OVERVIEW
Breastfeeding holds benefits for mother and child but is sometimes difficult or undesirable. Every mother faces the decision of whether to breastfeed after birth and for how long.

RELEVANCE FOR MULTIPLE SCLEROSIS
Women with MS face a more complicated decision on breastfeeding. Breastfeeding will not harm MS patients, or make MS worse. Studies indicate that exclusive breastfeeding (<1 formula bottle daily) is associated with decreased MS disease activity. However, not all disease modifying therapies (DMT) are compatible with breastfeeding; only interferon betas and glatiramer acetate can be used while breastfeeding. Women using other DMTs must decide with their providers how to coordinate breastfeeding with resumption of their medication. The 3 month period after birth has been associated with increased relapse risk, so this discussion should be held in advance.

ABOUT YOU
Which statements describe you? (check all that apply)
___ I am thinking about becoming pregnant.
___ I am pregnant.
___ I have given birth to _____ children.
___ I am planning on breastfeeding my baby for ________ months.
___ I am planning on feeding my baby with formula.
___ I am planning on using both breastfeeding and formula.
___ I am not sure what I am going to do about my MS treatment after pregnancy.
___ I am concerned that my medication will harm my baby.
___ I am concerned about relapses if I don’t use my medication.

RESOURCES
https://en.wikipedia.org/wiki/Breastfeeding
http://www.nationalmssociety.org/Living-Well-With-MS/Family-and-Relationships/Pregnancy