Prenatal Education:

Getting Started with Infant Care and Breastfeeding





Casey McGuire, ICCE, CLE 🔶 Sheila Humphrey, RN, IBCLC 🔶 Anne Lippin, MD, CLE 🔶 Pamela Heggie, MD, IBCLC



Introduction

Each page of the toolkit discusses important topics to help families prepare for birth and 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 and in the waiting room.



Table of Contents

- 01 Prenatal Education
- 02 Introduction
- 03 Why Breastfeeding Is Important
- 04 Early Skin-to-Skin Contact
- 05 Baby's First Feeding
- 06 Helping Baby Latch
- 07 The Family Room: Keeping Baby Near
- 08 Feeding on Cue

- 09 Feed Only Breast Milk in the First Six Months
- 10 Making Milk
- 11 How Do I Know My Baby Is Getting Enough?
- 12 Helping Milk to Flow
- 13 Hand Expression
- 14 Expressing Milk: Pumping
- 15 Pasteurized Human Milk
- 16 Labor, Birth and Delivery

Revision date December 2016. Adapted with permission from Sutter-Davis Hospital. Support from Fairview Physician Associates Small Grant Fund 3-2012. Photos are used with permission and may not be duplicated outside of this toolkit. We thank the United States Breastfeeding Committee and MN WIC for the use of multiple photos in this document. Hand expression photo courtesy of www.breastmilksolutions.com. Pen and ink drawing by Lydia Newman-Heggie. Credit is given to Lori Lorentz for excellent graphic design. This Prenatal Education toolkit is published on the Minnesota Breastfeeding Coalition website *www.mnbreastfeedingcoalition.org* with the authors' permission. Copyright 2016 Minnesota Breastfeeding Coalition.

Why Breastfeeding Is Important

Breast Milk is PERFECT NUTRITION

It provides everything baby needs to grow and develop

Breastfeeding is GOOD for Families

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

There is nothing to mix or prepare for feeding.

Breastfeeding saves time.

Breastfeeding is comforting for babies.

Formula is harder for your baby to digest.

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



Breastfeeding is GOOD for Moms

Women who breastfeed have less risk of breast and ovarian cancer. diabetes, osteoporosis and heart disease.

Breastfeeding can help you bond with your baby and protect against postpartum depression.

Breastfeeding can help you return to your pre-pregnant weight more quickly.

Breastfeeding is GOOD for Babies

- × Breastfeeding helps to keep babies healthy and protected from infection.
- X Breast milk contains antibodies, growth factors, enzymes and hormones that:
 - fight infections during infancy
 - provide life-long protection against many diseases (less obesity, diabetes)
 - promote healthy infant development
 - lower the risk 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.





Early Skin-to-Skin Contact

What is Skin-to-Skin?

- X Your baby is placed unclothed with baby's belly against your bare chest.
- X Baby's back is often covered with a blanket. (Diaper optional!)
- X Start skin-to-skin right after birth, as soon as you are ready. The sooner, the better for you and baby. Dad/partner can hold baby skin-to-skin too.
- X All babies love to snuggle skin-to-skin, so do this as much as possible.



What does Skin-to-Skin Do?

- X Helps keep baby warm.
- Baby has better oxygen and blood sugar levels.
- × Helps your uterus to contract and bleed less.
- X Helps baby feel calm and comforted.
- 🗙 Helps you feel close to baby.
- X Can really help get breastfeeding started.

How Does Skin-to-Skin Help Breastfeeding?

Baby is already very near the breast when ready to feed. Being close makes latching on easier.

The nipple area has the same comforting smell as the amniotic fluid your baby floated in while inside you. The scent draws baby to the breast.

When resting close by your breasts, baby may move over to the nipple and latch without help.

Baby breastfeeds better and longer when skin-to-skin.



Babies love to snuggle!

Minnesota Breastfeeding Coalition × Breastfeeding: Off to a Good Start × www.mnbreastfeedingcoalition.org



Baby's First Feeding

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

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.

Holding baby on your chest can help baby latch on any time after birth.

- X Your nurse in the hospital can help you and your baby learn to latch.
- The laid-back position, shown on this page, is a perfect choice for baby's first feeding.
- Lie back, but not flat and place baby's head between your breasts, belly touching your skin.
 Circle baby loosely with your arms, hands at the bottom of baby's feet.



- X 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 laidback position not only at birth, but any time.
 - X Laid-back positioning can help you rest while your baby feeds.

Helping Baby Latch



- 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.
- 2 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). Let baby's head tilt back so that the chin is pointed to the breast.
- Bring baby toward the breast so baby's mouth touches the nipple and breast. 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.

Wait for baby to open wide to get a more comfortable, effective latch.

If it still hurts, please ask for assistance. Painful breastfeeding is not normal.



X You can breastfeed with baby held across your chest, tucked under your arm, lying beside you or lying on you in the laid-back nursing position.





The Family Room: Keeping Baby Near

- X Your baby will stay with you throughout your hospital stay. Staff will care for you and your baby in the room. This includes weighing, baths and medical checks.
- X Staff will help you learn about infant care and feeding.
- X Baby goes to the Nursery only for necessary medical procedures or if close medical observation is needed.
- X 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 nighttime, sleeping more in the morning and early afternoon.

Sleep when your baby sleeps even during the day.

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 when mom is near. Your room is quiet.

Baby feeds more often, which means:

- your milk supply increases faster
- baby loses less weight and has less chance of jaundice

Parents get to know and bond with baby more easily.

Parents feel much more confident about baby care and breastfeeding before going home.

Maternity staff are there to help at any time during those first days and nights with baby.





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 watch for cues and start a feeding before baby cries whenever possible.

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

Feeding on Cue and Milk Supply

Milk supply is determined by how often baby nurses and empties the breasts.

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

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



FEEDING SIGNS:

- X Mouth movements
- K Sticking the tongue out
- × Rooting
- X Hand-to-mouth movements

What are the Advantages of Feeding on Cue?

- Babies settle into a relaxing feed more quickly. 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."
- X Newly born infants need small frequent feedings in the first days of life. Just one to three teaspoons fill a new baby's stomach.
- **X** Frequent feeding builds mom's milk supply.

Babies sometimes feed every hour. These frequent feeding times are called "*cluster feeding*." After cluster feeding, babies often sleep for several hours. Expect baby to wake to feed at night. Responding to feeding cues helps babies gain weight.



Feed Only Breast Milk in the First Six Months



For the first six months, babies need only breast milk to get all the nutrients they need

Why Only Breast Milk?

- Introducing other foods or fluids too early can cause problems for breastfeeding and for your baby's health.
- X 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 you to continue breastfeeding, especially if returning to work.

- X Your milk supply is easier to maintain if solids are introduced when baby is 6 months.
- X It is the best nutrition in the early months of life and provides the most long-term benefits.
- X Wait until 6 months to start baby foods.
- X Plan to continue breastfeeding through the first year.
 - Breast milk is the most nutritious drink for baby.
 - Breast milk offers benefits beyond the first year as well.

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.

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.



Minnesota Breastfeeding Coalition × Breastfeeding: Off to a Good Start × www.mnbreastfeedingcoalition.org

Making Milk

X

Getting Started

Feed early and often to make plenty of milk! Feeding early (in the first hour after birth) and feeding often (8 to 10 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 day.

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

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.

Þ

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 weeks can create problems:

- can make it difficult to have a full milk supply later
- Bottles can interfere with baby learning to latch well; baby may start refusing to latch

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



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

The First Month and Beyond

Your milk volume continues to increase over the first 6 to 7 weeks in response to your baby's frequent feedings ("supply and demand").

Continuing to breastfeed often and at night builds your milk supply. Soon your 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 to 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?

What Tells You Baby is Getting Enough Milk?

- Count your baby's diapers in the first week this will help you know your baby is getting enough milk.
- X By Day 5, 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.

	Number of wet diapers	Number of soiled diapers	Color of Stool
DAY 1	1	1	Black
DAY 2	2	2	Black
DAY 3	3	3	Green-Black
DAY 4	4	3	Green-Yellow
DAY 5	5	3 or more	Yellow
DAY 6	6	3 or more	Yellow
DAY 7	6-8	3 or more	Yellow



What Does NOT Tell You About Baby Getting Enough Milk?

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

Contact your health provider if you are concerned about your milk supply or if you have painful breasts or nipples.







Helping Milk to Flow

- First use a warm wet cloth on your breasts and shoulders or take a warm shower. Or, try holding baby skin-to-skin on your chest for a while.
- Then massage both breasts. Do this for 1 to 2 minutes using gentle and firm massage.

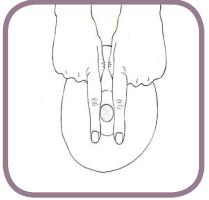


- ► **3**
- Then breastfeed, hand express or pump.



If the breast is very engorged or stiff

- Place your index fingers, one on each side of the nipple, and press straight back into the breast towards your chest. Hold for about a minute.
- X Move fingers to a new angle alongside the nipple and press back again.
- X This shifts fluid away from your nipple and softens the areola. The nipple will stand out more so baby can attach. It can help milk to flow.



Hand Expression

Using your hands to bring milk out of the breast is a basic skill that is worth practicing.

- X Expressing a few drops onto the nipple can make latching easier.
- X Hand expression softens the areola to help baby latch.
- X If baby is not latching, you can hand express your breast milk onto a spoon and feed baby by spoon or dropper until baby is latching better.
- X Your hands are always with you. You can collect milk even if you don't have your pump.



Ask your nurse or lactation consultant for help in learning this skill as soon as baby arrives.





Hand Expression Video Click on this link: <u>https://vimeo.com/65196007</u>

Instruction sheet on how to do hand expression - click on this link:

http://www.livinghealthywc.org/images/Hand%20Express%20Handout%202016-01.pdf (from Washington County Breastfeeding Coalition)

Expressing Milk: Pumping





Ask for help if it hurts or it is hard for you to express milk.

X Use a comfortable size of breast shield

- Your nipples need to move freely in the shield when pumping.
- Ask for a breast shield size fit (or check) when you get your pump.

X Use a comfortable suction

- If it pinches, turn down the suction until it no longer irritates you.
- Use the strongest suction that does NOT hurt you. Always.

Use your hands to massage and compress the breasts when pumping. You will get more milk.

Combine hand expression and pumping

Hand expressing before or after pumping helps get more milk out, whatever works best.

Lactation consultants can help make pumping comfortable and help you get more milk.

Most insurance plans pay for an electric pump with a medical provider's order.



How to do hands-on pumping:

Watch a video that demonstrates some ways that pumping mothers can increase production.

http://med.stanford.edu/newborns/professional-education/breastfeeding/maximizing-milk-production.html



Pasteurized Human Milk

What is it? Who supplies it?

Human milk is from mothers who voluntarily donate surplus breast milk to a milk bank. Donating mothers are carefully screened before and during the time they donate milk.

The milk bank pasteurizes and tests the milk to ensure purity and nutritional content. Then it is frozen until use.

When would it be needed?

It is used if a baby has a medical need for more milk than is available. It is often a temporary bridge until mother can produce more milk.

Why is it preferred to formula?

Pasteurized human milk is the strongly preferred feeding for infants when mother's milk is not available.

Pasteurized human milk has protective factors to fight infections and promote infant gut health. Formula does not have these factors.

Pasteurized human milk is less likely to trigger allergies. It is anti-inflammatory and promotes healthy digestion.

Where to find it?

Pasteurized human milk is used at many hospitals. It can also be purchased from community milk depots.





15



A milk bank or a local depot can also help mothers with surplus milk become a donor. Donors provide milk at no cost to themselves and are not paid.

Labor, Birth and Delivery

Ways to Support Labor . . .

- X Take a childbirth class with your partner.
- X Stay out of bed and upright, walking, standing and showering.
- \mathbf{X} Use a birthing ball to sit on or lean over.
- X Use the shower/tub. Use of water in labor reduces pain.
- Consider a water birth. The motion and warmth of the water lessens pain. It makes a comfortable transition for the baby and can speed labor.
- Consider hiring a doula: she will support and guide you throughout your labor and can help with breastfeeding, too.

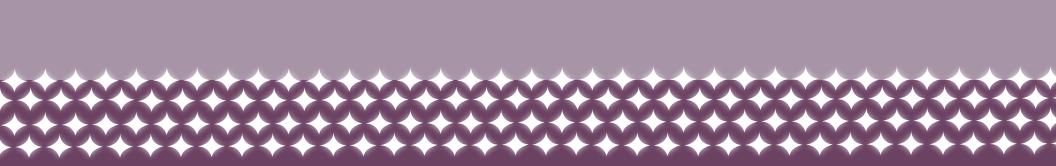




... and Breastfeeding Success

- X Pain medications or anesthesia in labor may delay baby's first feeding.
- ✗ Be patient with learning to breastfeed if baby is sleepy at birth and/or milk is slow to increase. Don't give up!
- X Skin-to-skin care helps baby recover more quickly from labor and birth.
- ✗ If baby must be separated from you at birth for medical reasons, request help with expressing milk in the first hour. Staff can assist you with hand expression or using a pump.





Revision date December 2016. Adapted with permission from Sutter-Davis Hospital. Support from Fairview Physician Associates Small Grant Fund 3-2012. Photos are used with permission and may not be duplicated outside of this toolkit. We thank the United States Breastfeeding Committee and MN WIC for the use of multiple photos in this document. Hand expression photo courtesy of www.breastmilksolutions.com. Pen and ink drawing by Lydia Newman-Heggie. Credit is given to Lori Lorentz for excellent graphic design.

This Prenatal Education toolkit is published on the Minnesota Breastfeeding Coalition website <u>www.mnbreastfeedingcoalition.org</u> with the authors' permission.

Copyright 2016 Minnesota Breastfeeding Coalition.

