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## Speech therapy, breastfeeding and COVID-19: information to speech therapist

### *Fonoaudiologia, amamentação e COVID-19: informações aos fonoaudiólogos*

During the first months of 2020, a new virus spread rapidly to countries around the world, SARS-CoV 2. The World Health Organization (WHO) called the disease caused by this virus Coronavirus Disease 19 (COVID-19)<sup>1</sup>. The most common manifestations of COVID-19 are fever, cough and fatigue or myalgia, sputum production and headache<sup>2-4</sup>.

Previous coronavirus data (SARS-CoV and MERS-CoV) showed that pregnant women could be in risk groups with a higher chance of morbidity and mortality than the general population<sup>5</sup>. However, little is known about COVID-19 in this population<sup>5</sup>. In a study conducted in Wuhan<sup>6</sup> - the city's first epicenter of the disease, researchers reported nine live births to mothers positive for COVID-19, and all samples were negative for the virus in neonates. Their findings supported that there is currently no evidence of vertical transmission in infected mothers in late pregnancy<sup>6</sup>.

Although COVID-19 can affect individuals of all age groups, the disease is generally milder in children than in adults, especially in neonates<sup>7</sup>. The most common clinical symptoms in the pediatric population include fever, fatigue and dry cough. Some patients have upper respiratory manifestations, such as nasal obstruction, nasal discharge and sore throat, and others have gastrointestinal symptoms, such as abdominal discomfort, vomiting, abdominal pain and diarrhea<sup>6</sup>.

Currently, there is no evidence that the Corona Virus can be transmitted through breast milk, but it is known that an infected mother can transmit the virus through respiratory droplets during breastfeeding<sup>8</sup>. In a study carried out with six newborns of infected mothers, who were breastfeeding their babies, all samples were negative for the virus<sup>6</sup>.

The speech therapist who needs to evaluate babies of confirmed and / or suspected mothers of COVID-19 should follow the recommendations for the use of protective tools like other health professionals: hats, goggles, protective clothing, gloves, N95 masks. Neonatologists advise that no visits should be allowed for newborns with a diagnosis, or with mothers with suspected or diagnosed COVID - 19<sup>7</sup>. The breastfeeding guidelines of the Italian Society of Neonatology (SIN), endorsed by the European Union of Neonatology and Perinatal Societies (UENPS) are: if a mother previously identified as COVID - 19 positive or under suspicion for COVID - 19 is asymptomatic at the time of delivery, direct breastfeeding is advisable, under strict infection control measures; and when a mother with COVID-19 is too sick to care for the newborn, the newborn will be treated separately and fed fresh expressed breast milk, without the need to pasteurize it, as there is no evidence that human milk COVID-19<sup>8</sup> transmitter is possible.

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According to the Disease Prevention Control Center (2020), measures must be taken to reduce the chance of viral transmission during breastfeeding, such as: avoid kissing the newborn, protect him from adult cough, wear a mask while breastfeeding, clean hold hands before feeding and suspend visits. In addition, when the baby is in joint accommodation with the sick mother, the baby must remain at a distance of at least 2 meters from the mother, with the presence of a physical barrier between them, such as a curtain<sup>9,10</sup>. The WHO also advises that surfaces that the contaminated mother has contact be cleaned and disinfected regularly<sup>1</sup>.

As for the storage of human milk, the WHO recommends that mothers with suspected or confirmed COVID -19 use the same precautions indicated at the time of breastfeeding: hand hygiene, wearing a mask, disinfecting contact surfaces. They indicate that the container that received the human milk must have the external part disinfected after its extraction, with adequate sanitary solutions, before storage in milk banks, wards or in the postpartum's own residence<sup>11</sup>. With the spread of the disease, and the growing number of pregnant women and mothers who may have symptoms - but in testing for the virus - the WHO recommendation is that all mothers who donate and receive milk from human milk banks follow these recommendations. hygiene pre, peri and during receipt of the bottle. Still, for mothers infected with COVID-19 who need to express milk in a hospital using pumps, these devices must be for the individual use of this puerperal woman<sup>11,12</sup>.

There is little and fragile evidence regarding COVID-19 and breastfeeding so far, as well as in other areas. Science is taking shape and institutions are drawing up their recommendations according to the course of the disease's evolution. It has been identified that breastfeeding is, so far, indicated in cases of suspected and confirmed COVID-19, with infection control<sup>9-11</sup> and hygiene. In addition, all mothers who donate and receive milk from human milk banks must disinfect the bottles before handling, even if they do not show symptoms of the virus.

The Brazilian Society of Pediatrics said in a note, to be favorable to the maintenance of breastfeeding in mothers with COVID-19, given the current evidence<sup>13</sup>. The speech therapist as an active member in Health Education, has a positive role and intervention in the guidance of breastfeeding<sup>14</sup>, must be updated and following the new recommendations of major international organizations, as well as the dentist and other health professionals, as adequate breastfeeding stimulates growth and harmonious craniofacial development<sup>15</sup>.

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## Authors' contributions

*VSGM, RSR participated in the idealization, selection and analysis of the studies, and writing of the scientific article; MAPM, MCBB and STA participated in the analysis and interpretation of data, writing and scientific review of the article.*