

# Postpartum & Lactation Support Protocol



Clinical Protocol to Support the Health of Mother and Infant After Birth\*

The postpartum period (often considered the fourth trimester) begins following childbirth and lasts 12 weeks, during which a mother's body undergoes various physical and hormonal changes as it returns to a non-pregnant state.<sup>1</sup> It is an essential period that fosters an emotional bond between mother and baby and lays the foundation for both the mother's and newborn's short- and long-term health.<sup>2</sup> Individual postpartum experiences can vary widely; some mothers may experience additional challenges or complications during this time.<sup>1</sup> All mothers should work with health-care practitioners to support optimal recovery for themselves and their newborn. Mothers can also consider [Designs for Health Metabolomics Spotlight™](#) testing to investigate neurotransmitters and energy status within this period of life.\*

During postpartum, lactation begins. Breast milk provides the ideal infant nutrition, providing more easily digestible vitamins, proteins, and fats than formula.<sup>3</sup> Breast milk is recommended as the optimal and exclusive source of early nutrition for all infants from birth to at least six months of age (where complementary food can be introduced) and can be continued for years.<sup>4</sup> Breast milk contains compounds from the mother that help the infant fight off viruses and bacteria, such as certain commensal bacteria to colonize the neonatal gut, antibodies, immunoglobulins (IgA in particular), white blood cells, whey protein (lysozyme and lactoferrin), and oligosaccharides.<sup>3,4</sup> Studies show women who breastfeed are less likely to get type 2 diabetes mellitus, postpartum depression, hypertension, cardiovascular disease, and metabolic syndrome.<sup>2,5,6</sup> Breastfed babies have a reduced risk of asthma, allergies, ear infections, atopic eczema, gastrointestinal tract infections, respiratory illnesses, occasional diarrhea, diabetes, and obesity.<sup>2,3,5,6</sup>

This clinical protocol is designed to support mothers and infants during postpartum and lactation through evidence-based lifestyle, dietary, and nutrient interventions.\*

## Therapeutic Diet and Nutritional Considerations

A balanced nutritional intake postpartum and during lactation is critical to meet the increased nutritional requirements of the mother and the physiological demands of milk production.<sup>7</sup> Each case requires individual care; however, some dietary and nutritional considerations include:

- A balanced maternal diet rich in nutrient-dense whole foods, including vegetables, fish, grains, legumes, nuts, seeds, lean protein, and herbs.<sup>6,8</sup> Vegetarian or vegan mothers may be at greater risk of nutrient deficiencies, such as iron, vitamin B12, zinc, and long-chain omega-3 fatty acids.<sup>9</sup>
- Breastfeeding mothers require an additional 500 calories per day, totaling approximately 2,000 to 2,800 kcal per day.<sup>2,9</sup>
- Ensure adequate intake of common postpartum nutrient deficiencies, including fiber, vitamin D, vitamin K, iron, folate, calcium, vitamin B6, and zinc.<sup>7,10-12</sup>
- The recommended dietary allowances (RDAs) of iodine (290 mcg/day) and choline (550 mg/day) increase during breastfeeding. Iodine sources include dairy, eggs, seafood, or iodized salt, while choline can be found in dairy, eggs, meats, beans, peas, lentils, and some seafood.<sup>9</sup>
- Limit consumption of seafood due to the presence of heavy metals like mercury, which can pass from mother to infant through breast milk.<sup>9</sup>
- Caffeine can pass from mother to infant in small amounts through breast milk and is generally considered safe in low to moderate amounts (300 mg/day or less).<sup>9</sup>
- Limit or eliminate alcohol use during lactation. Moderate exposure (more than one standard drink/day) of alcohol through breast milk can be damaging to the infant's development, growth, and sleep patterns, especially within two hours of drinking.<sup>13</sup>

## Lifestyle Interventions

- According to the American College of Obstetrics and Gynecology, at least 40% of women do not seek postpartum care. Establish ongoing, continuous, comprehensive care with health-care practitioners, focusing on vaginal recovery, breastfeeding, nutrition, exercise, bladder and bowel function, sexual relations, and overall education.<sup>2</sup>
- Detect, diagnose, and treat appropriately for postpartum blues, postpartum depression, or postpartum psychosis, which affect up to 80%, between 10% to 15%, and one to two out of 1,000 new mothers, respectively.<sup>14</sup> Postpartum blues is short-lived, mostly remitting by ten days post-delivery, whereas postpartum depression can last for up to two years.<sup>14</sup>
- Mothers may have difficulty with lactation. Advise working with a certified lactation consultant.<sup>2</sup>
- Encourage slow, non-impact physical exercise, such as walking, or a gradual return to previous activities. Physical exercise can increase endogenous endorphins and opioids, which can promote positive effects on mental health.<sup>2,11</sup>
- Recommend patients establish a social circle of support to care for the mother and infant. This practice is associated with a decreased likelihood of postpartum depression and can help establish a regular sleep schedule.<sup>10,11,15</sup>

# Supplement Protocol

Primary Support:



Prenatal Pro™ Essential Kit	Vitamin D Supreme	Plant Protein Meal
<p><b>Dose</b></p> <p><b>Prenatal Pro™:</b> 4 capsules per day with meals (can divide dose)  <b>OmegaAvail™ Hi-Po:</b> 2 softgels per day with a meal  <b>OsteoForce™:</b> 4 capsules per day with a meal (can divide dose)</p>	<p><b>Dose</b></p> <p>1 capsule per day with a meal. Based on patient 25(OH)D status, can opt to take Vitamin D Synergy™ instead.</p>	<p><b>Dose</b></p> <p>Mix 39 grams (approx. one scoop) in 10 ounces of water per day. Best if consumed within 15 minutes.</p>
<p><b>Duration</b></p> <p>Throughout the entire pregnancy and post-pregnancy (particularly if lactating)</p>	<p><b>Duration</b></p> <p>Ongoing as needed</p>	<p><b>Duration</b></p> <p>Ongoing as needed</p>
<p><b>Formula Highlights</b></p> <p>Prenatal Pro™ Essential Kit is a comprehensive 30-day supply of three formulas designed to support mother and infant.* These products synergistically support a mother's health postpartum and provide the nutrients needed for healthy lactation for the newborn.*</p> <p><b>Each kit includes:</b></p> <ul style="list-style-type: none"> <li>• <b>Prenatal Pro™:</b> A multivitamin/multimineral formula designed to provide mom and baby with a broad foundation of key nutrients.</li> <li>• <b>OmegaAvail™ Hi-Po:</b> Essential omega-3s (DHA and EPA) from fish oil for newborn brain and nervous system development.*</li> <li>• <b>OsteoForce™:</b> Additional bone-supportive vitamins and minerals for strong bones and teeth.*</li> </ul>	<p><b>Formula Highlights</b></p> <p>Vitamin D Supreme provides clinically useful amounts of vitamin D3 and vitamin K (both K1 and K2 [as MK-4]), along with geranylgeraniol (GG). The amount of vitamins D and K in this formula may be beneficial for those who do not receive adequate sun exposure and/or dietary sources of these vitamins.* Vitamin D needs increase to 4,000 IU or more for the mother during lactation to support optimal vitamin D status for the mother and baby.<sup>16</sup></p> <p><b>Warning:</b> Consult your health-care practitioner before using this product if you are taking Coumadin, warfarin or other anticoagulant medications.</p>	<p><b>Formula Highlights</b></p> <p>Plant Protein Meal is a dairy-free, plant-based powdered meal supplement packed with vital nutrients your body needs for overall wellness.* It provides 16 g of pea protein isolate. This product supports protein and micronutrient status, healthy weight management, healthy fat metabolism, and supports retention of lean muscle mass.* It's the perfect choice for vegetarians, vegans, and those who require dairy-free nutritional support.* Available in either a pleasant chocolate or vanilla flavor.</p>

Secondary Support:



GPC Liquid	Whole Body Collagen™
<p><b>Dose</b></p> <p>Take 2 mL (approximately 2 droppersful) per day</p>	<p><b>Dose</b></p> <p>Mix 13 grams (approximately one scoop) in 8 ounces of water per day</p>
<p><b>Duration</b></p> <p>Ongoing as needed</p>	<p><b>Duration</b></p> <p>Ongoing as needed</p>
<p><b>Formula Highlights</b></p> <p>GPC, or L-alpha-glycerylphosphorylcholine, is a source of choline, which is a semi-essential nutrient that supports brain health and mitochondrial function.* Choline acts as a building block for cell membrane phospholipids and the neurotransmitter acetylcholine, supporting overall health.* GPC Liquid is an ideal choice when higher quantities of GPC are desired.</p>	<p><b>Formula Highlights</b></p> <p>Whole Body Collagen™ contains a unique blend of three patented collagen peptides supported by clinical research showing their efficacy for supporting collagen production, bone strength, joint health and integrity, skin elasticity, and more.* Collagen is a special type of protein that accounts for as much as 30% of the body's total protein. In particular, it's a primary structural component of connective tissue. Collagen is especially important for the post-partum skin remodeling needed for the abdomen and other areas that may have been affected by pregnancy.*</p>

For a list of references cited in this document, please visit:

<https://www.designsforhealth.com/api/library-assets/literature-reference---postpartum-lactation-protocol-references>

Dosing recommendations are given for typical use based on an average 150-pound healthy adult. Health-care practitioners are encouraged to use clinical judgement with case-specific dosing based on intended goals, subject body weight, medical history, and concomitant medication and supplement usage. Any product containing botanical substances has the potential for causing individual sensitivities, appropriate monitoring, including liver function tests (LFT) is recommended.

For considerations regarding herb-drug and nutrient-drug interactions, please refer to reliable, evidence-based resources such as the Natural Medicine Database or Stargrove MB, Treasure J, McKee DL. *Herb, Nutrient, and Drug Interactions: Clinical Implications and Therapeutic Strategies*. St. Louis, MO: Mosby-Elsevier; 2008.

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\*These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.