



# Smoking and your baby

THE FACTS!

### Health effects

When adults smoke and vape around babies and children, they breathe in the second-hand smoke, which can cause:

- Ear infections.
- More frequent and severe asthma attacks.
- Respiratory infections (bronchitis and pneumonia).
- Greater risk for sudden infant death syndrome (SIDS). (see fact sheet 'Second Hand Smoke')

Babies and children are also at risk from third hand smoke, which is cigarette smoke that gets absorbed into fabrics, furniture and surfaces (see fact sheet 'Third Hand Smoke').

The effects of 3rd hand vape aerosol are still being studied but they do contain toxic chemicals as lead.

They are particularly vulnerable because they get very close to contaminated surfaces and put objects in their mouths.

Third hand smoke can be absorbed through the skin, mouth, or lungs. This is thought to have a number of adverse health effects on babies and children, including on their developing brains and lungs. Never smoke inside the house or car.

to manage smoking around your baby:

Here's some tips on how

- Cover your hair while you smoke, for example, wear a shower cap or scarf which you keep outside of your house or car
- Change your top layer of clothing after every cigarette (you might like to have a top layer that you keep outside to wear while you smoke).
- Wash your hands and face thoroughly after you smoke and before you touch your baby. Ideally clean your teeth as well.



Quitting is best for you and your baby. It's never too late for you or your partner to quit.

Call the Aboriginal Quitline on 13 7848 (13 QUIT).



Talk to your GP or Pharmacist for further advice or call Quitline on the number above.















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## **Breastfeeding**

Breastfeeding is **best for babies and is also** good for the mother's health.

It's best for breastfeeding mothers to not smoke at all as nicotine from smoking passes rapidly into breast milk. If it is too difficult to quit, there are ways to ensure that your baby is still receiving the important nutrients from breast milk, which will protect them from the harmful effects of cigarette smoke, that baby formula cannot provide.

However, smoking reduces a mother's milk supply, while the nicotine from smoking passes rapidly into breast milk and can make the baby irritable.

Nicotine levels in breast milk reduce over time. If you smoke, it is best to breastfeed first before you have a cigarette. Also, the longer you wait after having a cigarette reduces the amount of nicotine you will pass onto your baby. The amount of nicotine in breast milk is halved about an hour and a half after a cigarette.

Chemicals from vaping will also pass on into breastmilk.

## **Nicotine Replacement Therapy**

While it would be ideal to quit without nicotine replacement therapy (NRT), it can be very difficult. Fortunately, NRT can be used by breast feeding mothers as the nicotine levels from NRT are much lower than they are from smoking, and you will not be exposing your baby to the many other harmful chemicals in cigarette smoke.

Intermittent NRT (gum, lozenges, spray) should be used rather than patches. **Breastfeed first, then chew the gum afterwards** to minimise the amount of nicotine getting into breastmilk.

Consult your GP or Pharmacist for advice on the right type and dose of NRT for you.



When quitting gets tough, remember that by becoming a non-smoker, you are giving your baby the best start in life.

Scan me!
Make the pledge today
to keep your baby
smoke free





Talk to your GP or Pharmacist for further advice or call Quitline on the number above.







