

BREASTFEEDING



Why/Benefits

Breastfeeding releases maternal hormones prolactin (the mothering hormone) and oxytocin (the love hormone). These hormones cause milk letdown, uterine contractions, decrease postpartum bleeding, and feelings of love and relaxation.

Breastfeeding production burns 600 calories/day!

12-24 months of breastfeeding can reduce your risk of ovarian cancer by one third.

Colostrum and breast milk are full of antibodies to keep babies healthy

Breastfed babies are less likely to have infections, rash, and colic

Breastfeeding decreases the risk of SIDS by 36%

How to Prepare

- Pack clothes that easy to breastfeed in. Such as nursing bras/tanks, button up shirts, V-neck shirts, loose clothing.
- Set up a breastfeeding basket with snacks, water, a book/tablet/TV remote so you don't have to get up in the middle of a feed.
- Discuss your goals with your partner/family and ways they can be supportive.
- Learn how to set up and use your breast pump – but don't try it out yet!
- If you will be returning to work, make a plan with your employer to support your breastfeeding goals

How Partners Can Help

- When one parent is in charge of feeding, the other parent can be in charge of diaper changes and soothing a fussy baby who isn't hungry.
- Feed the breastfeeding parent when the baby is nursing – lactation requires an extra 500 calories!
- Support skin to skin time
- Ensure a quiet and relaxing environment for nursing to take place
- Learn early hunger cues
- Be encouraging!

First Time!

- Newborns tend to be awake and alert in the first 2 hours after birth. If possible, try to breastfeed in this window of time.
- Create as much skin to skin contact as possible, a blanket can go behind baby but should not interfere with skin contact.
- Lay back – often our instinct is to lean over baby to feed, but this hurts your back and doesn't allow baby to get a good latch.
- Support your body with pillows strategically placed behind your back, neck, and under your arms.
- <https://www.youtube.com/watch?v=KYRg8DTbZCc> – Laid back breastfeeding
- <https://www.youtube.com/watch?v=OKVAOUILFq0> – Breast crawl to first feeding

Hunger Cues

Early Cues

- Bringing hands to mouth
- Lip-smacking, sucking motions, sticking tongue out
- Nuzzling/rooting, searching for breast

Late Cues

- Moving head frantically from side to side
- Crying – usually low-pitched, short

Developed by Women's and Newborn Services
Royal Brisbane and Women's Hospital

EARLY CUES - "I'm hungry"



- Stirring
- Mouth opening
- Turning head
- Seeking/rooting

MID CUES - "I'm really hungry"



- Stretching
- Increasing physical movement
- Hand to mouth

LATE CUES - "Calm me, then feed me"



- Crying
- Agitated body movements
- Colour turning red

Time to calm crying baby

- Cuddling
- Skin to Skin on chest
- Talking
- Stroking



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Queensland Government

Good vs Bad Latch

- A good latch allows the nipple to reach the back of the newborn's mouth, helping your baby get a deep latch will help you avoid painful and cracked nipples.
- A deep latch means baby should have the entire nipple and about 1 inch of surrounding areola in their mouth. You may notice dimpling in baby's cheeks if the latch is not deep enough.
- Baby's lips should be flanged like a fish. Some newborns tend to tuck in their bottom lip, you can gently pull it back out when they latch.
- Baby's tongue should be down, make sure it isn't at the roof of the mouth before latching on. If you hear a clicking sound babies tongue may be touching the roof of the mouth.
- If you have a bad latch use one finger at the corner of baby's mouth to break the seal, pull baby back from the breast and try again.

Breast-Feeding Positions



Cradle hold



Cross-cradle hold



Football hold



Lying on your side



Laid-back

Positions

These are just a few of the most common positions. As you and baby get comfortable you may find your own, unique, position.

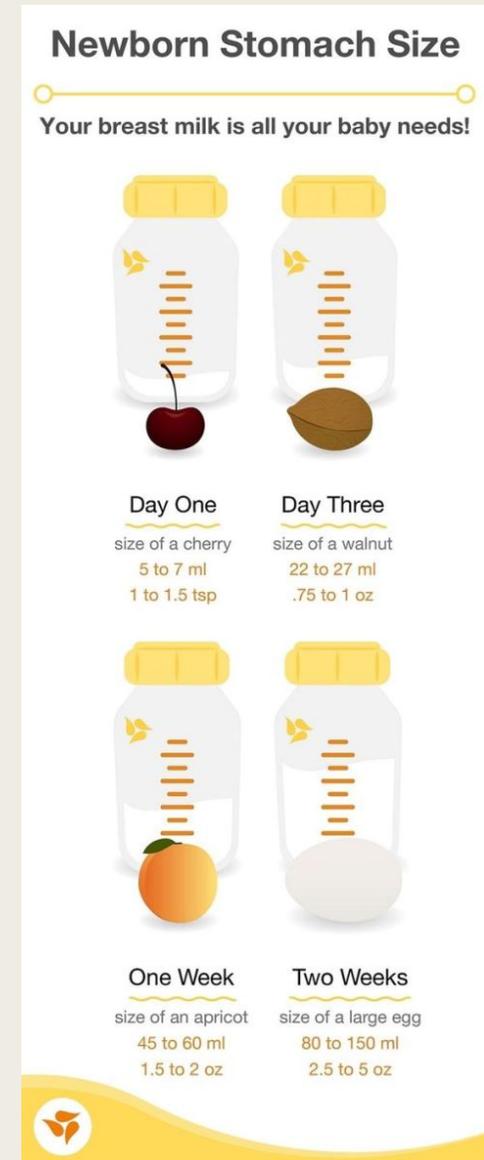
- Get comfortable
- Support your breast
- Support baby's head
- Latch!

Is My Baby Getting Enough Milk?

Many parents want to know how to measure the amount of milk baby is getting. A newborn's stomach is very small!

Reassuring signs include:

- Breasts feel soft and baby is content after feeding
- Baby is feeding 8-12 times in 24 hours
- 6+ wet diapers/day
- 3+ dirty diapers/day
- Baby should gain birth weight by 14 days after delivery and then 5-7 oz/week. If baby is not meeting these milestones call your pediatrician and lactation consultant.





<https://www.goodmorningamerica.com/family/video/clever-dad-tricks-baby-bottle-feeding-61822148>

Supplementing

Babies may need to supplement feeds at the breast for various reasons. Some reasons such as inability to latch, sore breasts, or separation before supply is established should be evaluated by a lactation consultant.

Supplementing can be achieved with cup, bottle, or a small feeding tube on a finger or at the breast. Some people choose to not use a bottle because baby has trouble latching at the breast and they do not wish to cause nipple confusion.

To ensure adequate supply, make sure you express milk for every feed you supplement.

You may need to try different nipple shapes and sizes to get your baby to take a bottle.

- Introducing a bottle - <http://www.breastmilkcounts.com/your-milk-supply/introducing-a-bottle/>

Medications and Breastfeeding

Make sure you inform all healthcare providers that you are breastfeeding so that they can prescribe breastfeeding safe medications. Most over the counter medications are safe to take while breastfeeding, but you should follow the below guidelines:

- Avoid long-acting, extra-strength, and multi-symptom medicines as they may contain higher doses than safe in breastfeeding
- Read labels about how it may affect breastfeeding
- Medications can be checked on the LactMed app or at <https://toxnet.nlm.nih.gov>
- Infant Risk has a hotline of experts available during normal business hours at: (806) 352-2519

American Academy of Pediatrics Guide to Storing Fresh Breast Milk

Place	Temperature	How Long	Things to Know
Countertop, table	Room temp (up to 77°F)	Up to 4 hours is best. Up to 6 to 8 hours is okay for very cleanly expressed breast milk.	<ul style="list-style-type: none"> • Store breast milk in small batches. 2 to 4 ounces is recommended to prevent waste. • Any remaining breast milk left in a bottle after your baby is finished with a feeding should be used within 2 hours, or, if quickly refrigerated, used for the next feeding. You can always thaw an extra bag if needed.
Refrigerator	39°F or colder	Up to 4 days is best. Up to 8 days is okay for very cleanly expressed breast milk.	<ul style="list-style-type: none"> • Store breast milk in the back of the refrigerator. • To warm breast milk from the refrigerator, place the bottle in a bowl of warm water or run it under warm water. Heating breast milk in microwaves is not safe.
Freezer	0°F or colder	Up to 9 months	<ul style="list-style-type: none"> • Store breast milk toward the back of the freezer. • Breast milk expands as it freezes, so do not fill the milk all the way to the top of the storage container. • To thaw breast milk from the freezer, put the bottle or bag in the refrigerator overnight, hold it under warm running water, or set it in a container of warm water. Heating breast milk in microwaves is not safe. • Once breast milk is thawed, it can be stored in a refrigerator and must be used within 24 hours.
Deep freezer	-4°F or colder	Up to 12 months	<ul style="list-style-type: none"> • Store breast milk toward the back of the deep freezer. • Breast milk expands as it freezes, so do not fill the milk all the way to the top of the storage container. • To thaw breast milk from the deep freezer, put the bottle or bag in the refrigerator overnight, hold it under warm running water, or set it in a container of warm water. Heating breast milk in microwaves is not safe. • Once breast milk is thawed, it can be stored in a refrigerator and must be used within 24 hours.

Storing and Preparing Breast Milk

You do not need to build up a large stash before returning to work. In fact, refrigerated milk should be used within 8 days. Milk may be frozen up to 9 months (12 months if in a deep freezer) however if you continue to pump while working you will have a fresh supply available!

- Thoroughly wash your breast pump, containers, and hands before/after pumping
- Store only 2-4 oz per container; any milk left in a bottle after a feeding should be used within 2 hours or at the next feeding if refrigerated quickly.
- Freshly expressed milk can remain at room temperature up to 4 hours but it is best to refrigerate/freeze it as soon as possible.
- Warm breast milk by running it under warm water or placing it in a bowl of warm water – never microwave breast milk as it can create hot spots that scald baby.
- Milk can be thawed in the refrigerator or by the above method; thawed milk must be used within 24 hours.

Engorgement vs Mastitis

Engorgement is when the breasts fill with milk, they may become hard, heavy, and tender to touch. You might notice it when your milk “comes in” or any time you go longer than usual without feeding or pumping after your supply is established.

Treating Engorgement:

- Feed on demand, do not pump extra (more demand = more supply)
- Apply warm washcloths to the breast just before feeding
- Use frozen cabbage leaves or ice packs between feedings to ease pain
- Engorgement usually goes away in 3-4 days

Mastitis is an inflammation or infection of the breast. Often it affects only one breast, there may be a red area on the outside of the breast, and you may experience flu like symptoms (fever, fatigue, headache)

Treating mastitis requires evaluation by a healthcare professional such as your primary care provider or lactation consultant.

HELP! Breastfeeding Resources

- Texas WIC: <http://www.breastmilkcounts.com> and <https://texaswic.org/breastfeeding>
- La Leche League: <https://www.texaslll.org>
- Infant Risk Center: <https://www.infantrisk.com>
- Mom's Place Austin: <https://www.austintexas.gov/momsplace>
- International Lactation Consultant Association: <https://www.ilca.org/why-ibclc/falc>
- LactMed: <https://www.toxnet.nlm.nih.gov/newtoxnet/lactmed.htm>
- Central Texas Breastfeeding Coalition: <https://keepaustinbreastfeeding.com>
- Partners in Parenting: <https://www.pipaustin.org/>
- Breastfeeding and the Law: <http://www.breastmilkcounts.com/working-moms/your-rights-and-the-law/>

Nursing In Public

- Texas law states, “A mother is entitled to breast-feed her baby in any location in which the mother is authorized to be.”
(<https://statutes.capitol.texas.gov/Docs/HS/htm/HS.165.htm>)
- Some babies like being covered with a light blanket while nursing in public as it increases warmth and decreases distractions. However, some babies hate being covered and it is not a requirement for breastfeeding in public.
- Attire that is convenient for nursing in public include: button down shirts, V-neck tops, specially made breastfeeding shirts, breastfeeding camisoles and bras.
- What is important is finding a way that is comfortable for you.
- <https://austinfamily.com/a-new-moms-guide-to-nursing-in-public/>