

# POSTPARTUM CARE



**The first year after having a baby can be an exciting time. It can also be difficult - physically and emotionally.** Your body is healing and adjusting and you may have new stressors in your life. Most people maintain their goals, but some people who stopped using drugs during pregnancy start again after giving birth. A few find themselves using more chaotically.

## THE RISKS OF OVERDOSE

After giving birth, many people taper off medications they've been using such as methadone or buprenorphine because they or their doctors think they are able to manage without the medication. However, this is sometimes dangerous and increases risks of relapse, overdose and death.

In one study in Massachusetts, **overdose rates were highest among people 7-12 months after delivery of a baby.**<sup>1</sup>

It can be hard to talk with loved ones about your substance use, and sometimes you might feel like you're letting people down if you start using after taking a break.

**Try to find someone you can trust, a family member or friend, a counselor or provider, and discuss a plan for how you can cope with triggers and stay safe if you use.**

We like this [Safety Planning Resource](#) from NYSDH.



In addition, after you deliver your baby, some of the support you relied on may change. Sometimes providers who supported you getting on buprenorphine or methadone (OAT) while you were pregnant may be less concerned about continuing treatment.

Just like being pregnant, **having a baby can change your tolerance.**

Remaining on OAT after your delivery can help keep you safer as your tolerance changes and as you are coping with changes in your life.

**It is recommended by many experts to stay on OAT as long as you need to stay healthy and able to parent;** some people stay on it for life.

## MEDICAL RACISM

**It is important to understand that the origins of gynecology and obstetrics are tied to racism and the abuse of Black and Brown birthing people.**

As the field of medicine became established - and birth became more medicalized - racism shaped institutions and became embedded in medical education. The licensing and certification process that have been put in place have further reinforced White Supremacy and taken choices away from pregnant and birthing people - making the choice to have a baby more dangerous.

Many Black, Indigenous, and Latinx people experienced reproductive coercion and violence, and the movement around contraceptive services has often been exploited by those with xenophobic and racist ideologies.

One example of this is the human trials of the oral contraceptive pill conducted in Puerto Rico on poor women of color in 1956. These trials did not grant informed consent and the researchers were later denounced for their colonialist, racist, and unethical research practices. In a more recent case, 148 people incarcerated in California Women's prisons were sterilized without their consent between 2006-2010.



# BREAST/CHESTFEEDING AND HUMAN MILK



## ALCOHOL

**Alcohol passes into human milk and is absorbed by babies.**<sup>2,3</sup>

If you have plans that may include alcohol consumption, **pump and store enough milk** beforehand to feed the baby, or plan to use formula.

While drinking/intoxicated, if your breasts become painful or engorged, pump or hand express enough milk to relieve the pressure. Then discard it. You do not need to fully empty, because the body continually filters alcohol out of milk, just like it does with blood, so when you sober up, the milk does too.

Recommendations for the time it takes for your milk to be safe for the baby range from **2-4 hours per drink**.<sup>2,3</sup> If you are only going to have one standard drink, it is ok to feed the baby, have a drink, wait a few hours, and feed baby again without doing anything special.

If you still feel drunk or hungover, even if the recommended time has passed, **wait until you feel better before providing milk to the baby**. If you want to be 100% sure, alcohol test strips for breast milk are available in drugstores.



## BENZODIAZEPINES

It is important to take as low a dose of benzodiazepines as possible to get the benefits you need. All benzodiazepines are not equally safe while breast/chestfeeding (for example, lorazepam is safer than diazepam<sup>4</sup>). Talk to your doctor about which medication you take and at what dose. Work together to find what's right for you.

In small studies, some babies have low muscle tone, sedation and/or difficulties breathing at delivery and also at breast/chestfeeding.<sup>5</sup> One problem with many of these studies is that because they have a small number of participants, their findings can be difficult to generalize.



## CANNABIS

Roughly 1% of the cannabis consumed passes into your milk.

Infant absorption is poor, so infants only absorb about 1% of that, making the absorbed dose roughly one thousand times less than the parents' dose.<sup>7, 8</sup> This can still be enough to cause a positive result on a urine drug screen. Experts agree that the safest choice is to stop recreational use completely while lactating.<sup>3, 9-12</sup> If you continue using while breast or chestfeeding, use harm reduction methods like pumping before using or pumping and dumping right after using.<sup>12 13</sup>



## OPIOIDS

**It is safe to breastfeed on prescribed opioids**, including opioid use disorder treatment medications such as methadone and buprenorphine. In fact, it can actually make baby's withdrawal less severe. We are not sure whether this is related to the opioids passed into human milk, or the fact that baby feels better and closer to you while breastfeeding, or both!<sup>13, 14</sup> With heroin, it is best not to breastfeed, since we can't know the exact dose and there may be other substances cut into street drugs that are not safe.



## STIMULANTS

**Stimulants pass into human milk**, and can decrease the amount of milk produced, and/or cause the milk to dry up earlier.<sup>15-17</sup>

Up to 200mg of caffeine per day is considered safe.<sup>13, 17, 18</sup>

After illicit stimulant use, it is recommended to discard milk for 24 hours for cocaine, and 48 hours for methamphetamine use.<sup>13, 15</sup>

During this time, continue to pump or express milk so that your supply does not decrease.



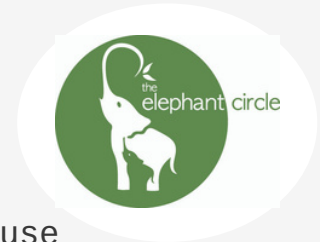
## TOBACCO + NICOTINE

Smoking may decrease the amount of milk produced, and/or cause the milk to dry up earlier. Nicotine and other harmful substances in cigarettes can pass to the baby from human milk.<sup>11, 19</sup>

It's important to remember that even though there are risks from smoking and breastfeeding, it is still much better to breastfeed and smoke than to formula feed and smoke!<sup>11, 20, 21</sup>

### Drug Use and Human Milk: Legal and Child Welfare Considerations

"We believe that breast/chest feeding families who use substances are best served by evidence-based, harm reduction practices provided through the healthcare system, not the legal or child welfare system."



## NOTES:

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## CONTRACEPTION OPTIONS

Many people may not realize it is possible to become pregnant in the year after having a baby. Some people may want to avoid this because they do not want to have another baby right now, while others may be excited at the prospect of having a large family with children close in age.

There are many options to consider around when and what kind of contraception to use if you do not want to have another pregnancy within the next year. You can **ask a medical provider** before leaving the hospital or in a doctor's visit after.

**There are many kinds** - such as the IUD, oral contraception pills, patches, rings, or injections - and **they all have their own benefits**.

Some you may take daily, such as the pill. Others can last for months or years, like injections, IUDs, and implants.

**You can ask your medical provider for one of these forms of birth control before leaving the hospital, or get it at a doctor's visit later.**

You should discuss with your doctor if you have any concerns such as heavy period, cramping, weight issues, or mood issues.

**Your provider should never try and influence your decision or push you towards a method that you are not interested in.**

You can read about the types of contraception available at [PlannedParenthood.org](https://www.plannedparenthood.org) and [Bedsider.org](https://www.bedsider.org).



# CONTRACEPTION COVERAGE

In Illinois you can get birth control at no cost if you qualify for one of the health coverage programs below:

## **HFS Family Planning Program**

[ican4all.org/free-birth-control-programs/family-planning-programs](https://ican4all.org/free-birth-control-programs/family-planning-programs)

## **Adult Medicaid** (for people age 19 and older)

[ican4all.org/free-birth-control-programs/medicaid-programs](https://ican4all.org/free-birth-control-programs/medicaid-programs)

## **Moms & Babies** (Medicaid for people who are pregnant)

[ican4all.org/free-birth-control-programs/moms-babies-medicaid](https://ican4all.org/free-birth-control-programs/moms-babies-medicaid)

## **CHIP** (Medicaid for people age 18 or younger)

[ican4all.org/free-birth-control-programs/chip-program](https://ican4all.org/free-birth-control-programs/chip-program)

## **We love the resources and information at ICAN!**

Illinois Contraceptive Access Now (ICAN!) is a statewide initiative to make birth control easier to get in Illinois—they believe that everyone should have the freedom to do what they want with their own body. No matter where they live, how they identify, or how much money they make. They believe in a simple truth: that reproductive freedom is for everyone.

[ican4all.org](https://ican4all.org)

- **Eligibility Quiz**

Answer a few questions and find out if you qualify for free birth control and other sexual and reproductive health care benefits.

[ican4all.org/free-birth-control-programs/family-planning-programs/hfs-eligibility-quiz](https://ican4all.org/free-birth-control-programs/family-planning-programs/hfs-eligibility-quiz)

- **Birth Control Options Quiz**

Take this quiz to learn more about your options, and use the provider finder tool to get an appointment if you want one!

[ican4all.org/start-quiz-2](https://ican4all.org/start-quiz-2)



## FAMILY LEAVE IN ILLINOIS

**Everyone needs time to take care of themselves when they're pregnant, recovering from giving birth, and bonding with their new family.**

Unfortunately, there are few benefits and protections for most working people. Whether or not you can take paid or unpaid time away from work depends upon:

- who you work for
- where you work
- how long you have worked there
- how many hours you typically work
- the number of people employed at your place of work

Learn more:

**Family Medical Leave Act (FMLA)**      [www.dol.gov/agencies/whd/fmla](http://www.dol.gov/agencies/whd/fmla)

**Paid Leave for All Workers Act**

[labor.illinois.gov/laws-rules/paidleave.html](http://labor.illinois.gov/laws-rules/paidleave.html)

When you have a pregnancy loss:

**Family Bereavement Leave Act**

[labor.illinois.gov/laws-rules/conmed/family-bereavement-leave-act.html](http://labor.illinois.gov/laws-rules/conmed/family-bereavement-leave-act.html)

## PREGNANCY RIGHTS IN ILLINOIS

The Illinois Human Rights Act bans discrimination based on pregnancy, childbirth and related medical conditions, and covers workplaces with 1 or more employees. It also provides broad protection against discrimination based on a current pregnancy, past pregnancy, potential or intended pregnancy, and medical conditions related to pregnancy or childbirth.

**Pregnancy Rights in Illinois**

[dhr.illinois.gov/publications/pregnancy-rights.html#toc](http://dhr.illinois.gov/publications/pregnancy-rights.html#toc)

**Pregnancy Discrimination Act**

[www.eeoc.gov/statutes/pregnancy-discrimination-act-1978](http://www.eeoc.gov/statutes/pregnancy-discrimination-act-1978)



## PSYCHOSOCIAL SUPPORT AND PERINATAL MOOD AND ANXIETY DISORDERS (PMADS)



Perinatal Mood and Anxiety Disorders are common and treatable.

**By some estimates, 1-2 out of every 10 pregnant people and their partners will have some kind of mood disorder during, right after pregnancy, or during the first year postpartum.** Self-harm, overdose, and suicide are common causes of maternal death in the United States.

Rates may be higher for people who use drugs because they are more likely to have history of mental or mood disorders - and to be caught in punitive legal or family surveillance systems.

**If you or your partner are having thoughts about hurting yourself or someone else, you can call 911 or see a healthcare provider right away.**

The National Suicide Prevention Lifeline is now the  
988 Suicide and Crisis Lifeline.

In an EMERGENCY call: **988**

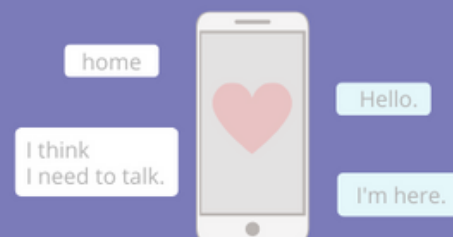
or 1-800-273-8255 (TALK)

[988lifeline.org](https://988lifeline.org)



In an EMERGENCY text "Home" to  
**741741** to reach a Crisis Counselor

[www.crisistextline.org/text-us](https://www.crisistextline.org/text-us)



## NEW National Maternal Mental Health Hotline

24/7 Free Confidential Hotline for  
Pregnant and New Moms  
in English and Spanish

Call or text **1-833-TLCMAMA**



TTY users can use a preferred relay service  
or dial 711 and then 1-833-852-6262.



Counselors also have access to interpreter services who can support  
**60** other languages **1-833-852-6262**

- Arabic
- Creole
- French
- German
- Italian
- Hebrew
- Hmong
- Mandarin
- Polish
- Portuguese
- Tagalog
- Vietnamese

TTY users can use a preferred relay service  
or dial 711 and then 1-833-852-6262.



HELP from POSTPARTUM  
SUPPORT INTERNATIONAL



POSTPARTUM SUPPORT  
INTERNATIONAL

[www.postpartum.net](http://www.postpartum.net)

PSI Helpline:

**1-800-944-4773**

PRESS

- 1** English
- 2** Spanish



Text PSI:

**503-894-9453**

Text en Español: **971-203-7773**

Hello  
How can I help?



Hi

# MENTAL HEALTH SUPPORT

**Postpartum Support International (PSI) of Illinois**

[psichapters.com/il](https://psichapters.com/il)

**Postpartum Support International (PSI) FREE Online Support Groups**

[www.postpartum.net/get-help/psi-online-support-meetings/](http://www.postpartum.net/get-help/psi-online-support-meetings/)

**Perinatal Mental Health Alliance for People of Color (PMHA-POC)**

[www.postpartum.net/perinatal-mental-health-alliance-for-people-of-color](http://www.postpartum.net/perinatal-mental-health-alliance-for-people-of-color)

**Department of Human Services Helpline**

1-800-843-6154 or 1-800-447-6404

**Illinois Department of Human Services (IDHS)**

**Support Groups for Perinatal Depression** by county

[hfs.illinois.gov/medicalclients/maternalandchildhealth/supportgroups](https://hfs.illinois.gov/medicalclients/maternalandchildhealth/supportgroups)

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