

Breastfeeding



A Bit About Your Hospital Stay

First time mothers and cesarean sections typically stay 48 hours.

Multipara moms typically stay 24 to 48 hours.

This all depends on how you are recovering from birth and how well baby is feeding.

Remember:

Baby will be feeding often during the day and night. Get as much rest during the day as possible.

If you have concerns or questions before going home, speak up and let your nurse know.

Breastfeeding is Natural

Breastfeeding is natural, but natural is not always easy.

Breastfeeding is a new skill and learning a new skill takes time and practice.

Benefits For Parent and Baby

Parent

- Promotes bonding with baby
- Helps breastfeeding parent lose weight more quickly
- Decreases risk of Type 2 Diabetes, cardiovascular disease, ovarian and breast cancers
- Reduces risk of developing rheumatoid arthritis, high blood pressure, and high cholesterol
- Reduces the risk of osteoporosis
- Reduces postpartum depression

Baby

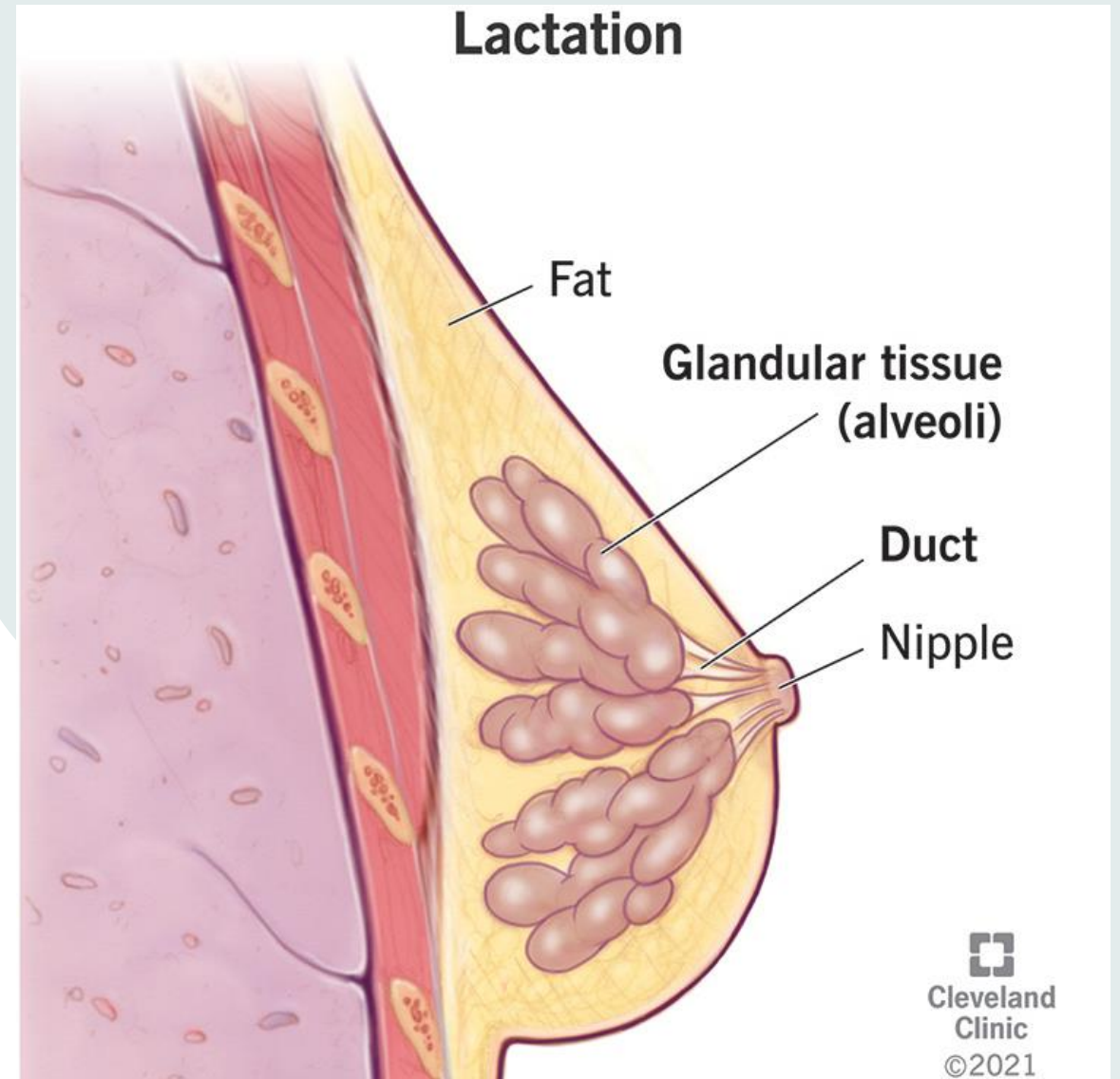
- Supports growth and development
- Provides perfect infant nutrition
- Satisfies baby's emotional needs
- Decreases risk of SIDS
- Protects against obesity, diabetes, childhood illness
- Reduces risk of allergies
- Breastfed babies have improved IQ's, school performance, and long-term productivity

Lactation

The process of making breast milk.

Hormonally driven

Continues as long as milk is being removed from your breasts



How Milk is Produced

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There are three stages:

Stage 1 Lactogenesis- (secretory initiation)

- Begins around 16th week of pregnancy
- Estrogen and progesterone cause milk ducts to grow in number and size. Breasts become fuller.
- Montgomery glands secrete oil to lubricate your nipple
- Body begins to make colostrum

How Milk is Produced

Slide 2 of 3

Stage 2 Lactogenesis (secretory activation)

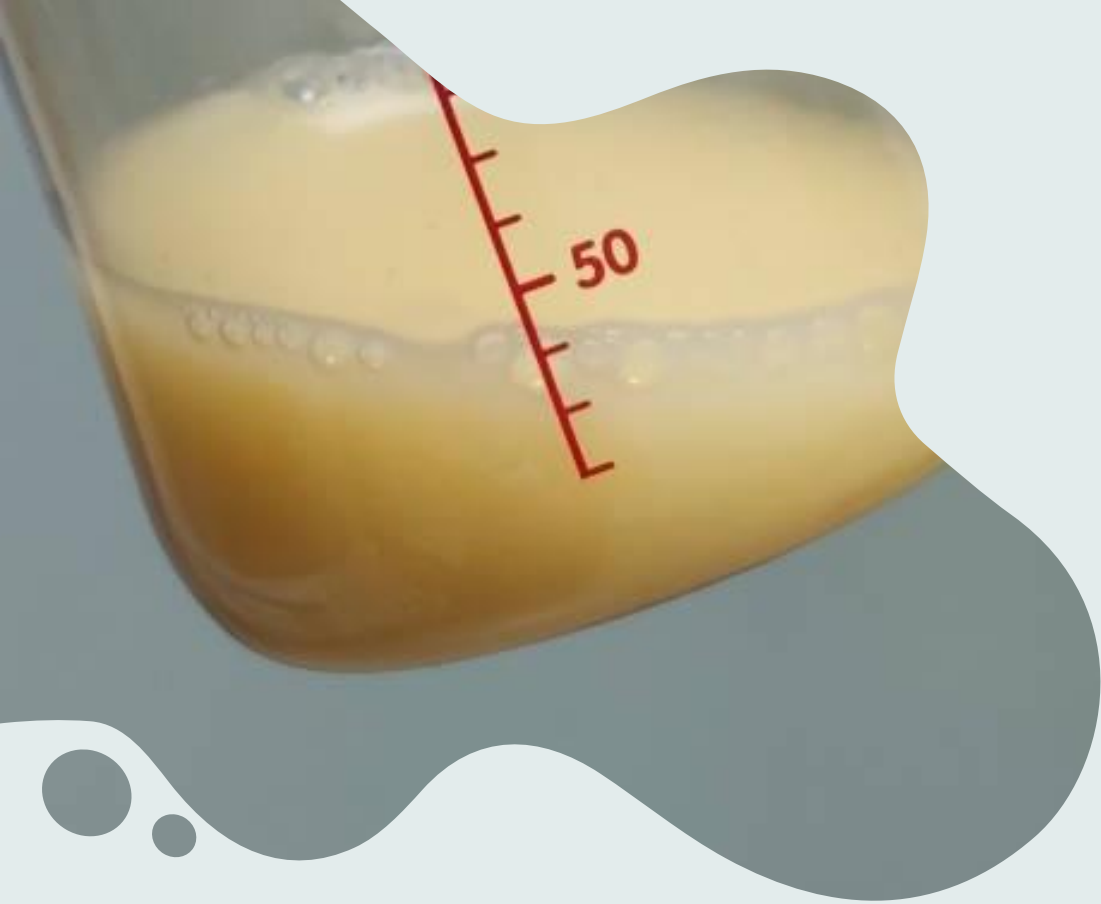
- Occurs after giving birth. Milk production intensifies
- Once baby and placenta are delivered, sudden drop in estrogen and progesterone causes prolactin to take over
- Nipple stimulation causes the release of prolactin and oxytocin

How Milk is Produced

Slide 3 of 3

Stage 3 Lactogenesis

- Lactation continues as long as milk is removed from your breast
- The more milk that's removed, the more milk your body makes to replace it.



Changes in Breastmilk

Slide 1 of 4

Colostrum:

- It appears as semitransparent, thick and sticky and may range in color from pale yellow to a deeper golden shade.
- It acts as a lubricant and aids in emptying the baby's bowel of thick meconium (dark green stool).
- It is also the baby's first immunization against bacteria and viruses.
- It is made in small amounts that will fill the baby's small stomach. The stomach grows/expands in the first few days after birth, and the supply of colostrum increases during this time as well.

Changes in Breastmilk

Slide 2 of 4

Transitional milk:

- Is produced in greater volume by the body starting around the third day after birth and continues to change until mature milk is made.
- The color of the milk can change.
- Transitional milk is a combination of colostrum and mature milk.
- It is important to note that colostrum is part of your milk for approximately 21 days after birth.



Changes in Breastmilk

Slide 3 of 4

Mature milk:

- Is reached between 2-3 weeks after birth.
- It can resemble 1% milk in color/thickness.
- Mature milk has both foremilk and hindmilk. Both are nutritious and important for the baby to have:
 - Foremilk is higher in water (helps to quench the baby's thirst) and water-soluble vitamins. It is also high in lactose – the sugar that gives the baby energy to complete the feeding. Foremilk is what the baby receives at the beginning of the feeding.

Changes in Breastmilk

Slide 4 of 4

O Hindmilk is higher in fat and other vitamins. The higher fat milk adds the extra calories and helps the baby to feel full and sleepy!

- The transition from foremilk to hindmilk occurs naturally as the baby drains the breast.
- There is an increased concentration of immune system boosters in the second year which helps to provide more protection.



Breastmilk Changes to Suit Your Baby!

It changes:

- according to the gestational age of baby at birth. (The milk of a mother giving birth before 37 weeks of gestation has more protein and higher levels of some minerals)
- with baby's age (colostrum → transitional milk → mature milk)
- according to time of day (more fat at night)
- during the feeding (foremilk is higher in water and water-soluble vitamins, and hindmilk is higher in fat and calories)
- according to season (during the summer, the milk contains more water)
- with what you eat and drink (flavour changes)
- between breasts (tandem nursing)
- with exposure to infection (increased white cells), for either the baby or the breastfeeding parent.

How to Maintain Milk Production

- Frequent breastfeeding or pumping
 - Feed on demand
 - 8-12 feedings in a 24-hour period
 - Offer both breasts each feeding
- Ensure effective milk removal
 - Proper latch
 - Empty breasts
 - Breast compression
- Prioritize self-care
 - Healthy diet
 - Stay hydrated
 - Get enough rest
 - Limit alcohol, caffeine and smoking
- Other tips
 - Skin to skin
 - Avoid pacifiers, artificial nipples until lactation is established
 - Hands on pumping

The Second Night

The first few days of life with a newborn are a learning experience. Your baby is no longer in the warm, comfortable womb and has to adapt to unfamiliar sounds, light, smell and temperature. It is common that the newborn wakes up and parties on the second night!

Some parents start to think that the baby is not getting enough to drink or are "using them as a soother"! Many newborns just need the reassurance that is provided by breastfeeding and skin-to-skin. This will help them feel comforted and more settled. Frequent feedings during this time will really help milk production.

Engorgement

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- Breasts become firm, swollen, and warm
- Occurs if you do not breastfeed or express enough
- Very engorged breasts are hard and painful, and may be difficult for infants to latch onto
- Important to remove milk either with breastfeeding or expression
- Persistent engorgement can reduce milk production and can lead to latch difficulties, blocked ducts, or mastitis

Engorgement

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To relieve engorgement:

- Apply moist heat to breasts before feeding (shower or warm washcloth)
- Express milk before feeding to soften breasts and make latching easier
- Express milk after feeding until breasts are no longer hard or lumpy
- Massage breasts to help milk flow
- After feeding, place ice pack on breasts for 15 to 20 minutes to reduce swelling

Nutrition While Breastfeeding

- 340-400 more calories per day
- Make healthy choices
 - Protein rich foods-lean meat, eggs
 - Whole grains
 - Fruits and vegetables
- Eat a variety of foods
- Drink plenty of water
- Vegetarian or vegan diet
 - Foods rich in iron, protein and calcium
 - Think about adding supplements

Newborn's Stomach Size



Day 1

Size of a cherry
about 6mL



Day 3

Size of a walnut
about 27mL



One Week

Size of an apricot
45-60mL



One Month

Size of a large egg
80-150mL

Breastfeeding Positions

**Football Hold,
Clutch, Rugby**

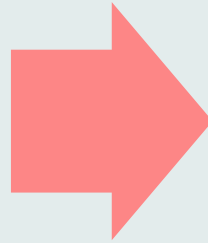


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Feeding Your Baby- Positioning

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Positioning can make a difference for both you and your baby during feedings. There are no definite rules, however, there are some checkpoints or tips to help. The goal is that you are comfortable, and the baby has easy access to the breasts and achieves a good latch.



Tips:

- Find a position that is comfortable for you.
- Use good posture and body alignment.
- Avoid leaning forward to breastfeed. Bring your baby to you and not your breast to the baby.
- Support your back and arm.

Feeding Your Baby- Positioning

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Baby's position:

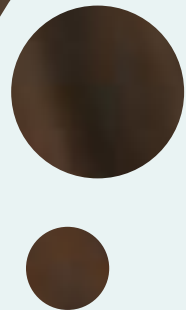
- Base of the head and body are supported.
-
- Head is at the level of the breast or slightly under your breast.
-
- Ear, shoulder, and hip are in a straight line.
-
- Head and neck are slightly extended in a sniffing position.
-
- Chest is facing your chest (chest-to-chest & tummy to tummy).
-
- Nose is facing your nipple and the baby's chin touches your breast.



Laid-Back Position

Cross-Cradle Hold





Cradle Hold

Side-Lying Position



Baby Feeding Cues (signs)



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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Hunger Cues

Frequency and Length of Feedings

Breastfeed your baby within the first hour after delivery

When baby suckles, you should feel a tug-but not pain

The frequency with which baby feeds determines your milk supply

Feeding your baby regularly, making sure the baby is properly latching on to the breast and suckling are key to maintaining sufficient breast milk supply and preventing breast engorgement

Hand Expression

<https://med.stanford.edu/newborns/professional-education/breastfeeding/hand-expressing-milk.html>

<https://firstdroplets.com/?sfns=mo>

Signs of Effective Milk Intake

Slide 1 of 2

Swallowing

- Listen for the sound of swallowing; May see the chin drop with a pause before swallowing

Sucking

- Should start with rapid, short sucks to initiate milk flow then change to slow, deep and rhythmic sucking

Cheeks

- Should appear full and rounded during sucking, not hollow or sunken

Relaxation

- A satisfied baby will be relaxed, calm and may fall asleep after feeding

Signs of Effective Milk Intake

Slide 2 of 2

Diapers

- Should have at least one wet and one dirty diaper per day, increasing with age

Breast Feel

- Should feel softer after the feed, indicating that the baby is moving milk

Nipple appearance

- Nipple should look more or less the same after the feed, not flattened, pinched, or white

How To Tell If Infant Is Getting Enough

Typical patterns for wet diapers are:

1 wet diaper on day one

2 wet diapers on day two

3 wet diapers on day three

4 wet diapers on day four

5 wet diapers on day five

6 wet diapers on day six and from then on

Look for light yellow to clear urine

Typical patterns for stools are several per day:

Day 1 Meconium (dark & tarry)

Day 2 Brownish

Day 3 Brownish yellow

Day 4 Dark yellow, soft

Day 5 Yellow, semi-liquid

Some newborns stool after every feeding

Stools taper off and may not even occur every day as your baby gets older

Common Challenges

Slide 1 of 3

Treatment:

Sore Nipples

- Includes blisters, cracks or redness on one or both nipples
- Result of infant not latching on correctly

- Coat the sore nipple with expressed milk after each feeding
- Apply lanolin after each feeding
- Begin breastfeeding on least sore breast
- Rotate positions to ensure adequate drainage and to change contact area of infant's mouth on the nipple
- If nipples too sore, pump to keep supply going

Common Challenges

Slide 2 of 3

Plugged Ducts:

- If milk doesn't flow freely, a duct can become blocked
- Feels like a small, firm, tender area in breast
- Can lead to mastitis

Treatment:

- Take a shower or apply moist heat, and gently massage breast before feeding
- Nurse often on affected breast
- Gently stroke blocked area while infant is nursing
- Express after feeding if necessary
- Get lots of rest

Common Challenges

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Mastitis:

- Breast infection
- Symptoms:
 - Painful, firm, red area on breast
 - Fever
 - Flu-like symptoms
- Causes:
 - Nipple damage
 - Infrequent or poor breastfeeding
 - Blocked ducts

Prevention:

- Frequent handwashing
- Emptying breasts when feeding

Treatment:

- Call provider
- Take antibiotics as directed
- Plenty of rest and fluids
- Continue to feed from both breasts
- Express milk to keep breasts drained and to protect supply

Milk Storage

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Freshly pumped breastmilk can be kept at room temperature for 4 hours.



Refrigerated

- May be stored in the back of the refrigerator 4-8 days
- If milk is nearing expiration date in the refrigerator, can freeze for later



Frozen

- May be stored in the back of the freezer for up to 3 months
- Deep freezer for up to 12 months

Milk Storage

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Thawing

- Thaw in lukewarm water
- NEVER microwave
- Discard after 24 hours after thawing
- Do Not Refreeze



Use only plastic bags designed for breast milk



Mark bag with the date and amount of milk



Freeze in 2-4-ounce portions

How To Wake A Sleeping Baby

- Skin-to-skin 15-30 minutes
- Undress baby down to diaper
- Rub and massage baby in various places
 - Top of head
 - Bottom of feet
 - Up and down spine
 - Across the belly
 - Up and down the arm
 - Spot right above the belly button
- Change the position of the baby, from cradle hold to football hold and back again
- Do "baby sit-ups". Rock the baby from a sitting to lying position and back again. Rock gently back and forth until the baby's eyes open.
- Talk to the baby
- Change the baby's diaper
- Apply a cool washcloth to the baby's head, stomach or back.
- Express some breastmilk and place under your baby's nose. Or express a few drops directly into the baby's mouth. You may also dribble milk over the nipple while latching the baby onto the breast.

I Wish Someone Had Told Me....

- Start breastfeeding right in the delivery room
- It's all about the latch
 - Make sure the mouth is opened wide, and baby gets a big mouthful.
- Feed throughout the night at first
- Attend a breastfeeding support group
- Babies cry more on their second day of life
 - Crying doesn't always mean hunger. Hold your baby skin to skin and offer the breast frequently. This fussiness is common and is called "Second Night Syndrome" although it can happen during the daytime also.
- You don't need a breast pump right away

Here are some things partners or your support person can do:

- Support your partner. In the beginning, breastfeeding takes time to learn - every mother and baby needs practice.
- Learn about breastfeeding together. Go to prenatal classes, read books, or check out breastfeeding websites.
- Help boost her confidence with breastfeeding. In moments of doubt, encourage her.
- Listen to her needs and feelings. Be sensitive. Ask how you can help.
- Encourage her to rest. Help out with everyday chores, such as cooking, cleaning, shopping, laundry, and caring for your other children.
- Keep her company while she is feeding. Bring her food, something to drink, or anything else she may need.
- If you are away, stay connected. Call or text with words of encouragement.
- Speak up to family, friends, or others about breastfeeding. It's a woman's right to breastfeed anywhere, anytime and a baby's right to eat anywhere, anytime they are hungry!

Support Systems

- **Cleveland Pediatrics Lactation Consultant-423-479-9733**
- **Tennessee Breastfeeding Hotline-1-855-423-6667**
- **Health Departments WIC Lactation Consultants and Peer Counselors for WIC families:**
 - **Bradley County-423-728-7020**
 - **McMinn County-423-745-7431**
 - **Monroe County-423-442-3993**
 - **Polk County-423-338-4533**
 - **Hamilton County-423-209-8050**