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Neonatal Abstinence Syndrome and Breastfeeding: A Review of Literature

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Breastfeeding reduces the need for pharmacological treatment in NAS babies.
- Only 53% of NAS infants with breastfeeding mothers in opioid maintenance treatment (OMT) programs needed pharmacological treatment, while 80% of NAS infants with non-breastfeeding mothers in OMT programs needed pharmacological treatment (Welle-Strand et al., 2013).
- The newborns of women in OMT programs who were breastfeeding had a shorter pharmacological treatment length of 28.6 days compared to those who were not breastfeeding who had an average length of stay of 46.7 days (Welle-Strand et al., 2013).

Breastfeeding improves the wellbeing of neonates with NAS.
- Infants that were exposed to buprenorphine via breast milk maintained optimal health in terms of birth weight, weight gain, sleeping patterns, skin color, head circumference, and elimination and hydration patterns (Gower et al., 2014).
- Breastfeeding is a safe way to expose the infant to a therapeutic dose of buprenorphine. This exposure allows them to better cope with NAS symptoms without any known adverse side effects (Gower et al., 2014).

Discussion
- The findings of the four research articles suggest that breastfeeding infants with neonatal abstinence syndrome reduce the length of stay in the hospital following birth.
- Mothers of the infants suffering from NAS need proper education about the advantages of breastfeeding to benefit both the mother and the baby.

Next Steps
- Although these research studies suggest that breastfeeding improves the overall well being of NAS babies, further research is required.

Limitations
- Difficulty finding articles related to NAS and breastfeeding
- Articles suggested correlations but were inconclusive

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