

## Navigating the US Formula Shortage: A Safe Approach

The birth of a new child is a big transition, often met with a spectrum of emotions. From excitement and joy to uncertainty and overwhelm. Each family's situation is unique and may change their needs in the care they receive. **The recent recalls and shortages of infant formula in the United States have added a layer of anxiety for many families.**

It is important that parents know all their options available for feeding their babies safely. In the wake of the shortage, desperate parents and well-intentioned supporters have taken to social media, sharing a number of suggestions. It is critical that parents talk through their options with their trusted healthcare professional-- like their child's primary care provider or an infant feeding expert, like a lactation care provider. **Animal milk, homemade formula recipes, and toddler milk should never be used as a substitute for formula or human milk for children under the age of one.**

Lactation care providers, including International Board Certified Lactation Consultants (IBCLCs), are standing by to serve as expert resources for those in need. Reaching out to the United States Lactation Consultant Association (USLCA) or a local IBCLC through USLCA's directory will help to curb the impact of misinformation.

- The current recommendations from the [American Academy of Pediatrics](#) are for human milk or commercially produced and tested formula to be the primary source of nutrition through an infant's first year of life. The recommendation includes introducing solids around **6 months of age**. In an instance where a family is unable or chooses not to provide human milk, commercial infant formula is considered a safe and suitable alternative.

While lactation consultants are experts in human lactation, they are also trained to help families through all methods of infant feeding. Lactation providers prioritize meeting a family's needs and ensuring the health of their baby (or babies). Lactation care providers may also serve as a resource for families that intend to provide human milk but may be facing hardship. A lactation care provider is well-equipped to help guide families through their feeding options, while considering the mental and physical health of the whole family.

In the current situation, with infant formula being difficult to get for so many, parents are left looking for alternatives. As infant feeding experts, lactation care providers, like IBCLCs, are able to serve as a resource to help support families through these difficult decisions.

It is important to know that there is no single approach to this emergency. Every family needs to evaluate their own circumstances and needs. However, there are a number of safe options that families may explore with their care provider team.

- **Switching brands or types of formula** to one that is more available may help. Unless a baby is on specialty formula, most ingredients are similar, and for regular formula, switching brands is not as harmful as many believe. There are resources available to help parents compare the similar products across brands to allow families to purchase whatever formula may currently be in stock.
- **Breastfeeding** may seem like the simple alternative to some, but it is often not as easy as one might think. In the event that someone is currently breastfeeding, they may consider reaching out to a lactation care provider (in-person or by telehealth) to help ensure that they maintain or increase their milk supply. The USLCA maintains a directory of IBCLCs by location that parents can use as resource to find help: [www.uslca.org/find-an-ibclc](http://www.uslca.org/find-an-ibclc)
- Some parents may choose to **induce lactation** to allow them the opportunity to switch to breastfeeding. *This is not a quick fix, nor does it work for every family.* In the event that a family wants to explore this option, a lactation care provider, skilled in induced and relactation, can serve as a resource.
- **Donor milk** is an extremely safe option for infants but it comes with challenges. The *Human Milk Banking Association of North America* recently put out a public call for donations due to their own shortage. In addition to the inconsistent availability of this resource, it may be more costly and often reserved for babies in the Neonatal Intensive Care Unit (NICU) or with special medical needs. To learn more about getting pasteurized donor milk, visit [www.hmbana.org/find-a-milk-bank](http://www.hmbana.org/find-a-milk-bank).
- **Informal Milk sharing** is another option that parents may consider. There are many groups through social networks that have a goal to help parents needing milk (milk recipients) connect with parents who have milk to donate (milk donors). This process is a parent-to-parent arrangement and does not follow any formal guidelines or have any oversight. As there is no testing in place, it is up to milk recipients to ask milk donors about habits related to medications, diet, or substance use. Milk donors may ask milk recipients for things in exchange-- like to replace their milk storage bags in exchange for receiving their milk donation. It is important for parents to know that these arrangements are not regulated and are at the assumed risk of both parties. Unlike banked human milk, community-sourced milk is not screened or pasteurized. For more information on navigating this choice, visit [this link to the Academy of Breastfeeding Medicine's protocol](#) on community milk sharing.

Individual recommendations cannot be made without thoughtful research, and conversation as a family. In all cases, consulting a trained lactation provider can be very helpful. All feeding decisions should be made in conjunction with a baby's primary care provider.

For more information or interview requests please contact [info@uslca.org](mailto:info@uslca.org).