

Breastfeeding and Medication



Ehlers-Danlos Syndrome and breastfeeding

I suffered a lot of pain trying to hold my daughter up in position, which I think contributed a lot to post-natal depression. I had to take Dihydrocodeine to deal with the pain and that led to worrying over how much might cross my milk to my daughter. I was in a wheelchair for the first 6 weeks of her life too. I used to breastfeed her by using a stretchy sling and self-propelling around the shops.

The choice to breastfeed meant for me that I had to put my whole life on hold. Using the spoon theory... It took up all of my spoons, so I only had food when my partner got back from work, I had to plan drinks by using a large flask and I could go almost a week without bathing because I had no energy left for me. Unfortunately, it meant I entered the viscous cycle of eating conveniently, so snacks and processed foods, which made me put on a lot of weight and made me feel awful about myself, adding to the PND and making it harder to find spoons for other things.

The condition is pretty rare, but the consultant I was under during my pregnancy was aware of it and some of the complications, so she wasn't judgemental and was supportive. The antenatal support for breastfeeding was scarce and no one knew anything about my condition, so I only received suggestions based on the average mother, such as using a breastfeeding pillow or feeding lay down. In hindsight, I probably should have pushed for a physio appointment to ask for braces for my joints, but I was so super overwhelmed, it never even sprang to mind. 20 months later and I am still breastfeeding, and I have trained as a breastfeeding buddy, so I am usually volunteering at least once a week. I have actually come across another lady with my condition in the year I've been doing it too.

Description

Ehlers-Danlos syndromes (EDS) are a group of rare inherited conditions that affect connective tissue. affect as many as 1 in every 200-500 people. More women than men are affected. There are several types of EDS that may share some symptoms which include:

- an increased range of joint movement (joint hypermobility)
- stretchy skin

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- fragile skin that breaks or bruises easily

EDS can affect people in different ways. For some, the condition is relatively mild, while for others their symptoms can be disabling.

Problems that can occur when pregnant

These include:

- Varicose veins, haemorrhoids and vulval varicosities.
- Reflux, which tends to get worse: many people with EDS have ongoing reflux and symptoms may worsen during pregnancy.
- Swelling of legs and hands, which is common in pregnancy but tends to be worse in EDS.
- Carpal tunnel syndrome, which is common in pregnancy in EDS.
- Women with EDS - may be more than usually prone to morning sickness.
- Many people with EDS experience regular headaches and these tend to get worse in early pregnancy.
- Many people with EDS have tinnitus due to instability of the bones in the middle ear. Pregnancy may exacerbate this condition.
- Women with EDS who need to protect their joints throughout pregnancy.
- Women with EDS who often have worse aches and pains in pregnancy, including:
 - Pelvic girdle pain (symphysis pubis dysfunction).
 - Back pain.
 - Generalised aches and pains
 - Palpitations and extra heartbeats, which may increase in pregnancy.
- Breast changes which occur in most pregnant women. The stretchy skin of EDS means that extra support is important. People with EDS are more prone to stretchmarks generally.
- People with EDS, who are more prone to anxiety and depression. This can be made worse by pregnancy.
- Women with EDS are more prone to premature rupture of membranes

Treatment

There are no specific treatments but only management of symptoms which may include physiotherapy, occupational health support and CBT.

Analgesics form the mainstay of treatment; **paracetamol, dihydrocodeine or tramadol** as the preferred opioids plus Non-steroidal anti-inflammatory drugs:



Ibuprofen: very low levels in breastmilk. Can be used even when baby needs direct ibuprofen syrup e.g. during teething or fever

diclofenac: has historically been widely used in breastfeeding

naproxen: longer half-life than diclofenac or ibuprofen but levels in breastmilk low

celecoxib: low levels in breastmilk

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Further information:

Ehlers-Danlos Support UK: www.ehlers-danlos.org/

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