Breastfeeding Education:

Information for Families

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Introduction to the Breastfeeding Toolkit

- Each page of the toolkit discusses important topics to help families prepare for breastfeeding.

- The toolkit can be used as a guide for conversation between families and their health care providers.

- The information may be duplicated as needed. Clinics could consider placing a laminated copy in each exam room or in the waiting room.
Why Breastfeeding is Important

**Breastfeeding Is Good For Families**

Breastfeeding is convenient. The milk is always ready and warm.

With breastfeeding, there is nothing to buy, mix, or prepare for feeding. Formula costs more than $1700 for a year plus feeding supplies. **Breastfeeding is free!**

Breastfeeding is comforting for babies.

Formula is harder for your baby to digest because it is made from non-human sources such as cow’s milk or soy.

Breastfed babies are rarely constipated, so they are less fussy.

**Breastfeeding Is Good For Moms**

Women who breastfeed have less breast and ovarian cancer, diabetes, osteoporosis, rheumatoid arthritis, and heart disease.

Breastfeeding helps women bond with their babies and lessens the chance of postpartum depression.

Women who breastfeed are more likely to return to their pre-pregnant weight more quickly.

**Breastfeeding Is Good For Babies**

Breastfeeding helps to keep babies healthy.

Breast milk contains antibodies, growth factors, enzymes, and hormones that:
- fight off infections during infancy
- provide life-long protection against many diseases (less obesity, diabetes)
- promote healthy infant development

Babies who breastfeed have lower rates of pneumonia, ear infections, and SIDS.

At six months, baby foods are started. Breastfeeding continues through at least the first year. Breast milk is beneficial and protective beyond the first year as well.

Breast milk is perfect nutrition and provides everything that baby needs to grow and develop.
Early Skin-to-Skin Contact

What is Skin-to-Skin?

Skin-to-skin means your baby is placed unclothed onto your chest, against your skin, and under a blanket or your clothing. (Baby may have a diaper on if you prefer.)

This happens right after birth, as soon as you are ready. The sooner the better for you and your baby.

Regardless of the feeding method, all babies love to snuggle skin-to-skin. So do this as much as possible, especially while breastfeeding.

What does Skin-to-Skin Do?

- Helps to keep baby warm.
- Baby has better oxygen and blood sugar levels.
- Causes your uterus to contract and bleed less.
- Helps baby feel calm and comforted so baby cries less.
- Promotes feelings of closeness and protectiveness.
- Provides the best opportunity to get breastfeeding started.

How Does Skin-to-Skin Help Breastfeeding?

- Baby is already very near the breast before starting to show interest in feeding. This makes latching on easier.
- Baby can smell colostrum (the first milk) at birth. Amniotic fluid has a similar smell to colostrum, so baby is drawn to the breast by the familiar smell.
- When left undisturbed between your breasts, baby may nuzzle down to the nipple and latch on unassisted.
- Baby breastfeeds better and longer overall.
Babies are usually wide awake after birth. This is the best time to start breastfeeding.

After this alert period, babies often sleep for the rest of their first day. During the next two days babies tend to feed every one to three hours.

These frequent feeds help you make more milk.

As soon after birth as possible, place your baby skin-to-skin on your chest. This helps calm your baby while getting used to life outside of the womb. Holding baby on your chest can help baby latch on any time after birth.

Laid-back positioning will help you rest while your baby feeds.

After resting skin-to-skin with you, your baby may start moving towards the breast and self-latch with only your gentle support.

This position is known as “laid-back” nursing.

Baby can self-latch in this laid-back position not only at birth, but any time.
Helping Baby Latch

When snuggled close and given enough time, many babies will self-attach to the breast.

Hold your baby close to you, tummy to tummy, with baby’s chest touching the base of the breast. Start with baby’s nose close to and level with the nipple.

Tickle and stroke baby’s top lip with the nipple or gently touch baby’s chin to the breast under the nipple.

Be patient. Wait until your baby opens really wide, with the tongue down.

If you are sitting up or side-lying, hug baby towards the breast to help get a deep latch.

Watch as baby takes a big mouthful of breast, not just the nipple. This helps baby get more milk and the feeding will be more comfortable for mom.

If it feels painful for more than a few seconds, insert your finger into baby’s mouth to break the suction, remove baby, and re-latch. Baby may then open his/her mouth wider and get a more comfortable, effective latch.
Position and Latch

Helping Baby Latch On To Your Breast

• Hold your baby close, with baby’s tummy touching your tummy. Hold baby at the level of your breast. Use pillows under baby if needed.

• Have one hand support baby at the neck and shoulders. Use the other hand to support the breast well behind the areola (the darker skin at the base of the nipple).

• Tickle baby’s upper lip with the nipple and wait for baby to open wide. When baby opens wide, bring baby onto the breast, leading with baby’s chin. Keep hugging baby to you.

• Baby should take a big mouthful of breast, not just the nipple. This helps baby get more milk and the suckling should feel comfortable.

• If it feels painful for more than a few seconds, insert your finger into baby’s mouth to break the suction, remove baby, and re-latch. Baby may then open his/her mouth wider and get a more comfortable, effective latch.

• You can breastfeed with baby held across your chest, tucked under your arm, beside you, or lying on you in the laid-back nursing position.
The Family Room: Keeping Baby Near

Your baby will stay with you in a family room throughout your hospital stay. Staff will care for you and your baby in the room. This includes weighing, baths and medical checks.

Staff will help you learn about infant care and feeding.

Baby goes to the Nursery only when necessary for medical procedures (like the hearing test) or if close medical observation is needed.

Dad/partner or other support person is welcome to stay overnight in the family room, too.

What About Sleep?

- Most newborns feed frequently in the evening and early night-time, sleeping more in the morning and early afternoon. Take advantage of sleep opportunities – *Sleep when your baby sleeps, even during the day.*

- In order to do this, limit visitors and take yourself “off-line”.

- Some mothers choose to have a support person cuddle with baby in the room while they sleep.

Benefits of the Family Room

- Baby sleeps better and cries less. It is less stressful for the newborn baby when mother is near. Your room is quieter than the Nursery.
- Baby feeds more often which helps your milk supply.
- Baby starts gaining weight sooner after birth and develops less jaundice.
- Frequent breastfeeding leads to more milk more quickly, and less engorgement later.
- You get to know and bond with your baby more quickly.
- Maternity staff are there to help at any time during those first days and nights, unlike at home.
- Parents feel much more confident about baby care and breastfeeding before going home.
Feeding on Cue

What is Feeding on Cue?
Feeding on cue simply means feeding whenever your baby shows feeding signs.

Feeding signs are signs of hunger.
Crying is a *late* hunger sign. Plan to start feedings before baby is crying with hunger whenever possible.

Feed baby *whenever* baby wants for as *long* as baby wants.

Feeding Signs:
- Mouthing movements
- Sticking the tongue out
- Rooting
- Hand-to-mouth movements

Feeding on Cue & Milk Supply
Milk Supply is determined by how often the baby nurses and empties the breasts.

Frequent breastfeeding in the few weeks after birth assures a good milk supply for months to come.

*Your baby prefers you.* Wait until 3-4 weeks of age before giving a bottle or pacifier. This will help your baby breastfeed better and sooner.

What are the Advantages of Feeding on Cue?
- Babies settle into a relaxing feed faster when feeding starts soon after baby shows the first signs of hunger. Babies enjoy feedings more when they don’t have to cry to be fed.
- Feeding is comfort as well as nutrition. Newborns love constant closeness and feeding and cannot be held “too much” or “spoiled”.
- Newly born infants need small frequent feedings in the first days of life. One to three teaspoons fills a newborn’s stomach.
- Breastfed babies need frequent breastfeeding to build their mother’s milk supply.
- Babies feed around the clock, sometimes every hour. This is known as *cluster feeding*.
- Babies have less jaundice when fed frequently.
First Milk is Called Colostrum

Colostrum is the first milk that baby gets at birth. This milk is very rich in protein and protective antibodies.

The amount of colostrum matches the baby’s tiny stomach, so it will not be overfilled. Milk volume increases gradually at first, allowing time for baby’s stomach to expand comfortably. A feeding is one teaspoon on the first day of life because baby’s stomach is the size of a marble.

The small volumes available at birth are also easier for baby to handle while learning to coordinate breathing with sucking and swallowing.

All Babies Lose Weight in the First Few Days

Babies return to birth weight by two weeks.

The weight loss that all babies experience in the first few days after birth is simply “water weight”.

Healthy full-term infants are also born with fat stores that will cover their needs if they are very sleepy or have trouble latching in the first days.

Your body knows how much milk to make by how often your baby feeds. If you give your baby formula, your body may not know how much milk to make.

Why Only Breast Milk?

• Introducing other foods or fluids too early can cause problems for breastfeeding and for your baby’s health.
• Babies need no other food or fluid, including water.
• Feeding only breast milk maximizes the protection against disease and infections.
• Feeding only breast milk makes it easier for mother to continue breastfeeding, especially if returning to work.
• The milk supply is easier to maintain if solids are introduced when baby is 6 months.
• Getting the best nutrition in the early months of life provides the most long-term benefits.
• Wait until 6 months to start baby foods. Plan to continue breastfeeding through the first year.
• Breast milk offers benefits beyond the first year as well.
Making Milk

Getting Started

Feed early and often to make plenty of milk!

Feeding early (in the first hour after birth) and feeding often (8-12 times in 24 hours) helps your body to make just the right amount of milk.

Colostrum, the first milk, is available at birth. This milk is packed with calories. A few drops (one teaspoon) are all your baby needs each feeding in the first days.

Babies sometimes cluster feed – feeding every hour for a few hours in a row – and then sleep for several hours.

Breast milk continues to provide immune protection and excellent nutrition for as long as mother and baby choose to breastfeed.

The First Few Weeks

You will have more milk by days 3–5. Breasts will quickly become heavier and firmer. These are signs that your milk supply is growing.

This is the time to feed your baby frequently. Let the baby finish feeding on the first breast before offering the other breast.

Use of bottles or pacifiers in the first days can make it difficult to have a full milk supply later. Bottles may also interfere with baby learning how to latch well. Some newborns may even refuse to latch and breastfeed after being given a bottle or pacifier.

Plan on waiting to start bottles and pacifiers until baby is 3-4 weeks of age.

The First Month & Beyond

• The milk volume continues to increase over 6-7 weeks in response to a newborn’s frequent feedings (“supply and demand”).
• Continuing to breastfeed often and at night builds the milk supply. Soon the breasts will feel softer between feedings, yet are making more milk than in the first week or two.
• Babies may nurse more on some days than others. Some (not all) babies may later reduce feedings to 6-8 times per day yet continue to gain weight well.
• Night feedings help maintain milk supply.
• Your body knows how much milk to make by how often your baby feeds. If you give your baby formula, your body may not know how much milk to make.
How Do I Know My Baby Is Getting Enough Milk?

**What Tells You Baby is Getting Enough Milk?**

- Make use of a breastfeeding log to track your baby's diapers in the first week. This log will help you know your baby is getting enough milk.
- By day five, your baby should pass 3 to 4 yellow stools a day and wet at least 5 diapers.
- Baby is starting to gain weight by 5 days of age and is back to birth weight by 2 weeks of age.

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**What Does NOT Tell You About Baby Getting Enough Milk?**

- Fussy baby
- Amount baby sleeps
- How much milk you pump
- How long and how often your baby nurses
- How much baby takes from a bottle

Breastfeeding: Off To A Good Start