

Parental Weight Concerns During Lactation

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IABLE
Institute for the Advancement
of Breastfeeding &
Lactation Education
Lacted.org



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Learning Objectives

Recognize	Recognize the unique challenges, barriers, and successes faced by individuals with diverse weight backgrounds during their breastfeeding journey.
Identify	Identify the relationship between prenatal weight, milk production, and nutrient composition.
Recall	Recall successful strategies to support breastfeeding across a diverse population of individuals with varying body weights.
Describe	Describe evidence-based guidelines and best practices related to maternal weight and breastfeeding.

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Table of Contents

- Why is this topic important?
- Weight gain guidelines during pregnancy
 - Trends in weight gain
- The relationship between weight and lactation outcomes: underweight, normal weight, overweight/obese
 - Nutritional composition of milk
 - Evidence-based guidelines
- Successful strategies for support



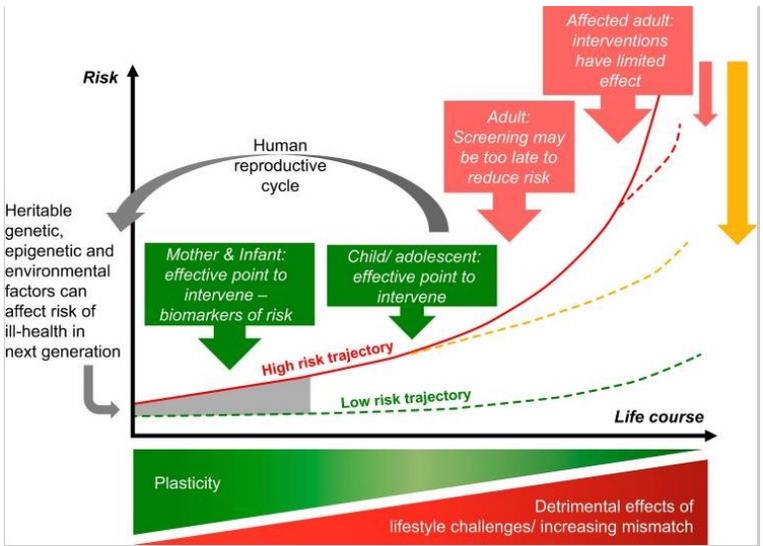
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Why is this topic important?



4

Lifecourse Perspective: Critical Windows Shaping an Individual's Health Trajectory



Hanson and Gluckman (2014) *Physiol Rev.*



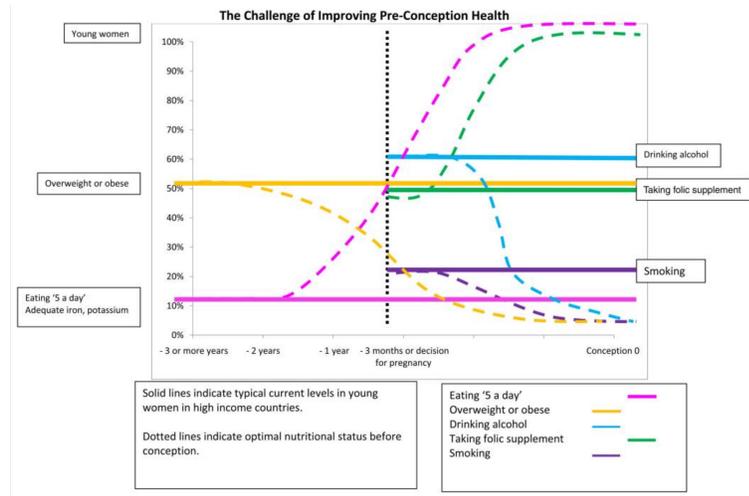
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Preconception Health



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The Challenge of Improving Pre-Conception Health



Stephenson, et al (2018). *Lancet*.

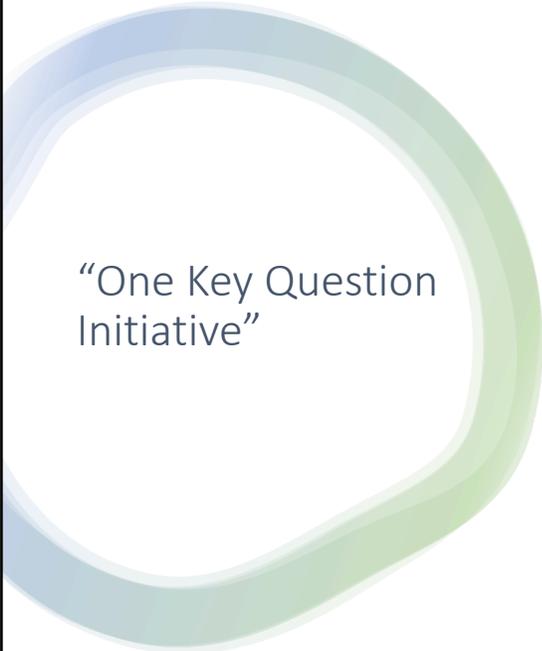


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Resources for Preconception Health



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“One Key Question Initiative”

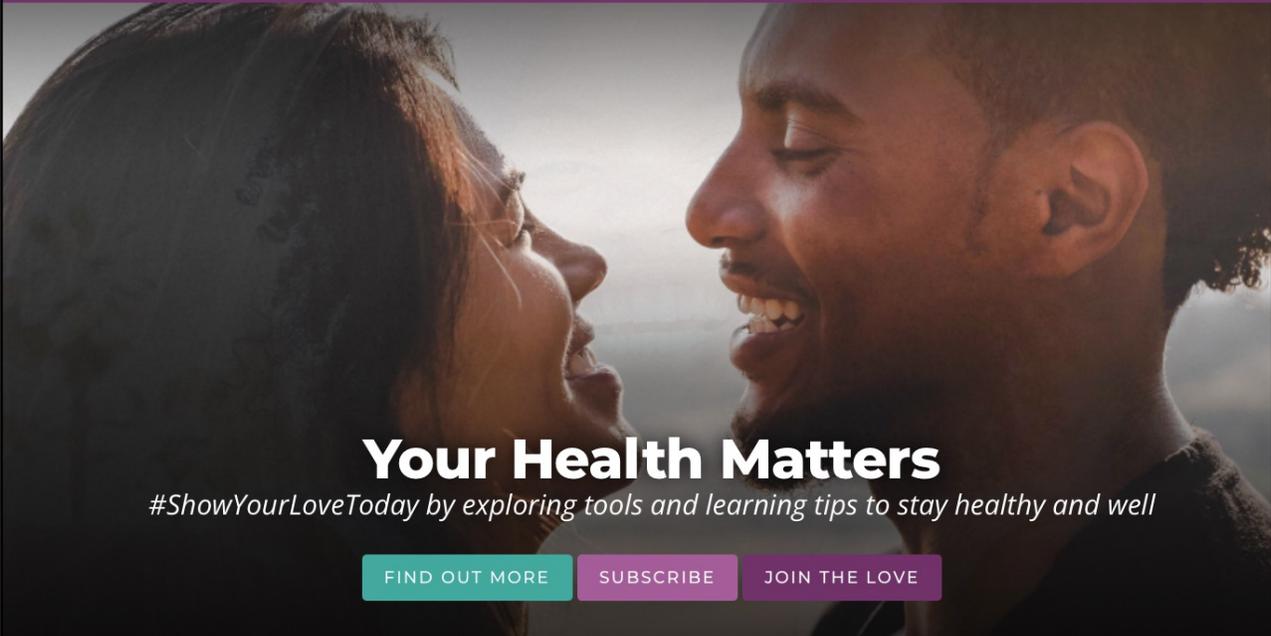
Screening for a Patient’s Pregnancy intentions

- “Would you like to become pregnant in the next year?”

ACOG Committee Opinion No. 762: Prepregnancy Counseling (2019)

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Wellness Resources Health Visit 101 Join the Love Who We Are Es

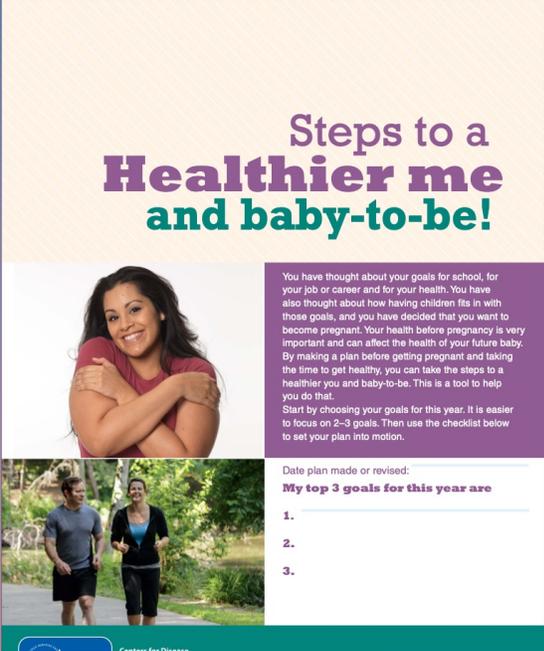


Your Health Matters

#ShowYourLoveToday by exploring tools and learning tips to stay healthy and well

FIND OUT MORE SUBSCRIBE JOIN THE LOVE

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Steps to a Healthier me and baby-to-be!

You have thought about your goals for school, for your job or career and for your health. You have also thought about how having children fits in with those goals, and you have decided that you want to become pregnant. Your health before pregnancy is very important and can affect the health of your future baby. By making a plan before getting pregnant and taking the time to get healthy, you can take the steps to a healthier you and baby-to-be. This is a tool to help you do that. Start by choosing your goals for this year. It is easier to focus on 2-3 goals. Then use the checklist below to set your plan into motion.

Date plan made or revised: _____

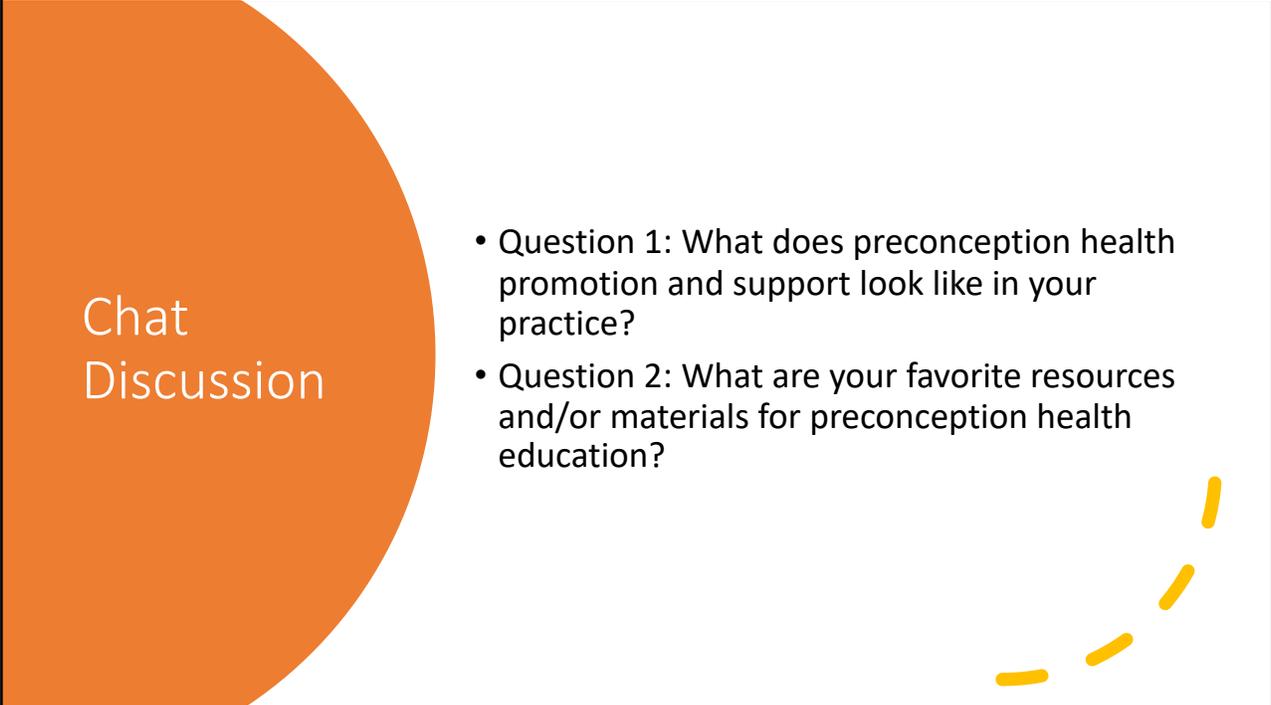
My top 3 goals for this year are

1. _____
2. _____
3. _____

Centers for Disease Control and Prevention

- Link to CDC's Pregnancy Planner: https://www.cdc.gov/pregnancy/meda/pdfs/Pregnancy_Planner_508.pdf
- Additional Pre-pregnancy Planning information through the CDC: <https://www.cdc.gov/pregnancy/about/index.html>

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Chat Discussion

- Question 1: What does preconception health promotion and support look like in your practice?
- Question 2: What are your favorite resources and/or materials for preconception health education?

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Weight Gain Guidelines During Pregnancy, Trends in the US, and Challenges



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IOM Weight Gain Guidelines during Pregnancy³

Table 1. Institute of Medicine Weight Gain Recommendations for Pregnancy [↔](#)

Prepregnancy Weight Category	Body Mass Index*	Recommended Range of Total Weight (lb)	Recommended Rates of Weight Gain [†] in the Second and Third Trimesters (lb) (Mean Range [lb/wk])
Underweight	Less than 18.5	28–40	1 (1–1.3)
Normal Weight	18.5–24.9	25–35	1 (0.8–1)
Overweight	25–29.9	15–25	0.6 (0.5–0.7)
Obese (includes all classes)	30 and greater	11–20	0.5 (0.4–0.6)

*Body mass index is calculated as weight in kilograms divided by height in meters squared or as weight in pounds multiplied by 703 divided by height in inches.

[†]Calculations assume a 1.1–4.4 lb weight gain in the first trimester.

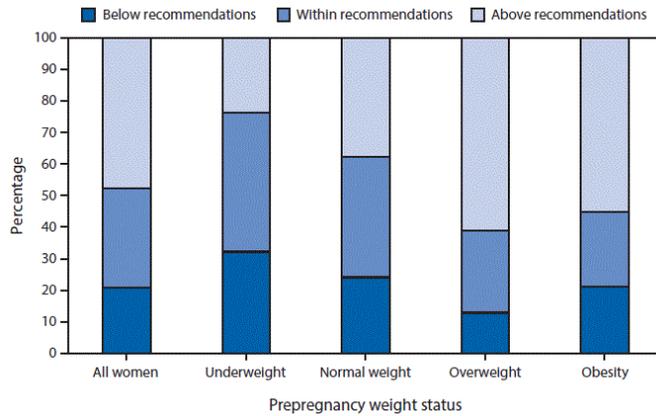
Modified from Institute of Medicine (US). Weight gain during pregnancy: reexamining the guidelines. Washington, DC: National Academies Press; 2009. ©2009 National Academy of Sciences.



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Percentage of Women who Gained Recommended Weight During Pregnancy⁴

- According to the Centers for Disease Control (CDC), in 2015:
 - 32% of women gained the recommended amount of weight during pregnancy
 - 21% gained too little weight
 - 48% gained too much weight



Quick Stats: Gestational Weight Gain. (2016). *Morbidity and Mortality Weekly Report*

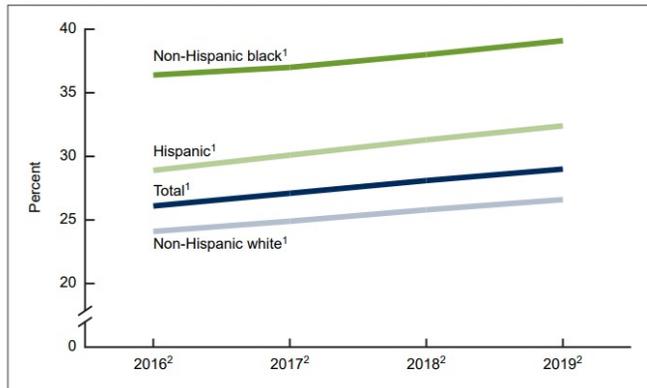
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Increases in Pre-pregnancy Obesity: US 2016-2019

- Pre-pregnancy obesity in the United States rose from 26.1% in 2016 to 29.0% in 2019
- From 2016 through 2019, pre-pregnancy obesity increased among women of all ages and was lowest for women under age 20 (20.5% in 2019)
- From 2016 through 2019, women with less than a bachelor's degree were more likely to have pre-pregnancy obesity than those with a bachelor's degree or higher
- Compared with 2016, pre-pregnancy obesity rose in every state but Vermont in 2019

Prepregnancy obesity in the United States rose overall and for the three largest race and Hispanic-origin groups from 2016 through 2019.

Figure 1. Prepregnancy obesity, by maternal race and Hispanic origin: United States, 2016–2019



Driscoll A & Gregory E. (2020) *National Center for Health Statistics Data Brief*



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Postpartum Weight Retention Risk Factors and Relationship to Obesity at One Year

Approximately 75% of women were heavier 1 year postpartum compared to pre-pregnancy weight

About 50% retained 10+ pounds, with 1 in 4 retaining 20+ pounds, at one year postpartum.

Race and socioeconomic disparities were associated with high pre-pregnancy BMI and excessive weight gain during pregnancy

Among the ~40% with normal pre-pregnancy BMI, ~66% became overweight within 1 year postpartum

Breastfeeding for 6 months and participating in moderate exercise reduced the likelihood of retaining weight gained during pregnancy at 1 year postpartum

Endres et al. (2015) *Obstet Gynecol.*



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Case Scenario1: Part 1 Chatbox Discussion

Olivia is 29 years old with a pre-pregnancy BMI of 27. She is currently 30 weeks pregnant and has gained 19 lbs. Based on the Institute of Medicine guidelines for gestational weight gain, how would you evaluate Olivia's weight gain so far?

Discussion Question:

Would you recommend any changes or considerations for the remainder of her pregnancy?



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Nutritional Intake During Pregnancy

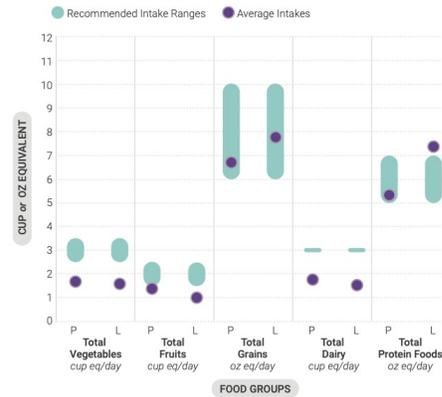


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Current Nutritional Intakes: Individuals who are Pregnant or Lactating

Current Intakes: Women Who Are Pregnant or Lactating

Average Daily Food Group Intakes Compared to Recommended Intake Ranges



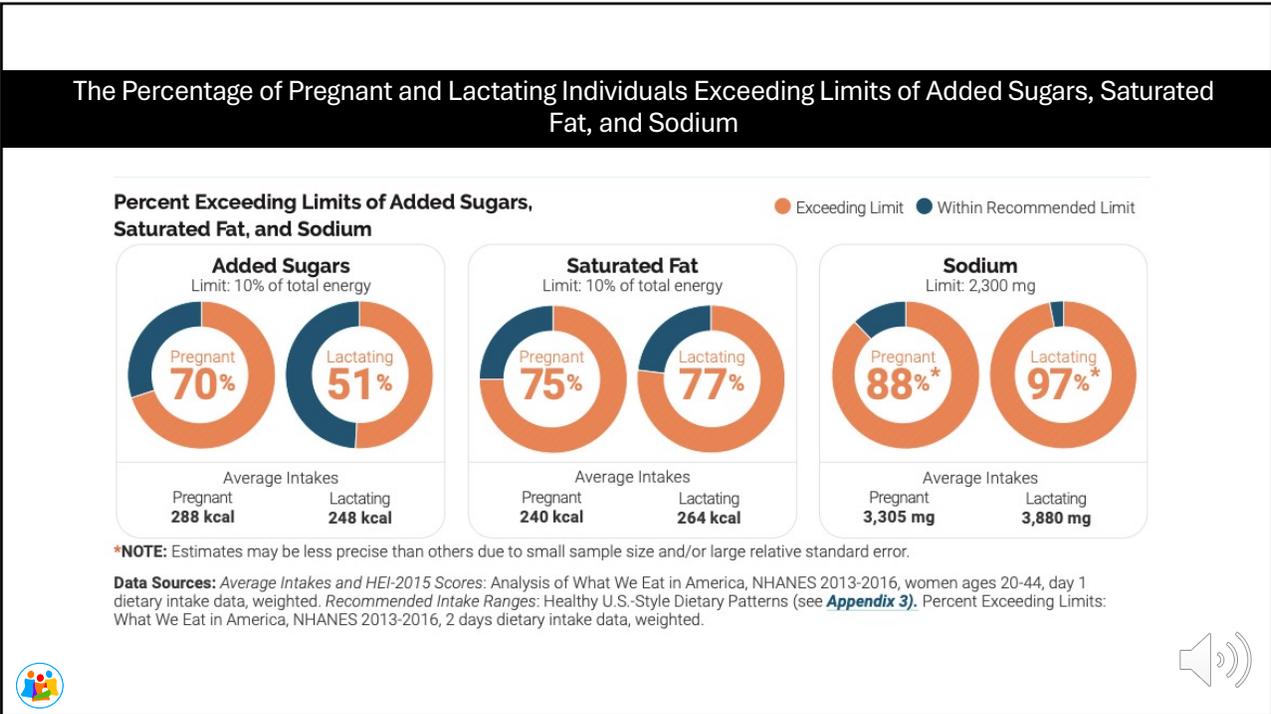
Healthy Eating Index Score (on a scale of 0-100)



2020-2025 Dietary Guidelines for Americans



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Estimated Change in Calorie Needs During Pregnancy and Lactation for Women With a Healthy^a Prepregnancy Weight

Stage of Pregnancy or Lactation	Estimated Change in Daily Calorie Needs Compared to Prepregnancy Needs
Pregnancy: 1 st trimester	+ 0 calories
Pregnancy: 2 nd trimester	+ 340 calories
Pregnancy: 3 rd trimester	+ 452 calories
Lactation: 1 st 6 months	+ 330 calories ^b
Lactation: 2 nd 6 months	+ 400 calories ^c

^a These estimates apply to women with a healthy prepregnancy weight. Women with a prepregnancy weight that is considered overweight or obese should consult their healthcare provider for guidance regarding appropriate caloric intake during pregnancy and lactation.

^b The EER for the first 6 months of lactation is calculated by adding 500 calories/day to prepregnancy needs to account for the energy needed for milk production during this time period, then subtracting 170 calories/day to account for weight loss in the first 6 months postpartum.

^c The EER for the second 6 months of lactation is calculated by adding 400 calories/day to prepregnancy needs to account for the energy needed for milk production during this time period. Weight stability is assumed after 6 months postpartum.

NOTE: Estimates are based on Estimated Energy Requirements (EER) set by the Institute of Medicine. Source: Institute of Medicine. *Dietary Reference Intakes for Energy, Carbohydrate, Fiber, Fat, Fatty Acids, Cholesterol, Protein, and Amino Acids*. Washington, DC: The National Academies Press; 2005.

2020-2025 US Dietary Guidelines For Americans

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Chat Discussion: What are your favorite nutrition conversation starters that are not on this list?

TABLE 4

Nutrition conversation starters

- Tell me about the foods you usually eat.
- Are there foods that you tend to avoid?
- Do you prepare your own food?
- How many times a week do you eat foods that you did not prepare yourself?
- Do you think you eat a healthy diet? Why or why not?
- When asked about GWG, respond with "How do you feel about your food intake?" Strategize about ways to improve nutrition for maternal and fetal health and appropriate GWG.

Food insecurity statements to ask

- Within the past 12 mo, we worried whether our food would run out before we got money to buy more.
- Within the past 12 mo, the food we bought just did not last and we did not have the money to get more.

GWG, gestational weight gain.

Marshall. Nutrition in pregnancy: lifelong consequences. Am J Obstet Gynecol 2022.

Marshall et al. (2022) *AJOG*

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Poll Question

Among the following stages of pregnancy and lactation, which stage has the highest daily calorie requirements compared to pre-pregnancy energy requirements?

- Pregnancy 1st trimester
- Pregnancy 2nd trimester
- Pregnancy 3rd trimester
- Lactation 1st 6 months
- Lactation 2nd 6 months

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Case Scenario 1: Part 2 Chatbox Discussion

Olivia is now 32 weeks pregnant. She wants to stay within the recommended weight gain range and asks for help meeting her nutritional goals. She currently eats three meals and one snack per day and walks for 30 minutes most days. Lately, she has been feeling hungrier at night.

Discussion Question

Based on your understanding of caloric needs in the third trimester and her target weight gain of 0.6 pounds per week, how many additional calories should Olivia aim to consume each day?



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The Relationship Between Weight and Lactation Across Diverse Body Types

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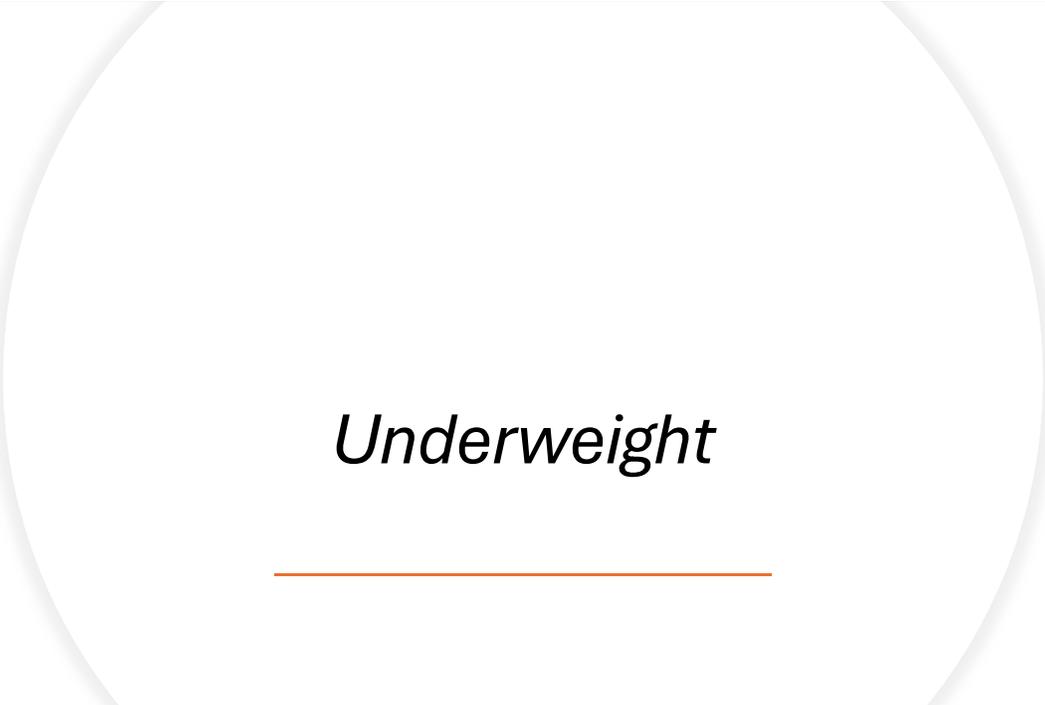


Principles of Health at Every Size®

- Healthcare is a human right for people of all sizes, including those at the highest end of the size spectrum.
- Wellbeing, care, and healing are resources that are both collective and deeply personal.
- Care is fully provided only when free from anti-fat bias and offered with people of all sizes in mind.
- Health is a sociopolitical construct that reflects the values of society.

<https://asdah.org/haes/>

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Underweight



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Nutritional Considerations for Underweight

- Consume an extra 500-600 calories if underweight post-partum
- Explore the root cause of low BMI
- Risk factors for deficiency:
 - Protein-energy malnutrition
 - Fat intake mainly from saturated fat sources
 - Low intake of fatty fish or other sources of omega 3 fatty acids
 - Family history of neural tube defects or low folate diet
 - Vegetarian diets
 - Malabsorption disorders
 - Low intake of dairy products
- Nutritional recommendations:
 - Focus on nutrient-dense foods
 - Increase the frequency of meals
 - Colorful fruits and vegetables
 - May need protein and/or vitamin and mineral supplements

Hanson et al (2015). *International J of Gynecology and Obstetrics*



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Food group targets for a 2,200-calorie* pattern are:	Write down your food choices for each food group.	Did you reach your target?
 2 cups 1 cup of fruits counts as <ul style="list-style-type: none"> • 1 cup raw or cooked fruit; or • ½ cup dried fruit; or • 1 cup 100% fruit juice. 	_____ _____ _____	Yes ___ No ___
 3 cups 1 cup of vegetables counts as <ul style="list-style-type: none"> • 1 cup raw or cooked vegetables; or • 2 cups leafy salad greens; or • 1 cup 100% vegetable juice. 	_____ _____ _____	Yes ___ No ___
 7-ounce equivalents 1 ounce of grains counts as <ul style="list-style-type: none"> • 1 slice bread; or • 1 ounce ready-to-eat cereal; or • ½ cup cooked rice, pasta, or cereal. 	_____ _____ _____	Yes ___ No ___
 6-ounce equivalents 1 ounce of protein foods counts as <ul style="list-style-type: none"> • 1 ounce seafood, lean meats, or poultry; or • 1 egg; or • 1 Tbsp peanut butter; or • ¼ cup cooked beans, peas, or lentils; or • ½ ounce unsalted nuts or seeds. 	_____ _____ _____	Yes ___ No ___
 3 cups 1 cup of dairy counts as <ul style="list-style-type: none"> • 1 cup dairy milk or yogurt; or • 1 cup lactose-free dairy milk or yogurt; or • 1 cup fortified soy milk or yogurt; or • 1½ ounces hard cheese. 	_____ _____ _____	Yes ___ No ___

What is My Plate? (2020). U.S Department of Agriculture



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How to Increase Caloric Intake

- Adding 500-600 calories to the diet could be achieved by incorporating various nutrient-dense foods throughout the day
 - At breakfast, add a serving of whole-grain toast topped with 1 TB peanut butter or one serving of yogurt topped with 1 C of berries or one additional glass of milk
 - For snacks, include ¼ C to ½ C of nuts or a piece of fruit with one TB of nut butter
 - For lunch/dinner, consider adding a serving of lean protein or fish accompanied by a larger portion of whole grains and an additional serving of vegetables
- Overall, focusing on nutrient-dense foods like lean protein, whole grains, healthy fats, and plenty of fruits and vegetables can help increase caloric needs while also providing essential nutrients



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Case Scenario 2: Chatbox Discussion

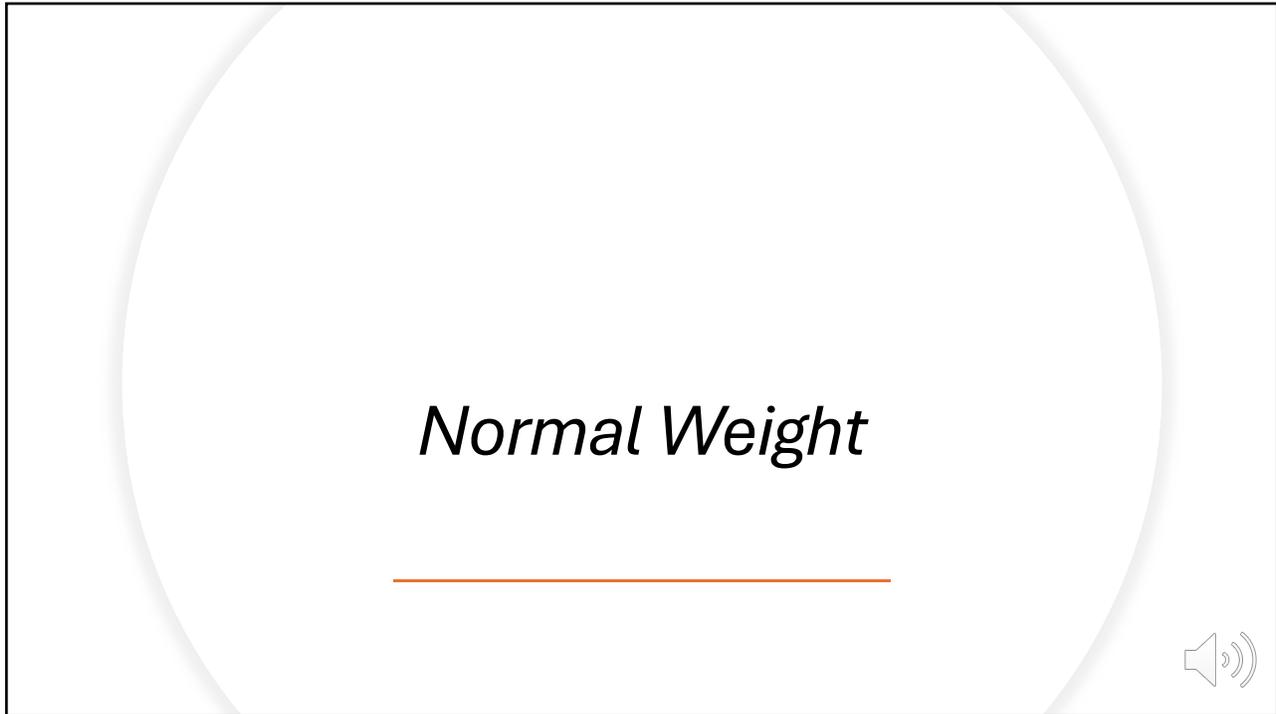
- Dawn is 27 years old and currently in her second trimester (approximately 16 weeks pregnant) with her second child. Her pre-pregnancy BMI was 18.0.

Discussion Questions:

- **Q1:** Based on IOM guidelines, how much weight gain is recommended for this pregnancy?
- **Q2:** What nutrition strategies, referrals, or assessment considerations would you recommend to support Dawn's health and fetal development?



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Nutritional Implications of Human Breast Milk

1. Nutritional components

← Colostrum vs. Mature breast milk →

2. Minerals and Vitamins

■ Colostrum ■ Mature breast milk

◀ recommended level
Vitamin D & K are deficient in human breast milk

3. Hormones and Growth factors

EGF, IGF-1/2, VDFG, Epo, Adiponectin
BDNF, GDNF, CNTF

Kim, S. Y. et al. (2020). *Clinical and Experimental Pediatrics*;

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Evidence-Based Guidelines¹⁴

- Add 330-400 kcal per day throughout first-year postpartum
- Increase consumption of:
 - Iodine
 - Choline

Estimated Change in Calorie Needs During Pregnancy and Lactation for Women With a Healthy^a Prepregnancy Weight

Stage of Pregnancy or Lactation	Estimated Change in Daily Calorie Needs Compared to Prepregnancy Needs
Pregnancy: 1 st trimester	+ 0 calories
Pregnancy: 2 nd trimester	+ 340 calories
Pregnancy: 3 rd trimester	+ 452 calories
Lactation: 1 st 6 months	+ 330 calories ^b
Lactation: 2 nd 6 months	+ 400 calories ^c

14. Dietary Guidelines for Americans. (2020). *United States Department of Agriculture*



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Choline + Iodine



Iodine Rich Foods

Cod, 3 oz (97% DV)
 Yogurt, Greek ¾ cup (58% DV)
 Iodized table salt, ¼ tsp (52% DV)



Choline Rich Foods

Beef Liver, 3 oz (65% DV)
 Eggs, 1 large hard boiled (27% DV)
 Soybeans, roasted ½ cup (19% DV)
 Fish, cod 3 oz (13% DV)
 Chicken breast, 3 oz (13% DV)

<https://ods.od.nih.gov/factsheets/Choline-HealthProfessional/>; <https://ods.od.nih.gov/factsheets/Iodine-HealthProfessional%20/>



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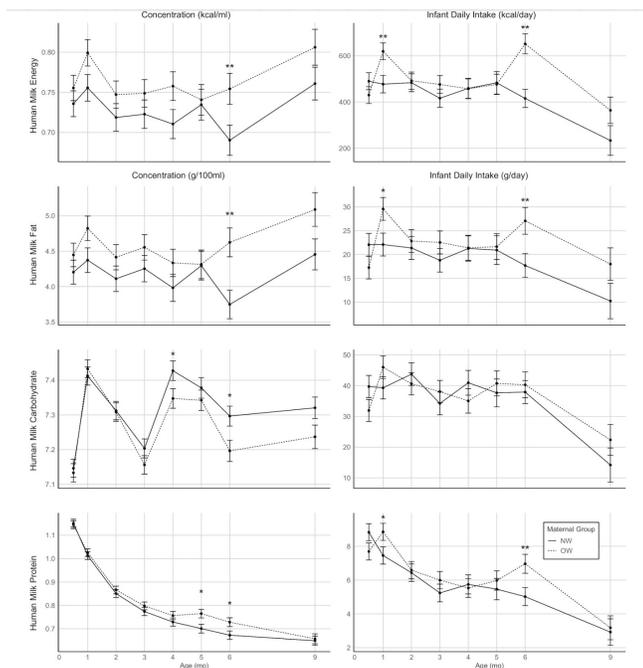
Overweight/Obese



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Macronutrient Composition of Human Milk and Infant Intake Comparing Normal Weight Women with Overweight/Obese Women

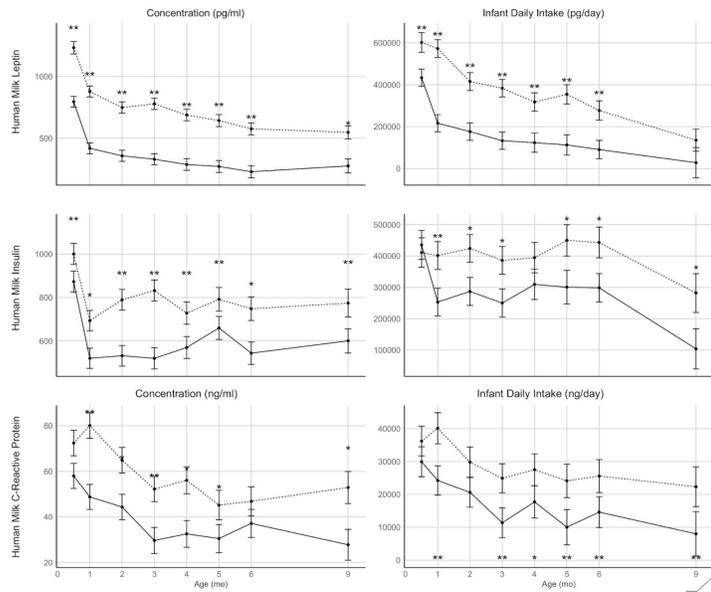
Sims, C. et al. (2020). *The American Journal of Clinical Nutrition*



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Nutrient Composition (leptin, insulin and CRP concentrations) of Milk in Normal Weight Women Compared to Overweight/Obese Women

Sims, C. et al. (2020). *The American Journal of Clinical Nutrition*



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Insulin Resistance and Milk Production

- Maternal obesity is associated with insulin resistance and prediabetes, affecting lactation due to insulin's role in milk production processes
- Higher maternal BMI correlates with a higher prevalence of delayed lactogenesis and is associated with shorter breastfeeding duration
- Impaired glucose tolerance can hinder mammary gland development during pregnancy and lactation leading to delayed lactogenesis, and hindering the rate of milk production in mature lactation
- Galactagogues such as fenugreek and goat's rue are also both rich in insulin-sensitizing biguanides



Goat's Rue, *Tephrosia virginiana*. Photo by Thomas G. Barnes, USDA-NRCS PLANTS Database

Nommsen-Rivers, LA. (2016). *Advances in Nutrition*; Nommsen-Rivers (2019) *J Hum Lactation*



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Losing Weight While Breastfeeding



Gradual weight loss of 1 pound per week or 4 pounds per month is safe for breastfeeding mothers, recommended by the Academy of Nutrition and Dietetics



Moderate-intensity physical activity is beneficial and will not reduce milk volume



Postpartum dietary intervention should include a diet comprising of low-fat dairy, whole grains, fruits, and vegetables

Losing Weight While Breastfeeding. (n.d.). *Academy of Nutrition and Dietetics*



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Lactation and Bariatric surgery

Component	Diagnostic Testing (serum)	Prophylaxis	Treatment if Deficient
Vitamin A	Vitamin A, if clinically indicated	4000 IU/day in prenatal vitamin	Vitamin A not to exceed 8000 IU/day
Vitamin D	25-hydroxy vitamin D, if clinically indicated	400-800 IU/day in prenatal vitamin	Calcitriol (Vitamin D) 1000 IU/day
Vitamin K	Vitamin K1, if clinically indicated	Not routinely given	Vitamin K1 1mg/day consult with hematologist
Folic Acid	Complete blood count, red blood cell folate	600-800 µg/day in prenatal vitamin	Folic acid 1000 µg/day
Vitamin B ₁₂	Complete blood cell count, Vitamin B ₁₂	4 µg/day in prenatal vitamin	Oral vitamin B12 350 µg/day or Intramuscular 1000 µg/month Consult with hematologist
Calcium	Total and ionized calcium	250 mg/day in prenatal vitamin	Calcium citrate 1000 mg/day with Vitamin D
Iron	Complete blood count, iron, ferritin, total iron binding capacity	30 mg/day in prenatal vitamin	Ferrous sulfate 325mg twice-three times/day with vitamin C



Kominiarek, M. (2016) *Med Clin North Am*



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True or False

Maternal BMI has been associated with delayed lactogenesis.

A: True

B: False



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Case Scenario 3: Chatbox Discussion

Maria is 32 years old and 6 weeks postpartum. She is breastfeeding her infant and is eager to begin losing the weight she gained during pregnancy. Her pre-pregnancy BMI was 31, and she gained 40 pounds during pregnancy. Since delivery, she has lost 22lbs. She is motivated but concerned about how weight loss might affect her milk supply.

Discussion Questions:

- **Q1:** What guidance would you offer Maria about postpartum weight loss while maintaining breastfeeding?
- **Q2:** What nutrition, physical activity, or referral strategies would you recommend to support gradual, healthy weight loss without compromising lactation?



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Body Image and Breastfeeding



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Impact of Body Image on Breastfeeding Initiation and Maintenance

Objective

- Investigate changes in body image and psychological distress between 72 hours post-delivery and 6–8 weeks postnatal, and their relation to breastfeeding initiation and maintenance among women with a Body Mass Index (BMI) ($>30 \text{ kg/m}^2$) and those with a BMI $18.5 < 25 \text{ kg/m}^2$

Design

- Longitudinal semi-structured questionnaire survey.

Methods

- Assessment of body image and psychological distress within 72 hours of birth and via postal questionnaire at 6–8 weeks.
- Study included 140 women who exclusively breastfed or mixed-fed their infant in the hospital.
- Breastfeeding status re-assessed at 6–8 weeks

Results

- Women with a BMI $>30 \text{ kg/m}^2$ were less likely to exclusively breastfeed in hospital and maintain breastfeeding to 6–8 weeks.
- Better body image correlated with breastfeeding maintenance and lower post-natal psychological distress for all women.
- Education level emerged as the most significant predictor of maintenance in multivariate regression, including body image and weight status.
- Body image satisfaction was generally low around childbirth, decreasing further at 6–8 weeks for all women.

Conclusions

- Health professionals should consider women's body image when discussing breastfeeding.
- Focusing on breast function over form may support breastfeeding for all women.



Swanson, et al. (2017) *British Journal of Health Psychology*



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Body Image and Breastfeeding: A Qualitative Exploration

- **Breastfeeding as a functional tool**
 - *“I’ve never been self-conscious about it [breastfeeding]. . . I just feel really like that’s what they [breasts] were there for, they just seem to me a bit more like a functional thing rather than like something that should be big or small or whatever.” (One child, currently breastfeeding at 16.5 months old)*
- **Body Confidence and breastfeeding in public**
 - *“You know I’ve got my stomach on show here and it’s hanging out at the side of my jeans and things like that. That uhm, isn’t particularly pleasant to see” (Two children, breastfed first baby to 8 months, currently breastfeeding 4-month-old)*
- **Not feeling like the real me: a loss of identity**
 - *“Your world gets taken over by baby...cause all you do is just constantly breastfeeding, and I felt like that was all I was[. . .]and I think I was trying to pressure myself to get back down to feeling a bit more like me.” (One child, currently breastfeeding at 18 months old)*



Owen et al. (2024) *J of Health Psychology*



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Strategies for Promoting Positive Body Image Post-Pregnancy

Social Media and Online Platforms

- Social media advertisements or online training courses could promote positive body image following pregnancy

Focus on Body Functionality

- Viewing the body as a functional tool can lead to respect and appreciation of the body

Prenatal Education

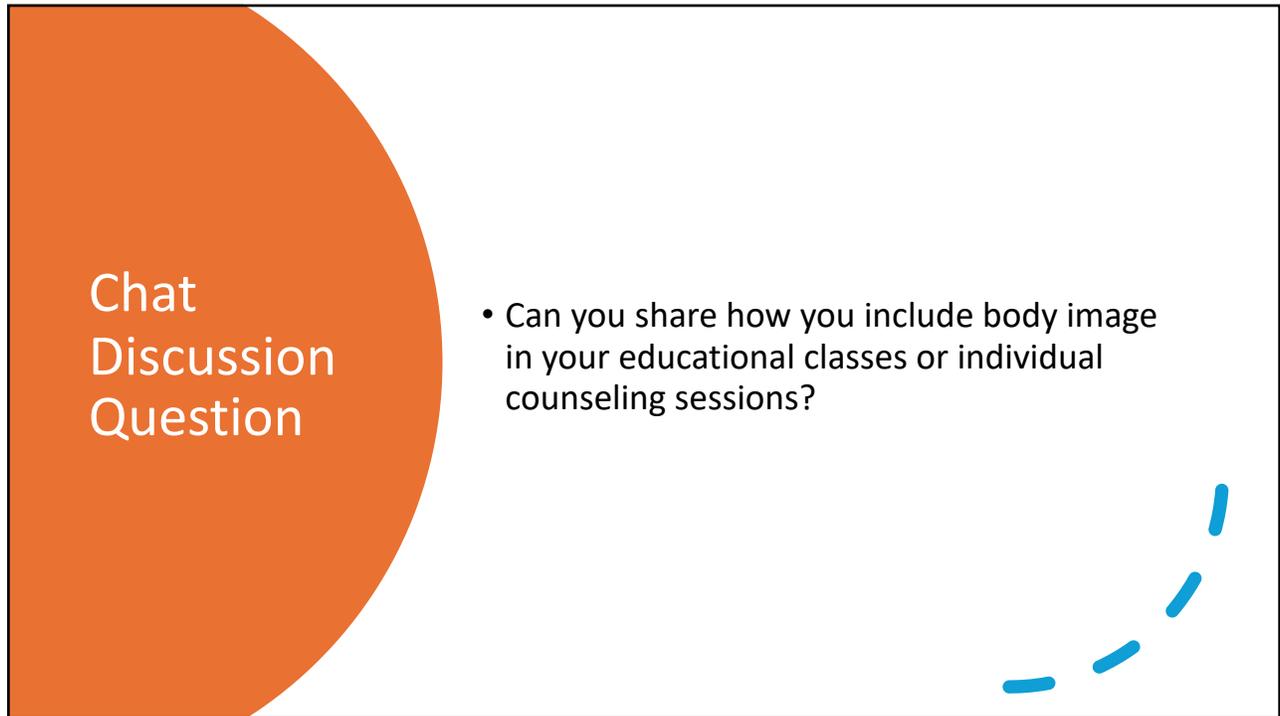
- Expand prenatal classes to include body functionality and its importance over aesthetics to encourage positive body image views post-pregnancy



Owen et al. (2024) *J of Health Psychology*



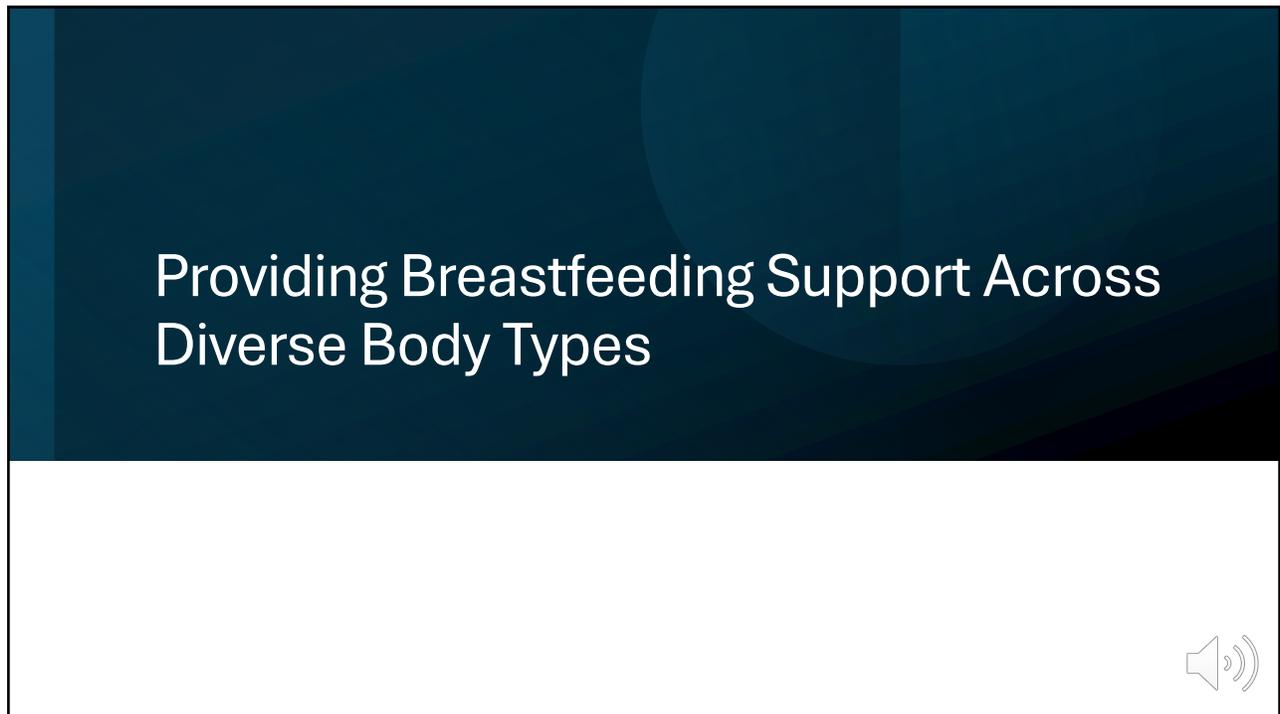
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A slide with a white background and a large orange semi-circle on the left side. The text "Chat Discussion Question" is written in white inside the orange shape. To the right of the orange shape, there is a bulleted list item. In the bottom right corner, there are three blue curved lines.

Chat Discussion Question

- Can you share how you include body image in your educational classes or individual counseling sessions?

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A slide with a dark blue background. The title "Providing Breastfeeding Support Across Diverse Body Types" is written in white. At the bottom right, there is a white speaker icon.

Providing Breastfeeding Support Across Diverse Body Types

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Successful Strategies for Support

- Recommendations for strategies of support include:
 - Healthcare support
 - Workshops
 - Support groups
 - Online support



Rodriguez-Gallego, I. et al. (2021). *International Journal of Environmental Research and Public Health*



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Patient perspectives on the implementation of a breast/chest- feeding support model for low-income communities in the Midwestern U.S.

Rothstein, J. Bonsack, C., Moore-Otsby, L. Yamamae, K, Edwards, J., Patterson, J.
Poster Presentation APHA 2021



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Methods

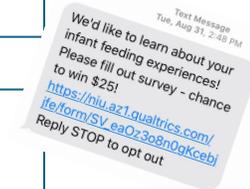
Phase 1: Asset mapping

- Stakeholder meetings to identify resources within HealthNet and in the community
- Structured interviews with community programs to understand current support activities and needs



Phase 2: Patient perspectives

- Questionnaire covering BF experiences, sources of information/support, and perceptions of community resources



Rothstein, J. et al. (2021) APHA Poster Presentation



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Results: Phase 1

Patient/Family Education



Peer Support



Equipment



Professional Support

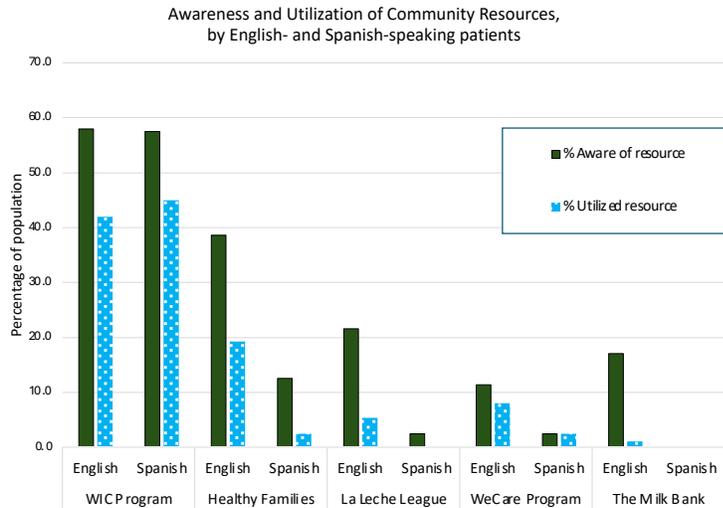


Rothstein, J. et al. (2021) APHA Poster Presentation



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Results: Phase 2



Perceived Usefulness of Community Resources*

	English-speaking patients (mean)	Spanish-speaking patients (mean)
WIC Program	8.2	9.3
Healthy Families	5.6	6.5
WeCare Program	3.1	3.0
La Leche League	4.6	--
The Milk Bank	2.6	--

*On a scale of 1-10



Rothstein, J. et al. (2021) APHA Poster Presentation



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Mothers Experience with Community and Healthcare Resources to Support Breastfeeding

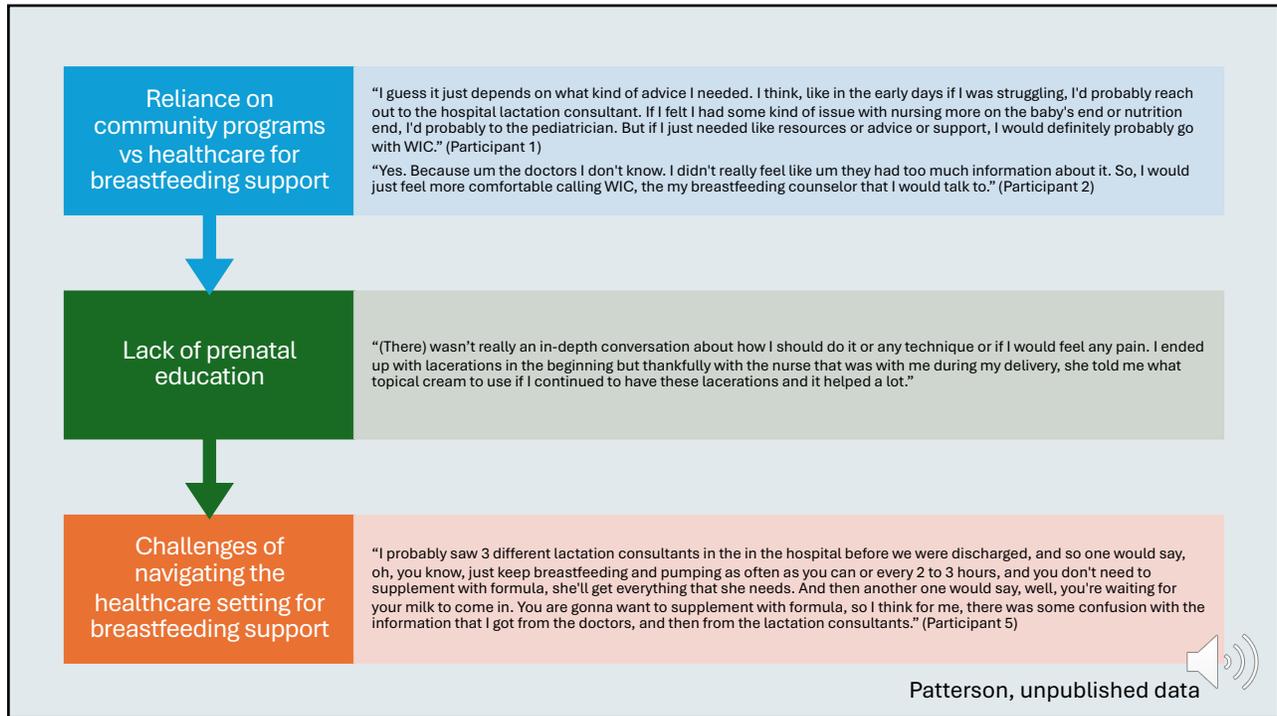
- **Methods:**
 - Recruited mothers who received care in a large federally qualified health center to participate in a phone interview
 - Inductive and deductive coding was used to develop a codebook and analyze data
- **Results**
 - WIC and Healthy Families were the most commonly used services reported
 - Overall lack of awareness of other breastfeeding support services

Baseline Characteristic		
	n	%
n= 28		
WIC		
Yes	26	92.85
No	0	0
Information Not Available	2	7.14
WeCare		
Yes	7	25
No	15	53.57
Information Not Available	6	2.14
Healthy Families		
Yes	19	67.85
No	7	25
Information Not Available	0	0
Milk bank		
Yes	9	32.14
No	14	50
Information Not Available	5	17.85

Patterson, unpublished data



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Online Support



Online support for lactation includes virtual support groups and/or online courses



They are typically run by a lactation educator or IBCLC



New moms do not have to worry about timing or transportation, and can still attend when their baby is sick



Examples include Baby Bistro (virtual group class), Milky Mama (online course), Lactation Link (virtual group classes and/or online courses)

Speaker icon

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Key Takeaways for Parental Weight Concerns During Lactations

- Preconception planning is essential for optimizing pregnancy and lactation outcomes
- Breastmilk composition varies across different body types
- Individualized nutrition counseling can assist in identifying the specific needs of pregnant and lactating individuals to identify strategies for optimal health
- Prenatal education should incorporate measures to promote a positive self-image to increase breastfeeding rates
- Ensuring equitable access to complementary breastfeeding support programs (e.g. WeCare, Milk Bank) may enhance the perception of support among pregnant and lactating individuals.



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