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BREASTFEEDING



Postpartum Parent Support Program

Information Sheet

Canada

The first few weeks.....

Congratulations to you on the birth of your baby. You have chosen to breastfeed and both you and your baby will benefit greatly.

Breastfeeding provides the perfect food for your baby through to the second year of life. Breastmilk is a complete food that provides your baby with all the right nutrients and fluids. Your breastmilk changes to match the needs of your growing baby.

Breastfeeding keeps your baby healthy and protects against allergy and infection.

Breastfeeding is good for mom too! Breastfeeding can help you get back to your regular pre-pregnant weight. Breastfeeding helps to reduce your uterus back to its pre-pregnant size and it uses up fat stores.

Begin at the very beginning....

How soon can I start...

Breastfeed your baby as soon as possible in that first hour after birth. Most healthy full-term babies will go to the breast very shortly after birth. Healthy term newborns are alert right after birth, even when mother has had a Caesarean delivery.

Getting ready to breastfeed

Perhaps with your first breastfeeding in the birth unit, your nurse or partner helped you to find a comfortable position. Lets review what you will do to get ready to breastfeed.

Knowing when your baby is ready to feed -

- Healthy newborn babies show signs of hunger. Your baby may awaken, make little sucking or smacking noises, eventually move about and then cry. Babies nurse the best before this crying state is reached.
- However you may find in the first few days that you may need to wake baby for some feedings. Unwrap your baby, removing the blanket and changing the diaper as necessary. Sit the baby on your lap with the head

supported and gently rub your fingertips up and down the back. Sometimes this will help to waken your baby.

- Before long your baby will begin to let you know that he needs to feed long before he or she cries. Rooming in allows you and your baby to be together, to adjust to each other and you will learn to pick up these cues for feeding from your baby.
- If your baby has been crying, take time to calm him or her and try burping him or her.

Preparing yourself

- You may want to first use the washroom, wash your hands and get comfortable.
- You may choose to nurse sitting in a chair or lying in bed. If sitting, use a comfortable chair and put your feet up on a footstool. You can use extra pillows to support your back and arms. If you choose to lie down, lie on your side and support your head with a pillow.

How do I hold my baby for breastfeeding...

- Now that you are both comfortable, cradle your baby in your arm, level with your breast. You can lay a pillow on your lap to bring baby closer to the breast. Turn the baby towards you so that the chin, stomach and knees are to you. Tuck the baby in close to you supporting the head and body with your arm and hand. Place the baby's hands on either side of your breast to keep them out of the way.
- With the other hand support the breast by cupping it, with your fingers underneath and your thumb on top. Your fingers should be well behind the areola (a-ree-olla), the brownish area around the nipple.

Which position or hold to use...

- There are several comfortable positions that are often used for feeding. The following pictures show these. The nurse in the hospital and the community will show and help you with these positions.
- Vary the position until you find the one right for you. Your nurse can help you to find the one that works best for you.

Positions:



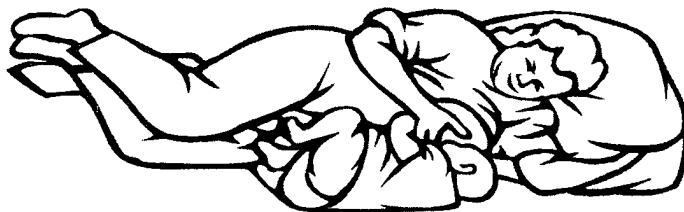
1. cradle



2. football



3. alternate arm cradle



4. side lying

Illustrations used with permission from Riordan and Auerbach (1995, p.248) in *Breastfeeding and Human Lactation*

Latching on...

- Brush your baby's lips against your nipple, waiting until the baby opens his mouth wide like a yawn. When this happens, quickly bring him or her to your breast. The baby's lips will cover most of the areola and will be rolled out. Baby's nose and chin will touch the breast.
- Breastfeeding should not hurt. If it does and you have nipple pain, you may need to take baby off the breast and try latching again, farther back on the areola. Insert your clean finger in the side of the baby's mouth to break the suction or grasp on the nipple and remove your breast.
- When your baby is latched well, he or she will suck with an "open-pause-close" type of suck. You will see baby's jaw move up and down. You should only hear a quiet "ca" sound that tells you baby is swallowing. Your nurse will help you recognize this type of suck that means baby is getting what he needs.

How long and how often do I feed my baby...

- As each baby is different, let your baby decide when and how often to feed. Babies nurse best at the time that they give the signs that they are hungry and they have not reached the crying stage. Therefore feed your baby when he shows signs of hunger during the night or day.
- Most newborn babies will feed 8-12 times in a 24-hour period.
- Let your baby breastfeed as long as he or she wants. When he or she has had enough he or she will stop sucking, let go of the breast and may fall asleep.
- You can burp your baby at this time. Not all babies need to burp.
- Offer your baby the second breast. You may find your baby does not feed as long on the second breast. At the next feeding offer this breast first.
- *Your baby is getting enough if*
 - He or she is nursing regularly (8-12 times in 24 hours).
 - You can hear your baby swallowing ("ca" sound") as he or she feeds.

- He or she appears satisfied and sleepy at the end of the feed.
- He or she is content for 1-2 hours between most feedings.
- He or she is active and alert when awake.
- He or she is wetting his diapers 1-2 times in the first 3 days. Around 4-6 days with increased milk supply and regular feedings, he or she may have 6 or more wet diapers.
- He or she may have a bowel movement at each feed or have 1-2 large ones in a day.
- Your breasts feel full before the feeding and softer after the feeding.

Breast and Nipple Care...

- Wash or shower daily as usual; just do not use soap on your nipples.
- Air dry your nipples after in each feeding.
- Leave a drop or two of your breastmilk on your nipples to dry after feeding.
- Wear a properly-fitted bra for support and comfort.
- Use cloth or paper nursing pads and change them when they are wet.

Taking care of mom...

What to eat and drink

Eat a variety of foods from the four food groups: milk and milk products; fruits and vegetables; breads and cereals; and meat, fish, poultry and meat alternatives. Your nurse or doctor can give you a copy of Canada's Guidelines for Healthy Eating to help you choose nutritious foods.

Drink enough to satisfy your thirst (which would be about 6-8 glasses of fluid each day).

Limit alcohol. Use caffeine in moderation. Caffeine is found in coffee, tea, cola and chocolate.

You do not have to avoid any foods that are healthy.

Rest

Sleep whenever baby sleeps! You will be feeding both at night and during the day.

Get as much rest as possible the first couple of weeks after you have your baby. Then go back to your regular activities slowly.

Limit visitors and let your partner, family and friends help you with meals, the minding of your other children and the housework.

Potential difficulties and concerns mothers may have...

Nipple soreness

Some mild nipple soreness may be common during the early days. But pain or soreness in the nipple during a feeding means that your baby may not be latched well or latched only on to the end of your nipple.

- Put the baby to the least sore breast first.
- Using a correct latch and with baby positioned for latching, bring baby quickly to your breast when he opens his mouth wide and make sure the baby's mouth is far back on the areola with the lips rolled outwards.
- Try a different position at feedings (see diagrams on positions to breastfeed).
- Breastfeed frequently so that breasts do not become too full.
- Continue to leave breast milk on your nipples after a feeding and let your nipples air dry.
- If soreness continues and the nipples become cracked, get help from your health care provider or a breastfeeding specialist.

Full, sore breasts

You may notice that your breasts feel heavy, full and sore.

- Place a warm wet washcloth on your breasts before feeding or if you feel up to it, take a shower before feeding.
- Massage your breasts gently and hand express some milk before feeding to soften the areola.
- Position your baby to breastfeed and latch.
- Breastfeed often, every 2-3 hours (8-12 times in 24 hours).

Leaking of breastmilk

Leaking is common when mothers start to breastfeed. Seeing, hearing or thinking about your baby can cause milk to be released.

- Using the palm of your hand, press down on the nipple until the tingling feeling in your nipple stops. This can be done through your clothing.
- You can also cross your arms across your chest and apply pressure.
- You can protect your clothing from leaking by placing cloth or paper nursing pads or a clean hanky in your bra.

Breasts have hard lumps

Lumps are common and they sometimes develop in the breast because the milk is not being fully drained.

This can cause a tender spot or sore area on one breast. This usually comes on gradually. You will feel generally quite well and will not have a fever.

- Continue to breastfeed your baby, encouraging your baby to feed more often,
- Before feeding place warm moist cloths on the sore or tender area or have a warm shower as this may help to make your breast feel more comfortable,
- Massage your breast gently from behind the tender area going towards your nipple,
- Check that your baby is properly positioned and latched on,
- Have baby drain one breast before switching to the second breast,
- Do not wear a bra or clothing that feels too tight or causes pressure on your breast,
- If your baby doesn't empty the breast, you can express milk manually or with a pump, and
- If the measures do not help and the lump doesn't go away, call your public health nurse or doctor.

A breast infection usually comes on quickly and you will probably have a fever and feel "fluish". The breast may be pink or red, very sore and warm to touch.

You can do all of the things listed above to help, as well as resting more and drinking fluids to satisfy your thirst. Call your doctor if the pain and fever does not go away in about 8 hours. You may need an antibiotic to get rid of the infection. You can still breastfeed and your baby will

not get sick from the infection. It is also very important to finish the antibiotics your doctor gives you.

I'm going home and

Relax and enjoy your new baby. This is a very new and exciting time for all your family.

You will all be learning new roles. Trust in yourself, but if you have concerns or questions do not be shy. Ask your public health nurse, midwife or doctor for help or advice.

Many mothers worry that their babies may not be getting enough milk or that something may not be right.

Here are some questions to ask yourself:

Does your baby have wet and dirty diapers? In the first 2-3 days, 1-2 wet cloth diapers are normal. At 4-6 days, 6 or more wet cloth diapers are normal. The baby may have bowel movements that are soft or liquid several times a day in the beginning. The first 3 days your baby's bowel movements are dark green to black in colour and very sticky (this is called meconium). After 3-4 days, the bowel movements become yellow and soft.

Is your baby content after feedings? Is your baby feeding regularly, at least 8 feeds in 24 hours? You can hear your baby swallowing as he feeds. You can hear a soft "ca" sound. Your baby appears satisfied and content after the feed.

Is your baby growing and alert? When awake your baby is active and alert. Babies usually return to their birth weight by 2-3 weeks and gain 1/2 to 1 Kg (1-2 pounds) each month for the first few months.

Babies have growth spurts at about 2 weeks, 4-6 weeks, 3 months and 6 months. Nurse more frequently and be sure to rest. Remember to eat and drink enough to meet your own energy needs.

Get help if.....

- you are unsure and have any questions about breastfeeding
- your baby has less than 2 soft bowel movements a day, after the first 2-3 days

- your baby has dark coloured urine
- your baby has less than 1-2 wet diapers daily at 1-3 days, or less than 6 wet diapers at 4-6 days
- your baby is very sleepy and hard to wake for feedings
- your baby is feeding less than 8 times in 24 hours
- your nipples are sore and not getting better by day 3-4
- your breast(s) has a red, painful area and you feel "fluish" and have chills or a fever

You can call your doctor or midwife, your local public health department, your local La Leche League, or private lactation consultants for help. Ask the nurse in the hospital for this information and the numbers to call.

Some practical breastfeeding books that are available at your local library or bookstore:

La Leche League International's Breastfeeding Answer Book
The Nursing Mother's Companion
The Womanly Art of Breastfeeding (La Leche League International)
Bestfeeding: Getting breastfeeding right for you.

*Our mission is to help the people of
Canada maintain and improve their health.*

Health Canada

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