

# Secondary Logo



# Journal Logo

Articles



Advanced Search

April/June 2016 - Volume 27 - Issue 2

- Previous Abstract
- Next Abstract

- **Cite**
  - Copy
  - Export to RIS
  - Export to EndNote
- **Share**
  - Email
  - Facebook
  - Twitter
  - LinkedIn
- **Favorites**
- **Permissions**
- **More**
  - Cite
  - Permissions

Original Articles

# Clinical Management of the Breast-Feeding Mother–Infant Dyad in Recovery From Opioid Dependence

Busch, Deborah W. DNP, RN, CRNP, CLC

Author Information

**Deborah W. Busch, DNP, RN, CRNP, CLC**, Pediatric Nurse Practitioner Program, University of Maryland School of Nursing, Baltimore.

The author reports no conflicts of interest. The author alone is responsible for the content and writing of the article.

Correspondence related to content to: Deborah W. Busch, DNP, RN, CRNP, CLC, Pediatric Nurse Practitioner Program, University of Maryland School of Nursing, 655 West Lombard St., Room 575B, Baltimore, MD 21201. E-mail: busch@so.umaryland.edu

Journal of Addictions Nursing: 4/6 2016 - Volume 27 - Issue 2 - p 68-77

doi: 10.1097/JAN.000000000000117

- Buy

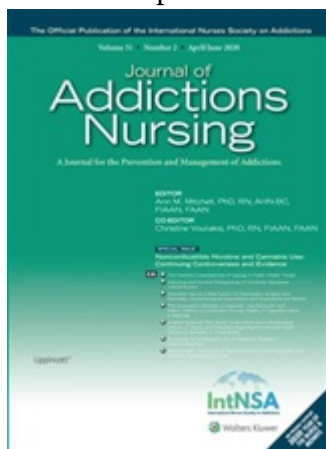
Metrics

# Abstract

Human milk is one of the most health-promoting and cost-effective nutritional substances known to humankind. Breastmilk provides substantial and remarkable physiological and psychological health benefits. Within the last decade, there has been a resurgence of breast-feeding in the United States and worldwide and an increased awareness of the immense health benefits for mothers, infants, and societies that support it. Each mother–baby dyad is a unique pair, with distinct relationships, biases, barriers, and obstacles. This article aims to address clinical management for the opioid-recovering breast-feeding dyad and to translate current evidenced-based practice findings, recommendations, and resources to best support this unique population. The recovering breast-feeding mother and newborn with opioid dependence deserve special consideration and expert care to foster their recovery and breast-feeding efforts. It is our moral and ethical responsibility as healthcare professionals to enable, foster, and promote breast-feeding among all families, especially those who stand to benefit the greatest. Substance recovery cannot be treated in isolation, nor can breast-feeding efforts; an interdisciplinary professional team effort promises the greatest chances for recovery success. With appropriate evidence-based practice support, training, and intervention by knowledgeable professionals, many women can overcome the biases and obstacles associated with opioid recovery to successfully breast-feed their babies.

Copyright © 2016 International Nurses Society on Addictions

[^Back to Top](#)



## Never Miss an Issue

Get new journal Tables of Contents sent right to your email inbox

## Browse Journal Content

- Most Popular
- Current Issue

- Past Issues
- For Authors
- About the Journal
- Register on the website
- Subscribe
- Get eTOC Alerts

## For Journal Authors

- Submit an article
- How to publish with us

## Customer Service

- Activate your journal subscription
- Activate Journal Subscription
- Browse the help center
- Help
- Contact us at:
  - EMAIL:  
customerservice@lww.com
  - TEL: (USA):  
TEL: (Int'l):  
800-638-3030 (within USA)  
301-223-2300 (international)
- 
- 
- Privacy Policy (Updated June 1, 2020)
- Legal Disclaimer
- Terms of Use
- Open Access Policy
- Feedback
- RSS Feeds
- LWW Journals
- Copyright © 2020
- International Nurses Society on Addictions

This website uses cookies. By continuing to use this website you are giving consent to cookies being used. For information on cookies and how you can disable them visit our [Privacy and Cookie Policy](#).

Got it, thanks!