

How you want to be treated.

Breastfeeding Your Baby



- plus -

Breast massage, expression and 'hands on' pumping of Mother's milk

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This material has been reviewed and approved by patients, families and staff.



The importance of breastfeeding

Breastfeeding is the best way to feed your baby. Health Canada says 'Breastfeeding is the normal and unequalled method of feeding infants.' Babies who are breastfed are healthier and have fewer infections and other medical complications. Breastfeeding also helps mothers recover faster after birth and reduces risks of some health issues.

In this booklet we suggest ways to learn about breastfeeding before your baby is born. We also discuss what to expect immediately after the birth and for the first 2 to 3 days after your delivery. We show you how to start breastfeeding and how you can tell if your baby is getting enough milk. We will provide resources as you begin your breastfeeding journey.

How long do babies breastfeed?

"Breastfeeding - exclusively for the first six months, and sustained for up to two years or longer with appropriate complementary feeding - is important for the nutrition, immunologic protection, growth, and development of infants and toddlers". Health Canada
When your baby is about six months old, you need to start giving solid foods. Keep breastfeeding! The World Health Organization recommends babies be breastfeed for their first year. Some women breastfeed until the baby is 2 or 3 years old. The longer you breastfeed your baby the better it is for both of you.

What can I do to get ready to breastfeed?

- Surround yourself with friends and family who support breastfeeding.
- Talk to your partner and family about the importance of breastfeeding and how they can help. For example, they can help with meals, housework and spending time with the baby so you can rest.
- Talk to a lactation consultant, a community health nurse or a midwife if you have concerns about breastfeeding. A lactation consultant is a breastfeeding specialist trained to support and assist mothers on how to feed their baby.
- Talk to other breastfeeding mothers.
- Refer to the Healthy Family BC website on pregnancy and parenting: www.healthyfamiliesbc.ca/parenting

What can I expect immediately after my baby is born?

It is important to have your baby skin-to-skin for the first few hours or until your baby finishes their first feeding. Skin-to-skin means your baby is placed on your bare chest with nothing between you. Having skin-to-skin time with your baby has many benefits.

- Baby may cry less.
- Helps you and baby to get to know each other.
- Baby's body stays at the right temperature.
- Baby's heart rate and breathing rate settle faster after birth.
- It helps maintain your baby's blood sugar in the normal range.
- It helps your body make the hormones needed to produce milk.

You can do skin-to-skin after a vaginal birth and after a caesarean section.

After a Vaginal birth

- Your baby is placed on your chest skin-to-skin.
- Your baby is dried, repositioned and assessed on your chest by the nurse/pediatrician/midwife.
- Warm blankets are placed on you and your baby.
- You start breastfeeding when you are ready and your baby shows signs they want to breastfeed

What can I expect immediately after my baby is born?,

After a Caesarean Birth

- Your baby is brought to the warmer for a short assessment and then placed on your chest skin-to-skin
- Warm blankets are placed on you and your baby
- You start breastfeeding when you are ready and your baby shows signs they want to breastfeed

If your baby needs help after birth, they will be assessed on an infant warmer and watched closely. Either skin-to skin-is started or the baby goes to a neonatal intensive care unit (NICU). If the baby needs to go to NICU, we will ask your support person to go with them while we take care of you. If you cannot have your baby skin-to-skin with you, your partner can hold your baby skin-to-skin. When you are ready, your baby can be placed skinto-skin with you.

What can I expect in the first few days after my baby is born?

You and your partner will be tired for the first few days. Limiting visitors will help you have time to rest with your baby. While you are in hospital, your nurses will help you and your baby with breastfeeding.

How do I help my baby breastfeed?

Provide lots of skin-to-skin care. It helps baby stay warm and feed well. It also helps you make more milk. If baby is not skin-to-skin, dress them in a light sleeper and wrap them loosely in a blanket. Wrapping baby tightly (bundling or swaddling) is not safe. Baby's hands and arms should be free to move.

Newborns who are wrapped tightly in the first days do not signal that they need to eat as often. This means they breastfeed less often, gain weight slower, and have more chance of very low blood sugar (hypoglycemia). If baby sleeps in a bassinette with a blanket, simply tuck the blanket between baby's body and arms, and underneath the mattress. Leave baby's arms free above the blanket.



How do I know when my baby is hungry?

Watch for signs that your baby is hungry. Your baby tells you they need to feed with the signals below. We call these signals 'cues'. Keep your baby close so you can see when they need to feed.

- Opening their eyes.
- Opening their mouth.
- Smacking their lips, licking their lips, sucking.
- Putting their hands to their mouth.
- Rooting (baby moves head as if looking for your nipple).
- Making noise and sticking out their tongue.
- Crying is a late feeding cue. Your baby will feed best when they are awake but before they start to cry.

How to breastfeed

The most important part of learning to breastfeed is to be patient with yourself and with your baby. You and your baby are just getting to know each other and this can take some time. Ask your nurse or your midwife for help. It is normal to need help in the first few days.

How to position your baby

There are many ways to position your baby at the breast. We show you four common ways. Choose a position that feels best for you and your baby.





Cradle Position

Modified Cradle Position





Football Position

Lying Down

How to bring your baby to the breast (latch) and get baby to breastfeed

Position and prepare your breast

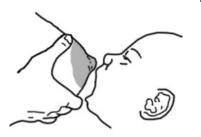
- Support your breast. Keep your fingers away from the areola. The areola is the brown area around the nipple.
- Shape your breast in the direction of baby's mouth.
- Hand express a small amount of colostrum for baby to smell and taste. Colostrum is the first milk after you give birth.

See page 13 for instructions on how to hand express.



Support your baby

- Put your hand under baby's shoulders and neck. Do NOT put your hand on the top of their head.
- Rest baby's chin on your breast. Baby's nose should be at your nipple.
- Press gently into baby's shoulder blades. This will move their chin off their chest.

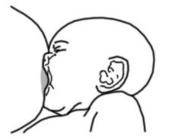


Help baby open their mouth

- Touch baby's upper lip with the breast to help baby open their mouth wide.
- Wait until baby opens their mouth wide like a yawn.
- Tilt the nipple up.

Help baby onto the breast

• Guide baby up onto your breast while baby's mouth is wide open.



How often will my baby feed?

Your baby's tummy is small. In the first few days, small, frequent feedings are better for your baby. They help you make more milk.

In the first 24 hours:

Your baby will feed 5 times or more. Your baby may be quite sleepy. Let your baby wake themselves up.

In the second 24 hours:

- Babies wake up often to feed. They can feed 8 to 12 times a day or more, in the beginning. They feed very frequently during the first night. Frequent feeds are normal. Some babies may feed every hour. We call these 'cluster feeds'. Cluster feeds help the mother's body make more milk.
- Offer both breasts to help your body build your milk supply. Baby may feed from both breasts, or may be satisfied after feeding from one breast.
- Your baby usually wakes up to feed. If your baby sleeps more than 3 to 4 hours, place them skin-to-skin to help them wake up.
- Keep track of how often your baby feeds and has wet and dirty diapers. Use the Infant Feeding Record provided by your nurse or midwife.

What is colostrum? What does it do for my baby?

For the past few months your body has been making colostrum. Colostrum is the first milk and it comes in small amounts. Colostrum has lots of calories and helps your baby fight infection. Colostrum also helps develop and protect your baby's intestinal tract.

Does my baby need extra milk in the first few days?

Only give extra breast milk or supplement if there is a medical reason such as low blood sugar. Your doctor, midwife, and nurse will guide you.

Can I give my baby a bottle?

We encourage you to feed your baby at the breast for the first 4 to 6 weeks after baby is born. We suggest you wait 4 to 6 weeks before you introduce your baby to a bottle. This gives time to establish your milk supply and for your baby to learn how to breastfeed.

• Sometimes when we give bottles to baby before 4 to 6 weeks, the bottle may interfere with your baby's natural suck reflex and make it harder for them to feed at the breast.

Can I give my baby a soother?

If you choose to use a soother, wait until about 4 to 6 weeks after birth. Breastfeeding should be going well first.

How to help your milk flow

Help your milk to flow by surrounding yourself with a calm environment. Learning how to do breast massage, breast compression and hand express milk is important before you go



home. These methods help increase your milk supply.

Breast massage

- 1. Wash your hands with soap and water.
- 2. Relax, take deep breaths, and think about your baby.
- 3. Massage your breasts:
 - a) Place fingers at the top of the breast and firmly press on the chest wall. Then move your fingers in a circular motion on the skin.
 - b) After a few seconds, move to the next area.Slowly move all the way around the breast.Continue to do this motion, moving your fingers closer to your nipple.

Breast compression

Breast compression helps the milk to flow when baby is breastfeeding.

Put your hand on your chest wall:

While breastfeeding, cup your breast and apply pressure. Baby will start sucking and swallowing milk. When baby stops sucking relax your hand. Baby will start sucking again. Repeat pressure and relaxing your hand until baby does not want to suck and is falling asleep.

Hand expression

Hand expressing your milk takes time to learn. You will get better with practice. In the first days after birth we will encourage you to hand express after each feed. This will increase your confidence and skills. Ask your nurse or midwife to show you how to hand express.

Before starting, get comfortable and take a moment to relax.

Massaging your breast while cuddling your baby skin-to-skin before you hand express will help.

Steps for hand expression,

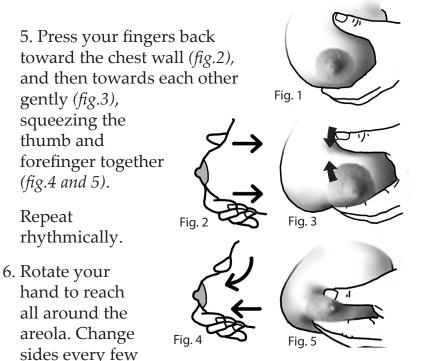
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Steps for hand expression:

- 1. Wash your hands with soap and water.
- 2. Gently rub your nipple.
- 3. Hold a clean container, cup, or wide-mouthed jar under the nipple.

4. Cup the breast in one hand. Place your thumb and forefinger about 5 cm or 2 inches behind the nipple. (*fig.1*)



minutes, using one hand, then the other, on both breasts.

7. Express until no more milk comes out. For most women this takes at least 10 to 15 minutes for each breast.

How do I know if my baby is getting enough milk?

The best way is by the number of wet and soiled diapers and your baby's weight gain.

Use the table on the next page as a guide.

Other signs that your baby is getting enough milk:

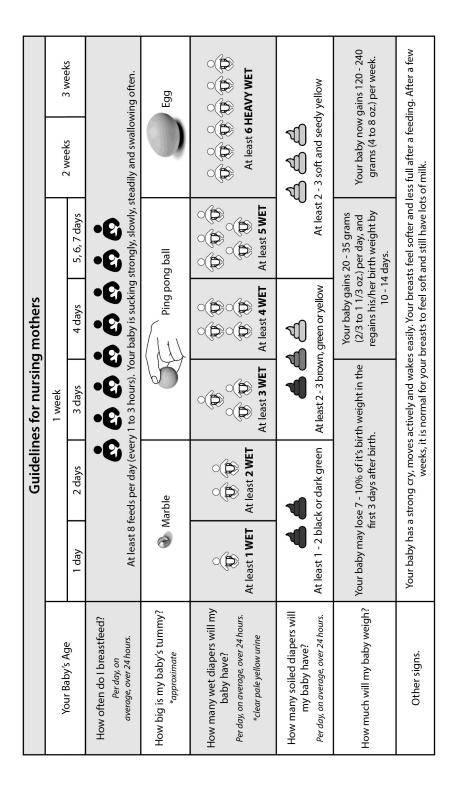
- You hear baby swallowing during feeding.
- Your breasts are full before feedings and softer after feedings.
- Baby is content after most feedings.

My baby is losing weight in the first 3 days. What should I do?

All babies lose weight in the first 3 days. Your doctor, midwife and nurse will help you decide if your baby is losing too much. If your baby needs more milk, you can:

- Express your own milk and give it to your baby.
- Use pasteurized donor milk or formula. Pasteurized donor milk is best when available.

To give extra milk, use a spoon or cup for a small amount. Use a bottle for a large amount.



Going Home

Before you leave the hospital, you and your partner need to feel comfortable with the plan for feeding your baby. Often the plan is "breastfeed at least 8 times a day and watch for the signs that your baby is breastfeeding well." Sometimes mothers need to express milk in addition to breastfeeding. Your nurse or midwife will help you create a feeding plan and tell you about resources in your community.

Additional resources are located on page 22.

What are the common breastfeeding problems?

Effective breastfeeding and a good latch usually prevent problems. If you have one of the problems listed below, keep breastfeeding. If breastfeeding becomes too painful, take your baby off your breast and express or pump your milk. Give it to your baby with a spoon, cup or bottle. Seek help from a lactation consultant, midwife or public health nurse. See the section called "Where do I get more information?" at the end of the booklet.

List of common breastfeeding problems,

continued next page

Sore nipples

- Almost all women have tender nipples when they start breastfeeding. Nipples should not be cracked or bleeding.
- If your nipples are tender, apply expressed milk, a warm wet facecloth or lanolin cream.
- Don't wait until your nipples are cracked or bleeding to seek help with positioning and latch from your nurse.

Firm, full, sore breasts (engorgement)

- May occur when your milk comes in around 3 to 5 days after birth.
- Feed often. Try to feed 8 times or more in 24 hours.
- If the breasts are firm it is harder to latch the baby. To soften breasts use a cold compresses to express milk after or between feedings. Hand express or pump your breast until you feel relief, but do not empty your breast.
- A warm bath or shower before feeding will help milk flow. You can also apply wet warm compresses.
- Cold compresses after feeding and ibuprofen will help with soreness and discomfort.
- Call a public health nurse or lactation consultant for help and support.

Fussing Baby

- Babies need lots of skin-to-skin contact, carrying and cuddling.
- Families can help provide this care.
- Frequent feedings help calm a fussy baby.

Leaking Milk

- This is common in the first few weeks. It does get better with time.
- If using breast pads, change them when they become wet.
- Press the heel of your hand against the breast to stop leaking.

Breast lumps

- Most breast lumps are caused by milk collecting in your milk ducts.
- Usually a warm shower, massage and frequent feeding to empty the breasts solve the problem.
- If you have a lump that remains after feeds contact your midwife or doctor.

Mastitis

- A fever, red, painful breast and flu-like symptoms (aches and pains, feeling unwell) in a breastfeeding mother may indicate a breast infection.
- Continue to breastfeed your baby and immediately call your doctor or midwife for further treatment.

Too much milk or not enough milk?

- Many women have concerns about their milk supply.
- If you are concerned about your milk supply or your baby's behaviour, talk to a lactation consultant, your family doctor or midwife.

What do I do if I'm sick?

- Breastfeed if you can. Your milk has antibodies to help protect your baby from illness.
- Keep your baby close to you to help you rest.
- Your partner, family and friends can help by caring for you and your baby.

When to call for help?

Once you are home, call your doctor or midwife for help immediately if you notice any of these signs. In hospital, talk to your nurse.

After 3 to 4 days old:

- Baby has less than 4 wet diapers per day.
- Baby has less than 2 to 3 bowel movements a day in the first 3 weeks.
- After 5 days old, baby's stool is still black.
- Baby feeds less than 8 times in 24 hours.
- Baby feeds constantly but is not content after feeds.
- Baby is very sleepy and missing feedings or is very difficult to feed.
- Baby's yellow skin color spreads from face to rest of body.

- Baby has projectile, forceful vomiting. The vomit moves fast and travels some distance. Gentle spit ups like a wet burp are normal.
- Baby has a fever. Normal temperature is 36.5 to 37.4 degrees Celsius.

In addition talk to your doctor or midwife if you notice any of these signs:

- Your breasts are sore and you have flu-like symptoms. For example, you might have a red or warm area on your breast and feel unwell.
- You continue to have lumps in your breast.
- You continue to have sore nipples.



Where do I get more information?

- Talk to your hospital nurse, community public health nurse, doctor or midwife.
- Find a lactation consultant through the British Columbia Lactation Consultant Association:

www.bclca.ca/Find-a-BCLCA-Lactation-Consultant

• You can call BC Women's and Children's Hospital Lactation Services:

Questions: 604-875-2282 - Appointments: 604-875-3743

• Healthy Families BC is a provincial government initiative with many online resources:

www.healthyfamiliesbc.ca

• Health Families has an excellent video on breastfeeding positions:

www.healthyfamiliesbc.ca/home/articles/videobreastfeeding-positions

• Baby's Best Chance: Parents' Handbook of Pregnancy and Baby Care

www.health.gov.bc.ca/library/publications/year/2017/ BabysBestChance-Sept2017pdf

• Best Start, Ontario Breastfeeding Resource:

//resources.beststart.org/product-category/resources/
breastfeeding/

Notes

We wish to express our thanks to B.C. Women's Hospital & Health Centre for allowing us the use of selected material from 'Breastfeeding Your Baby' in the preparation of this booklet.



How you want to be treated.

www.providencehealthcare.org