#### Potential Risk which could be associated with Consumption of some Human Breast Milk

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Potential Risk which could be associated with some Human Breast Milk > Categories where donated human milk may pose a risk

- Infectious Diseases
- Non-Infectious Contaminants
- Nutrition
- Contamination may be
  - Infectious or chemical (e.g., pharmaceutical, environmental)
  - intrinsic (in expressed milk) or extrinsic (introduced after milk expressed)

Potential Risk which could be associated with some Human Breast Milk

Intrinsic Infectious Risks
Extrinsic Infectious Risks
Noninfectious Risks

Intrinsic Risks which are Donor related

#### > Microbial

- -Viral
- -Bacterial and Mycobacterial
- -Fungal
- Parasitic

# Potential Risk which could be associated with some Human Breast Milk

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- bacteria, viruses, fungi or parasites Agents present because of
- Maternal infection or contamination after collection
- Unaware of any reports of direct infectious disease transmissions, including viral transmissions, from banked human donor milk within the US

Occasional literature reports of bacterial transmissions in neonates through ingestion of donor milk, where sources of bacterial contamination were identified in the hospital environment

#### **Reported Rates of Transmission**

Viral
Microbial

 Bacteria
 Mycobacterial
 Fungal

Parasitic

#### Transmission Rates of Viral Contaminants

Viral Contaminant	Transmission Rate to Breast-fed Infant	Screening Capability
Cytomegalovirus (CMV)	<b>38-76%</b> (1,2,3)	yes
Human immunodeficiency virus (HIV)	14-42% (7,9)	yes
Human T-lymphotropic virus type- I (HTLV-I)	<b>10.6-25%</b> (10)	yes
Human T-lymphotropic virus type- II (HTLV-II)	Claims of transmission, but data are inadequate regarding rate (See slide # 20)	yes
Hepatitis B (HBV)	negligible to $<4\%$ <sup>a (8,13)</sup>	yes
Hepatitis C (HCV)	negligible to 1% <sup>b</sup> (13,14,15)	yes
Bovine spongiform encephalopathy (BSE)	Infinitesimal (16,18)	no
West Nile virus (WNV)	rare (19)	yes

a = HBV present in 71% of breast milk samples but the transmissibility is negligible to <4%.

b= 20-29% of viremic mothers have detectable virus in their breast milk but vertical transmission is negligible to 1%.

## Isolated contaminants from expressed human milk that caused infection (cont.)

$\geqslant$	Acinetobacter sp. Enterobacter cloacae <u>Escherichia coli</u>	two two several
	Klebsiella sp	two **six (three from a single donor) six one death, several infections

\*\* can multiply at room temperature. *K. pneumoniae* and *P. aeruginosa* has crosscontaminated pasteurized milk.

Bibliography for this table is available at http://www.latrobe.edu.au/microbiology/table5.html

#### Isolated contaminants from expressed human milk that caused infection

- Serratia marcescens <u>\*\*</u>several
- Staphylococcus epidermidis (coagulase-negative) \*several; two deaths (mother's milk transported to twins)
- Staphylococcus aureus (methicillin-resistant) \_\_several; one death (transported from mother)
- Salmonella kottbus \*seven

\*from a single donor

\*\* can multiply at room temperature. *K. pneumoniae* and *P. aeruginosa* has cross-contaminated pasteurized milk

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#### Methods for Ensuring Safety

Available means of screening donors
Potential shortcomings of the system

# **Current Industry Practices that Mitigate Infectious Disease Risks**

- Donor screening and testing
- Self-exclusion
- Instructions to minimize contamination by the donor
- Milk bank storage and handling procedures
- Heat Processing
  - Holder or Flash Pasteurization
  - Kills or inactivates many infectious agents

## Methods for Ensuring Safety

Pasteurization -Types Holder, Flash -Effect on bacteria, viruses, parasites -toxins?

# Issues to consider with the sterilization process:

- Holder pasteurization (62.5C for 30 minutes) destroys HIV, CMV and skin bacteria and also eliminates or significantly decreases titers of most other viruses.
- Flash pasteurization (72C for 15 seconds) destroys CMV and 99% of skin bacteria are eliminated.
- At 56C, HTLV-1 is destroyed within 30 minutes and HIV-1 is reduced ten-fold after 121 seconds.

# Issues to consider with the sterilization process:

- 60C for 10 hours kills hepatitis B and almost eliminates hepatitis C in serum.
- Heating at 100C destroys staphylococcus and diphtheroids
- Pasteurization should kill all parasites which are rarely found in breast milk
- After pasteurization, milk has been contaminated with *Pseudomonas aeruginosa* when bottles (even with tight lids) were cooled in cold water containing the organism. Also, 14 infants had symptomatic infection with four dying of *Pseudomonas aeruginosa* that contaminated milk from a pasteurizer and bottle warmer during thawing of milk.
- After pasteurization, milk may be cross-contaminated with Klebsiella pneumoniae.

There is a report of *B. cereus* producing a toxin that survived sterilization and contaminated the milk at one bank even after the bacterium had been eliminated

# Issues to consider with the sterilization process:

Holder pasteurization has no effect on vitamin A, oligosaccharides or IL-8 but it completely destroys IgM, complement, milk cells and lipases. In addition, there is some decrease in bacteriostatic activity and a 30% decrease in secretory IgA and Ig G activity. Potential Risk which could be associated with some Human Breast Milk
Extrinsic or post milking contaminants:

Experience

**Potential Non Infectious Risks** which could be associated with some Human Breast Milk > Pharmacological contaminants Prescription/OTC drugs Drugs of abuse Tobacco Products Environmental contaminants Perchlorate Methyl mercury Heavy metals

## Non-Infectious Contaminants— Mitigation and Gaps

- Current industry practices to mitigate risks
  - Donor exclusion criteria for intake of drugs of abuse, medication, ETOH, tobacco
  - Donor instructions for self-deferral
- Gaps in risk mitigation
  - Donated milk not tested for contaminants
  - No information re: compliance with donor exclusions

## Uncertainties Related to Infectious Disease Transmission Risk

- No data to demonstrate direct infectious disease transmissions from banked donor milk
- Compliance with HMBANA or Prolacta protocols would mitigate infectious disease risks posed by banked donated human milk, but residual risk is unknown
- Risk level in human milk donor population is unknown
- Lack of data for evidence-based determination regarding the most important criteria to assure recipient safety

**Additional Reference for** Transmission Rates of Viral Contaminants > Ruff, Andrea J. Breast Milk, Breastfeeding and Transmission of Viruses to the Neonate. Seminars in Perinatology 1994; 18(6):510-516