluid requirements. Recommendations are to include **more than 6-8 glasses per day (1.2-1.6 litres)**. Water, unsweetened fruit juices and milk are good choices. Women should be encouraged to have a drink themselves whenever they settle to breastfeed.

FISH

All fish, white and oily, are good sources of protein and should be included as part of a varied and balanced diet. Recommendations are to include two portions of fish per week, one of which should be oily. The fats in oily fish are beneficial for brain and retinal development in infants and for women's long-term health. However breastfeeding women and females of childbearing age are advised to eat no more than two portions of oily fish per week (eg fresh tuna, salmon, mackerel, herrings, sardines, pilchards and trout) and no more than one portion of shark, swordfish or marlin per week due to levels of pollutants in these fish.

Any shellfish consumed should be cooked to avoid the risk of food poisoning from bacteria and viruses.

VEGETARIAN AND VEGAN DIETS

Special consideration should be given to women following vegetarian and vegan diets to ensure that they have adequate and varied sources of protein in their diet.

Vegan Protein Sources	Vegetarian protein sources
beans, pulses and lentils tofu tempeh nuts and seeds soya mince soya milk soya cheese soya yoghurt textured vegetable protein	All vegan sources plus: - cheese - milk - eggs - yoghurt - mycoprotein (Quorn)

Strict **vegan diets** avoid any animal products and Vitamin B12 is not found in any plant products. It is therefore important that vegan diets should contain vitamin B12 fortified foods e.g. Barmene or Tastex, Marmite or Vegemite (yeast extracts), fortified soya milk, fortified rice milk, fortified textured soya protein and fortified breakfast cereals.

A Vitamin B12 supplement is recommended for breast-feeding mothers following a vegan diet who do not regularly include these foods to ensure an adequate intake.

CULTURAL CONSIDERATIONS

It is important that health professionals and practitioners advising breastfeeding mothers are aware of the dietary customs of different ethnic groups and are sensitive to any cultural beliefs about diet for breastfeeding

WOMEN AT PARTICULAR NUTRITIONAL RISK DURING BREASTFEEDING

Some breast-feeding women may be particularly vulnerable to nutritional deficiency or have increased requirement and attention should be given to encouraging an adequate diet in these women- see list below). The quantity of breast-milk produced and the nutrient content can be affected if women are malnourished or follow unusually restrictive diets. These women should be especially targeted and referred for specific dietetic advice.

- teenagers
- overweight and obese women
- underweight women
- black and minority ethnic groups
- low income
- vegetarians and vegans
- food allergy
- eating disorders
- substance abuse – drugs, alcohol
- pre-existing medical condition – eg diabetes, coeliac, PKU, Crohn's
- women with closely spaced pregnancies.

SMOKING

Nicotine is passed into breast milk and so smoking should be avoided.

ALCOHOL AND CAFFEINE

Small amounts can pass into breast milk and affect mother and baby's feeding, sleeping or digestion.

Caffeine - Breastfeeding women should be advised to limit their intake of caffeine containing drinks having them occasionally rather than every day (eg tea, coffee, cola and energy drinks)

Alcohol – Women should drink no more than 1-2 units once or twice a week. They should be advised to avoid getting drunk and if they have more than 1 or 2 units to wait at least an hour before feeding their baby to allow the alcohol level to reduce.

PEANUTS AND FOODS CONTAINING PEANUTS

Current advice is that breastfeeding women who would like to eat peanuts can do so, unless they themselves are allergic to them.

INFANT REACTION TO MATERNAL DIET

Breastfeeding women should not be advised to avoid particular foods as a precaution. Occasionally an infant appears to have an adverse reaction to a food in the mother's diet. The food can be removed for a few days to see if there is an improvement. If a food is excluded for longer, care needs to be taken to ensure that any key nutrients are replaced. Dietetic advice may be necessary especially if a whole food group or many foods are excluded.

WEIGHT MANAGEMENT AFTER CHILDBIRTH (based on NICE 2010)

The 6-8 week postnatal check is an opportunity for health professionals to weigh, measure and check women's BMI. This needs to be done sensitively and the results discussed to highlight the benefits of achieving a healthy weight. For women who are overweight or obese, advice and support should be offered about how to lose weight safely. If women are not ready to change yet NICE recommends that a further appointment should be offered in 6 months.

Discussions should include practical advice about healthy eating and moderate physical activity (eg 30 minute brisk walk) in order to achieve a gradual weight loss of 0.5 to 1kg per week. Any advice given should be tailored to the individual's circumstances (demands of caring for a new baby, other children, any health issues) and ensure that women are realistic about the time period required to achieve a healthy weight.

Dietary advice for weight loss should be based on the principles of the Eatwell Plate and women advised of reliable sources of information such as as the Eatwell website (www.nhs.uk/Livewell/Goodfood/Pages/Healthyeating.aspx) or the 'Birth to five' book (available free /downloadable from the Department of Health).

See appendix 1 for more information about national NICE guidance that should be followed regarding weight management before, during and after pregnancy including a summary of key principles about:

- achieving and maintaining a healthy weight**
- effective weight loss programmes**
- evidence based behaviour change advice.**

WEIGHT MANAGEMENT AND BREASTFEEDING

Breastfeeding can help with weight loss after childbirth as it uses fat reserves that were built up during pregnancy for this purpose.

Women who need to lose weight after pregnancy should be encouraged to breastfeed. They should be reassured that gradually losing excess weight by eating a balanced diet and including regular physical activity of moderate intensity will not affect the quantity and/or quality of their breast-milk.

Breastfeeding women should avoid any overly restrictive or extreme diets for weight loss as these can compromise nutrient intake, which may result in maternal stress, tiredness and affect milk production.

Women attending a structured weight loss programme should be advised to ensure the leader knows that they are breastfeeding.

WOMEN WITH A BMI OF 30 OR MORE

These women should be targeted for more specific advice and provided with information about the increased risks to themselves and their babies during pregnancy and childbirth from excess weight. Women should be encouraged to achieve a healthier weight before becoming pregnant again.

Women can be encouraged to join a structured weight loss programme such as a community weight management group or appropriate commercial slimming club. These should offer advice and support that follows NICE guidance, providing tailored advice about diet and physical activity and ongoing support that addresses barriers to change. Health professionals should

- inform women of appropriate services in the local area
- continue to monitor and offer support to those women who choose to use a weight management group or slimming club.

It may be more appropriate to offer a referral to a registered dietitian for a more detailed assessment, individualised plan and use of behaviour change strategies to motivate and support weight loss.

If women aren't ready to make changes, health professionals should ensure they provide information about how to access support when they are ready.

PHYSICAL ACTIVITY

Women should check with their GP, midwife or health visitor before resuming regular exercise.

Taking some regular physical activity can help to relieve stress and improve energy and sleep levels as well as contributing to weight loss.

Practical ideas for physical activity following childbirth include:

- **Postnatal exercise classes** – local maternity units may offer classes or health visitors may be able to advise about local classes.
- **Swimming**
- **Play games with older children**
- **Have a brisk walk with the pram or buggy** – it is important to keep a straight back
- Make activities enjoyable and part of everyday life.

More ideas and information about when to start exercising and what is safe can be found in the Birth to Five book available free from the Department of Health
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_107303

If women join an organised physical activity class they should advise the person running the class that they have recently had a baby.

KEY SOURCES AND RESOURCES

Department of Health: Birth to Five 2009

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_107303

European Society for Paediatric Gastroenterology, Hepatology and Nutrition. Committee on Nutrition: Breastfeeding Commentary
Agostoni,C. Decsi,T. et al, Journal of Pediatric Gastroenterology and Nutrition 49:112–125 2009

NICE Public Health guidance 11 -Improving the nutrition of pregnant and breastfeeding mothers and children in low-income households March 2008
www.nice.org.uk/PH011

NICE Public Health Guidance 27 -Dietary interventions and physical activity interventions for weight management before, during and after pregnancy July 2010 www.nice.org.uk/guidance/PH27

Scientific Advisory Committee on Nutrition (SACN), Committee on Toxicity (COT). Advice on fish consumption: benefits and risks. 2004
http://www.sacn.gov.uk/pdfs/fics_sacn_advice_fish.pdf

Scientific Advisory Committee on Nutrition (SACN)

Update on Vitamin D Position Statement 2007

http://www.sacn.gov.uk/pdfs/sacn_position_vitamin_d_2007_05_07.pdf

Detailed and practical advice about the five food groups and how to eat a healthy diet can be found in the Live Well section of the NHS Choices website:
www.nhs.uk/Livewell and
www.nhs.uk/Livewell/Goodfood/Pages/Healthyeating.aspx

Link to new NHS Choices pregnancy hub:

www.nhs.uk/Livewell/pregnancy/pages/pregnancyhub.aspx

Healthy Start website (including sections and resources for parents and health workers) <http://www.healthystart.nhs.uk/>

APPENDIX 1 Weight management before, during and after pregnancy –additional information

Author: Bradford Dietitians, Bradford Teaching Hospitals NHS Foundation Trust

Date: April 2011

Review due: December 2015