**Candida (Thrush or Fungal Infection)**

Thrush in an infant is a fungal infection caused by a yeast, Candida. In babies, thrush often occurs when the lining of the mouth is cracked and moist. If your infant has thrush, he or she may have:

* White, irregular shaped patches coating the inside of the mouth and sometimes the tongue. (If the only symptom is uniformly white tongue then it is most likely due to a mild diet and not thrush).
* White Coating that sticks to the mouth that cannot be washed away or wiped off.
* Infant may also have a diaper rash that looks like red dots that seems to spread even with ointment.

**What is the cause?**

Most people have Candida in their mouth and other parts of the body. Sometimes certain conditions, such as antibiotics or too much moisture can cause yeast to grow rapidly and cause thrush. In babies, thrush often occurs where the lining of the mouth is cracking and moist from too much suckling (as when the baby sleeps with a bottle or pacifier). Thrush is usually not spread to others under normal conditions. However, if you are breastfeeding and your baby has thrush, the yeast could flare up and cause candida on your breasts. If your infant has a diaper rash with small red dots that seem to multiply then this is probably a yeast rash.

Yeast presents as unilateral, described as a “toe curling burning pain” that may or may not be associated with nursing. Most mother’s nipples are shiny and bright red in color.

**Treatment:**

For baby:

* Typically, treatment will be Nystatin liquid for Thrush, or Nystatin cream for yeast rash which will be prescribed by the pediatrician.
* If using bottles/pacifiers and pump pieces, should be sterilized by running through the dishwasher daily.
* If infant is diagnosed, mom can start using Lotrimin cream on her nipples.

For mother:

* Apply Lotrimin AF, Nystatin Cream or Dr. Newman’s cream the nipples twice daily (or as prescribed) and continue for 4 days after symptoms resolve.
* Wear breast shells to keep moisture away from nipples. Do not wear breast pads. Remember to clean the breast shells regularly
* Mother may want to start taking lactobacillus acidophilus tablets (probiotic) daily to maintain good flora in the gut, especially if either infant or mom have been on antibiotic therapy or has recurrent yeast.
* Minimize sugar in mother’s diet, especially refined sugars, dairy and yeast foods.
* Advised mother to apply a thin coating of cream to her nipples and to not use Lansinoh if yeast is suspected. There is no need to wipe off cream prior to breastfeeding.
* If mother’s symptoms become worse or there is pain in the breast, oral medication like Diflucan can be prescribed by her doctor.
* Yeast may take some time to resolve, but there should be gradual improvement.
* Some mothers may need to refill their oral Diflucan. Remember this is systemic yeast and may take some time to improve.

**Please contact our Lactation team at Cornerstone or your OB/MD if you have any questions or concerns.**

**Cornerstone Lactation Services**

**Savannah Pressley, IBCLC**

[**www.cornerstonepediatrics.org**](http://www.cornerstonepediatrics.org) **🏵 (919) 460-0993**