



ILCA's INSIDE TRACK

a resource for breastfeeding mothers

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Does My Breastfed Baby Need Extra Vitamin D?

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Breast milk is all that babies need for the first 6 months of life—or is it?! It's true that exclusively breastfed babies don't need to eat anything for 6 months except for breast milk (they don't need formula, solid foods, or water). But infant feeding experts in the United States and many other countries say you should give extra vitamin D starting soon after birth. So if breast milk is perfect—why do babies need vitamin D as well?

First, all babies need vitamin D, not just breastfed babies.¹ Formula fed babies get vitamin D too, but in their case it's added to the formula. Some studies show that if mothers take very high levels of vitamin D supplements, the vitamin D level in their milk goes up. Most women don't have high enough vitamin D levels to let them "supplement" their babies through their own milk though, so breastfed babies have to get it separately.

Why do babies need "extra" vitamin D?

- All babies need vitamin D for normal growth and development.
- Lack of vitamin D can lead to rickets—a painful disease that leads to soft bones and bow legs or knock knees. Some babies with rickets might have seizures ("fits") too.
- Vitamin D is made by the skin in sunlight. There are lots of reasons babies might not get enough sunlight to make vitamin D. Using sunscreen, which many medical groups advise to prevent skin cancer in the future, is one such reason.

Rickets was common in Western countries in the early 1900s. It almost disappeared after scientists discovered vitamin D and added it to many animal and soy milks, which went a long way toward protecting people. But rickets seems to be making a comeback in some places.²

You should know that *mothers* need vitamin D as well! Vitamin D deficiency is quite common in women of child

bearing age,³ and it brings a lot of long- and short-term health risks. These include poor immunity, higher risks for some cancers, and bone problems. Some women are higher risk than others.

You might be at risk for vitamin D deficiency if:

- You live in a far northern or southern country and don't get much sun.
- You live in an unsafe area, and don't go outside very much.
- You work in a job with long hours, and don't see a lot of daylight.
- You live in a hot, sunny climate, but spend most of your time inside in an air-conditioned or shaded place.
- You don't drink milk that has added vitamin D.
- You wear clothes that cover up most of your body, most of the time (like being covered for religious reasons or living in cold climates).
- You have dark skin and don't get much sun, because dark skin needs more sunshine than light skin to make vitamin D. Dark-skinned Muslim women who cover up for religious reasons, and live in the United Kingdom, for example, are at a very high risk of vitamin D deficiency.

Your baby might be at risk of vitamin D deficiency if:

- You don't give her or him a vitamin D supplement from the early weeks of life.
- She or he is born before 37 weeks of pregnancy.
- She or he is born at the end of the winter/early spring.
- You keep her or him wrapped up most of the time.



- She or he spends most of the time indoors.
- You are vitamin D deficient.

Did you know?

- Rickets used to be called *the English disease*. There's not a lot of sun in England!
- Cod liver oil prevents rickets and so is often given to children—despite the nasty taste! At first no one knew why cod liver oil worked.
- “Vitamin” D isn't really a vitamin, it's a hormone.

Because experts say you should give your baby vitamin D, it doesn't mean your breast milk is lacking in something. Breast milk doesn't contain much vitamin D, but few foods do—humans should be getting most vitamin D from the sun. It's our modern living style, more than our diet, that usually leads to low levels. Taking the baby outside even for short periods of time in sunshine can raise vitamin D levels very well,⁴ but experts say too much sunshine may mean future skin cancer risks.

To follow the U.S. expert advice, all babies should get a vitamin D supplement of 400 IU per day, starting soon after birth.¹ Depending on where you live, you might get this as a vitamin-D-only supplement, a multivitamin, or a skin patch. Talk to your doctor or your IBCLC about guidelines in your country, and how you can give the extra vitamin D. And don't forget about yourself. Especially if you are “high risk”—and even if you are not!—talk to your doctor about getting a simple blood test to check out your level. Taking a prenatal vitamin can help, but even that is not enough for many women who will need extra supplements.

References

1. Wagner CL, Greer FR. Prevention of rickets and vitamin d deficiency in infants, children, and adolescents. *Pediatrics*. 2008;122(5):1142-1152.
2. Wharton B, Bishop N. Rickets. *Lancet*. 2003;362(9393):1389-1400.
3. Merewood A, Mehta SD, Grossman X, et al. Widespread vitamin D deficiency in urban Massachusetts newborns and their mothers. *Pediatrics*. 2010;125(4):640-647.
4. Merewood A, Mehta SD, Grossman X, et al. Vitamin D status among 4-month-old infants in New England: a prospective cohort study. *J Hum Lact*. 2012;28(2):159-166.

Find Help Fast

An IBCLC is an “International Board Certified Lactation Consultant:” someone with special training to help breastfeeding families. Go to “Find a Lactation Consultant” at www.ilca.org, to locate a lactation consultant in your area. You can also ask your doctor or a nurse at your hospital.

Your local lactation consultant: