Breastfeeding Guide



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Breastfeeding

Breastfeeding is the method of feeding a baby from a woman's breast.

Breast milk

Breast milk is the milk produced by the breasts of a human (woman) for her infant.

Lactation

Lactation is the process of milk production by the mammary glands.

Colostrum

Colostrum is the first secretion from a woman's breast. During pregnancy, your body begins to prepare for feeding of your baby after delivery, it can be observed from the breast as early as the second trimester of pregnancy.

Properties of Colostrum

- It has a yellowish color
- It is thick in consistency
- ♦ It is easy to digest for the newborn
- ♦ It is produced in a small amount
- ♦ It is high in protein
- ♦ It is low in fat and sugar
- ♦ It is rich in antibodies
- ◆ It helps to protect the baby
- ♦ It acts as a natural laxative to help your baby pass their first stool

Your breast starts producing mature milk on the 3-4 day after delivery . The volume of the milk becomes heavier. It may take longer depending on when you start breastfeeding and how often you breastfeed. The change in the milk occurs a little earlier if you have breastfed before.

Types of Mature Milk

Foremilk is the first milk your baby drinks after latching on. It is bluish and watery, high in milk sugar (lactose). It also has a high volume of water which satisfies your baby's thirst.

Hind milk is thicker and creamier, high in calorie. It's best for the baby's weight gain, brain development and stooling. It has a relaxing effect on your baby. *This picture shows samples of mature milk.*



When should you start breastfeeding?

The World Health Organization (WHO) recommends that breastfeeding begins within the first hour of a baby's life and continues as often and as much as the baby wants.

How long should you exclusively breastfeed your baby?

World Health Organization (WHO), recommend breastfeeding exclusively for six months. This means that no other foods or drinks are typically given. After the introduction of foods at six months of age, recommendations include continued breastfeeding until at least one to two years of age.

How often should you breastfeed your baby?

During the first few weeks of life babies may nurse 2-3hours. The duration of a feeding should be 20 minutes on each breast at least 8 to 12 times per 24 hours. Older children feed less often.

Parts of your breast

- Nipple (Erect, Flat nipple, Inverted nipple).
- Areola is the dark area around the nipple which enlarges and darkens during pregnancy. This may help your baby latch on by providing a clear "target."
- Montgomery glands are small bumps on the areola. They produce a

natural oil that cleans, lubricates, and protects the nipple during pregnancy and breastfeeding. This oil contains an enzyme that kills bacteria and makes breast creams unnecessary.

How to clean your breast?

Just rinse your breasts with clean water during your daily bath or shower and if needed just before breastfeeding. Avoid soap, disinfectants and any substances that could dry or damage your skin, nipples or areolae.

The process of breastfeeding

When a baby sucks on the nipple, the stimulation is transmitted to the pituitary gland and hormones called prolactin and oxytocin are produced. Prolactin conveys commands to the breasts to produce milk, and oxytocin operates to push out the breast milk that accumulates in the breast ducts.

Breastfeeding benefits for mothers

- It helps with your weight loss.
- It helps prevent excessive bleeding after delivery.
- It helps the uterus to return to its normal position before pregnancy faster.
- It lowers the risk against diseases such as breast and ovarian cancer, osteoporosis, obesity and type 2 diabetes mellitus.
- It is free.
- It does not need to be prepared.
- It always at the right temperature.
- It creates bonding between mother and child.

Breastfeeding benefits for your baby

- It helps with the development of a strong immune system to prevent diseases.
- It helps with the growth of positive bacteria in the digestive tract.
- It creates bonding between mother-infant bonding.

- It reduces the risk of newborn constipation.
- It contains no artificial materials.
- It prevents over feeding.
- It promotes better tooth and jaw development.
- It provides protection against food allergies and eczema.

Breastfeeding benefits for the father

- The father will have a healthier partner and healthier baby which prevent stress and anxiety.
- It reduces expenses. Having a baby is very expensive; since breast milk is free it eliminates the cost of one supply for the baby.

Preparation before delivery

You should prepare your nipples for breastfeeding during pregnancy.

- Your nipples can be lubricated using colostrum, which is produced during the 2nd trimester.
- It is important to observe what type of nipple you have (erect, inverted, flat).
- Erect nipples is ideal for breastfeeding however you can still breastfeed if you have the other types of nipples.

How to increase your breast milk?

- Feed your baby 8 to 12 times each day.
- Follow a healthy meal plan. A healthy meal plan provides the amount of calories and nutrients you need while you are breastfeeding. Your body needs extra calories and nutrients to keep you healthy and support milk production.
- Manage your stress. Relaxation can help decrease your stress and help you feel better. Deep breathing, meditating, and listening to music also may help you cope with stress.
- Do not smoke. Nicotine goes into your breast milk.
- Limit or avoid alcohol. If you choose to drink alcohol, breastfeed your

baby before you drink the alcohol. Do not breastfeed your baby for at least 2 hours after you have 1 drink. One drink of alcohol is 12 ounces of beer, 4 ounces of wine, or 1½ ounces of liquor.

• Drink enough water.

Positions for Breastfeeding

Cradle hold

This is most often used position.

- Sit in an upright position in a chair that has supportive arm rests or on a bed with lots of pillows to support you.
- Place your feet on a stool or other raised surface to avoid leaning down toward your baby.
- Hold your baby on your lap or on a pillow on your lap so that they are lying on her side with her face, stomach, and knees directly facing you. Lower arm under should be tucked under your own.



- Cradle your baby's head with the bend of your arm, with your hands on their back supporting their neck, spine, and bottom.
- Hold your breast in the other hand and gentle guide the breast to your baby's mouth.

The Cross-over hold

Also known as the cross-cradle hold. This hold may work well for small babies and for infants who have trouble latching on. This position is the opposite of the cradle hold.

- If you're nursing from your right breast, use your left hand and arm to hold your baby.
- Rotate your baby's body so his/her chest and tummy are directly facing you.
- With your thumb and fingers behind your baby's head and below his/her ears, guide their mouth



to your breast.

Side-lying position

Probably the most comfortable and easiest for both you and your baby.

- You can put a pillow under your head and shoulders, and one between your bent knees, too. The goal is to keep your back and hips in a straight line.
- With your baby facing you, bring ypur baby close and cradle his/her head with the hand of your bottom arm. Or, cradle his/her head with your top arm, tucking your bottom arm under your head, out of the way.



If your baby needs to be higher and closer to your breast, place a small pillow or folded receiving blanket under his/her head. He shouldn't strain to reach your nipple, and you shouldn't bend down toward him. You may need to lift your breast, with your fingers underneath, so your baby can reach comfortably.

Football hold

In this position you tuck your baby under your arm (on the same side that you're nursing from) like a football or handbag.

- First, position your baby at your side, under your arm. Your baby should be facing you with his/her nose level with your nipple and his/her feet pointing toward your back.
- Secondly, rest your arm on a pillow in your lap or right beside you, and support your baby's shoulders, neck, and head with your hand.



 But be careful — don't push him/her towards your breast so much that your baby resists and arches their head against your hand. Use your forearm to support his/her upper back.

Collection and Storage

Preparation for Expressing Breast Milk

- Wash your hands before and after expressing or handling breast milk.
- Store breast milk in clean containers, such as screw cap bottles, hard plastic cups with tight caps, or heavy-duty bags that fit directly into nursery bottles. Storage containers can be bought at the pharmacy or baby stores.
- Insure that your baby name is clearly labeled on the container with the child's name and date expressed, for caregivers.
- Label the storage containers properly, with the date it was expressed to facilitate using the oldest milk first.
- Do not add fresh milk to already frozen milk within a storage container.
- Do not save milk from a used bottle for use at another feeding.
- Clean breast pump parts after each use.

How defrost Breast Milk

- Frozen breast milk can be transfer to the refrigerator to be defrosted or by swirling it in a bowl of warm water.
- Avoid using a microwave oven to defrost or heat bottles of breast milk
- Microwave ovens do not heat liquids evenly. Uneven heating could easily scald a baby or damage the milk.
- Bottles may explode if left in the microwave too long.
- Excess heat can destroy the nutrient quality of the expressed milk.



• Do not re-freeze breast milk once it has been defrosted.

Location	Temperature	Duration	Comments
Countertop, table	Room temperature (up to 77°F or 25°C)	6–8 hours	Containers should be covered and kept as cool as possible; covering the container with a cool towel may keep milk cooler.
Insulated cooler bag	5-39°F or -15-4° C	24 hours	Keep ice packs in contact with milk containers at all times, limit opening cooler bag.
Refrigerator	39°F or 4°C	5 days	Store milk in the back of the main body of the refrigerator.
Freezer			
Freezer compartment of a refrigerator	5°F or -15°C	2 weeks	Store milk toward the back of the freezer, where temperature is most constant. Milk stored for longer durations in the ranges listed is safe, but some of the lipids in the milk undergo degradation resulting in lower quality.
Freezer compartment of refrigerator with separate doors	0°F or -18°C	3–6 months	
Chest or upright deep freezer	-4°F or -20°C	6–12 months	

Reference: Academy of Breastfeeding Medicine. (2004) <u>Clinical Protocol Number #8: Human</u> <u>Milk Storage Information for Home Use for Healthy Full Term Infants [PDF-125k]</u>. Princeton Junction, New Jersey: Academy of Breastfeeding Medicine. Available

Minor discomforts from breastfeeding

Breastfeed Encouragement is the painful overfilling of the breasts with milk.

Prevention

- Breastfeed every 2-3 hours.
- Allow the breast to empty when breastfeeding.

• Use correct position when breastfeeding your baby.

Treatment

- Continue to feed your baby when they're hungry.
- Remove your bra when your baby is feeding.
- Hand express a little milk before a feed, softening the areola to assist your baby to latch well.
- Continue allowing your baby to soften one breast first before offering the second breast. Express the second breast to a comfort level if it is uncomfortable after the feed.
- Wear a supporting bra between feeds e.g. a nursing bra or crop top. Make sure that your bra is not too tight.
- Apply covered cold packs for 10–15 minutes after feeds for comfort (only while your breasts are engorged).

<u>Mastitis</u> is the inflammation of the breast. It can be infective or noninfective. Mastitis cause by bacteria is treated with antibiotic.

Breastfeeding may continue if breasts are inflamed or fever detected.

<u>Sore nipples</u> are trauma from the baby's mouth and tongue, which result from incorrect attachment of the baby to the breast. It can also be caused by infection (Candida albicans- thrush).

Treatment

- Resting the nipple encourage healing but it necessary to express the breast milk because lactation continues.
- Expose your nipples to air briefly after each feeding.
- Use breast shields to keep your nipples from rubbing against clothing.
- Express a bit of milk and rub it on the nipple and areola, then leave it to dry to help with cracking.
- Use a medical-grade lanolin-based cream (you'll likely get some from the hospital) to help with cracking.
- Place some wet/cold tea bags on your nipples to relieve soreness (make yourself a cup of tea with them first because you sure won't want to do anything but toss them after). If you have sore nipples from

a Candida infection you should see the doctor for treatment.

Prevention

- Ensure your baby is latched on correctly on your breast.
- Difficulty latching on.
- Try different breastfeeding positions.
- Ensure that the baby month covers the areola properly .

Nurse's role in breastfeeding

- Provide education on antenatal care of the breast.
- Initiate breastfeeding after delivery.
- Provide emotional support.
- Provide practical support.
- Provide informational support.

Father's role in breastfeeding

- Help mom get comfortable- massage her shoulders, arrange pillows to support her back.
- Help her get her sleep .
- Keep her hydrated.
- Remind her to nap when baby sleeps during the day.
- Spend time.
- Be a good listener: be willing to listen to her frustrations.
- Be supportive: run errands, cook a meal, shop, burp the baby after breastfeeding, change diapers after feeding sessions.

Breastfeeding and work

- Discuss with your boss that you plan to breastfeed after delivery, so a space can be selected for you express milk while on work.
- Start pump early, to ensure that you have enough supply for your baby.
- Discuss with your baby's caregiver your feeding plan for your baby.
- Purchase a good brand of breast pump.

Contact information

St. Maarten Medical Center

- **OBGYN Ward** Welgelegen Road 30 Cay Hill
- St. Maarten

Contact the Breastfeeding Support Group

Tel: +1 (721) 543-1111 ext 1100 Fax: +1 (721) 543-0116

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