**Breastfeeding with MS**

MS does not affect the production of breast milk or a woman’s ability to breastfeed.

**Does breastfeeding affect MS?** Most studies show that women who breastfeed have fewer MS attacks. They have fewer attacks even if they are not on disease-modifying therapies.

**Should disease-modifying therapies be used during breastfeeding?** The safety of these medications during breastfeeding has not been studied. Therefore, it is recommended that these medicines not be used during breastfeeding.

However, it is known that MS attacks increase in the first three months after delivery. About 1/3 of women will have an attack in the first three months after delivery. This increase in attacks can be partially countered by breastfeeding which decreases attacks.

In general, disease-modifying therapies are not excreted into the breast milk, and taking the medicines orally is not effective. The risk to the baby of consuming small amounts of the medicines orally is likely very low.

Each woman must balance the risk of MS attacks and the risk to the baby of ingesting medications.

**How are MS attacks treated during breastfeeding?** Minor attacks may not need treating if the symptoms are not too uncomfortable.

For more severe attacks, corticosteroids are used. These have not been studied during breastfeeding and small amounts of the drug are excreted into the breast milk. If corticosteroids are needed during breastfeeding, most physicians recommend that the mother "pump and dump" the breast milk while on the corticosteroids, and for 1-2 days after the steroids are stopped. In general, three days of corticosteroids are used without an oral taper afterwards to minimize the time on the medicine.

**Can attacks be prevented during breastfeeding?** Breastfeeding itself seems to decrease the risk of MS attacks.

Some women choose to be treated with disease-modifying therapies despite breastfeeding, though this has not been studied sufficiently.

IVIg (intravenous immunoglobulin) has been used after delivery to decrease the chance of having MS attacks. This appears to be safe with breastfeeding, but its effectiveness is uncertain and it is expensive.
How long should I breastfeed? During the first few days after delivery, the breast milk contains a high amount of antibodies that are useful in helping the baby fight infections. The amount of these antibodies starts decreasing after about 5 days, but the milk continues to have antibodies for about 6 weeks. After that, the antibody level is lower. Solid foods are usually introduced after about 6 months.

There is no correct length of breastfeeding. Women usually decide whether to breastfeed or not while pregnant, and then decide how long to breastfeed after delivery. There are many factors to consider including work schedules, whether the mother enjoys breastfeeding, whether the baby is more interested in bottles or breastfeeding, when the baby is ready for solid food, as well as many others.