

Study: Breastfeeding does not protect against MS relapses

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New research finds breastfeeding doesn't appear to protect against multiple sclerosis (MS) relapses, despite previous studies suggesting there may be a protective role. The research is published in the July 6, 2011, online issue of *Neurology*, the medical journal of the American Academy of Neurology (AAN).

"Breastfeeding should not be encouraged by doctors to protect against MS relapses, especially among women with MS who have high disease activity and high risk of postpartum relapses," said study author Emilio Portaccio, MD, of the University of Florence in Italy. "Since it is not considered safe for women to take MS drugs while breastfeeding, breastfeeding may not be feasible for these women who may need to resume treatment to avoid relapses soon after giving birth."

The study involved 302 pregnancies in 298 women with full-term [deliveries](#) who were followed for one year after delivery. A total of 34.4 percent of the women breastfed for at least two months; the remaining 65.6 percent breastfed for less than two months or not at all and were considered not breastfeeding.

In the year after delivery, 37 percent of women experienced one relapse and 6.6 percent had two or more relapses.

The study found breastfeeding did not appear to have a protective effect on relapses in women after adjusting for age at pregnancy, [duration](#) of MS, level of disability, relapses in the year before and during pregnancy,

drug treatment and exposure to chemicals or smoking. However, breastfeeding did not worsen the relapse rate.

According to Portaccio, the only significant predictors of postpartum relapses were relapses in the year before and during pregnancy.

Women who had relapses in the year before pregnancy were 50 percent more likely to have a relapse after giving birth than those who did not have relapses in the year before pregnancy. Women who had relapses during pregnancy were more than twice as likely to have a relapse in the postpartum period as women who did not have relapses during pregnancy.

"Earlier reported associations between breastfeeding and a lower risk of postpartum relapses may simply reflect different patient behavior, biased by the disease activity. Women who have fewer relapses before and during pregnancy may be more likely to breastfeed and then continue to have fewer relapses in the postpartum period. However, a course of postpartum steroids might protect against later attacks. Approaches of this type were not assessed in this study and might, in consultation with the treating neurologist, enable breastfeeding," Portaccio said.

Provided by American Academy of Neurology

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