

Re: “Potentially Toxic Foods While Breastfeeding: Garlic, Caffeine, Mushrooms, and More” by Anderson (*Breastfeed Med* 2018;13(10):642–644)

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Dear Editor:

DR. ANDERSON SEEMS TO INCLUDE COCOA, coffee, tea, and yerba mate among the potentially toxic foods while breastfeeding in his article, “Potentially Toxic Foods While Breastfeeding: Garlic, Caffeine, Mushrooms, and More.”¹ Although he accepts that with typical intakes, the amount of caffeine present in breast milk is not sufficient to cause an effect on the infant, he warns about the effects of any maternal intake of caffeine on breastfed neonates or of extreme maternal caffeine intake on older breastfed infants.

His opinion is based upon seven clinical cases, in which mothers’ consumption varies between 20 cups of coffee per day (equivalent to 3,000 mg of caffeine) and 2 L of decaffeinated coffee per day (equivalent to 20 mg of caffeine). Within this small sample, breastfed infants’ symptoms vary from trembling to convulsive-like episodes.

A recent systematic review² contradicts Anderson’s warnings and highlights that this is another case of evidence saying no, but doctors saying yes. The review analyzes data from five studies ($n = 1,605$ patients) published in the past 30 years, and has found that heavy caffeine consumption (300–500 mg daily) by nursing mothers does not have consequences on heart rate or sleep of infants. In contrast, the uptake of caffeine by breast milk has been extensively studied³; the intake of caffeine by babies whose nursing mothers’ intake was 500 mg per day has been estimated to be as low as 0.3–1.0 mg/(kg·d).⁴

Caffeine is the most commonly used psychoactive substance in the world. Most breastfeeding mothers will ingest some quantity of coffee or tea daily.⁵ In fact, perinatal prevalence of caffeine consumption is almost universal. More specifically, detectable amounts of caffeine have been found in almost all donor milk samples (97%).

As far as we know, evidence-based nutritional guidelines for nursing mothers are still lacking. Therefore, if the mother has healthy eating habits, there is no reason to change them during breastfeeding. Without a scientific basis, restrictive popular myths or medical warnings about diet for nursing mothers can be too hard to follow and become barriers to

breastfeeding. The most commonly restricted foods are caffeine and spicy foods, and more than a third of surveyed breastfeeding mothers have reported discomfort due to food restriction.⁶

In conclusion, we think that it is time to stop attributing harm to caffeine in breast milk because this recommendation might produce harm rather than avoid it.

References

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