

PRENATAL BREASTFEEDING EDUCATION



Woodland Healthcare

A Dignity Health Member
woodlandhealthcare.org

WOODLAND HEALTHCARE

1325 Cottonwood Street
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Prenatal Education Topic #1:

BENEFITS OF BREASTFEEDING

Breastfeeding benefits babies:

1. Breastfeeding gives your baby all the nutrition, growth factors, and disease protection needed for normal growth as well as lifelong disease protection.
2. Formula provides no disease protection.
3. Formula comes from dairy or soy sources that can lead to allergies and diabetes.
4. Breastfeeding protects against obesity.
5. Breastfeeding is comforting.
6. Babies who are breastfed have higher intelligence scores.

Breastfeeding benefits mothers:

- Women who breastfeed have less breast and ovarian cancer, diabetes, osteoporosis, rheumatoid arthritis, and depression.
- Women who breastfeed return to pre-pregnant weight more quickly.

Breastfeeding saves time and money:

- Formula costs more than \$1700 for a year plus supplies. Breastfeeding is free!
- Formula takes time to buy, mix, and prepare for feeding.
- Formula is harder for your baby to digest.

Benefits of Breastfeeding:

- Breastfeeding gives your baby comfort and nutrition.
- Breastfeeding gives your baby the comfort of being close to you as well as the comfort of sucking. Breastfeeding makes you and your baby feel relaxed.
- Breastfeeding decreases stress hormones in you and your baby.
- Breastfeeding relieves baby's discomfort.
- Breast milk contains everything your baby needs to grow and develop the healthiest body possible.
- Your breast milk changes as the baby grows to give baby the nutrition he needs! Since the nutrients come from a human source, it perfectly matches the baby's digestion and is digested rapidly and easily.



Breastfeeding protects your baby against disease

- Formulas come from a cow or soybean source, which are harder for your baby to digest and may lead to allergies, diabetes, ear infections, and intestinal bleeding.
- Your breast milk has many proteins that fight bacteria and viruses, and may reduce ear infections, respiratory infections, gastrointestinal diseases, colds and flu, while formula has no disease fighting or protective components.
- Breastfed infants receive protection that lasts a lifetime: lower incidence of sudden infant death syndrome (SIDS) and serious diseases such as cancer, diabetes, and heart disease.
- Formula fed infants have a greater incidence of ear infections, diarrhea, respiratory illness, gastrointestinal illness, cancer, heart disease, obesity, and SIDS.

Breastfeeding promotes your baby's growth and development

- Breast milk contains enzymes and hormones that help baby's digestion, and promote healthy growth. The milk of mothers whose infants were born prematurely has more protein and other nutrients specially needed to meet the growth needs of the premature baby.
- Breast milk contains important fats that help your baby's brain grow. Breastfed babies have higher intelligence scores. These important fats also make your baby have better vision and digestion the rest of his life.
- Formula has no enzymes or growth promoting factors. Formula fed infants are more likely to be overweight.

Breastfeeding saves you time and money

- Formula costs over \$1700 a year, not including supplies. Plus it takes time to buy and mix formula, and wash and prepare bottles. Breast milk is always fresh, free, and ready to feed!
- Since breastfed babies get sick less, it means less money spent on doctor visits, medicines, and hospitalizations. Less time lost from work to stay home with a sick baby.

Breastfeeding benefits your health

- Women who breastfeed have decreased rates of breast and ovarian cancer, diabetes, osteoporosis, rheumatoid arthritis, and depression.
- Breastfeeding will help you lose more weight and reduces postpartum bleeding.

Prenatal Education Topic #2:

BREAST MILK ONLY FOR THE FIRST 6 MONTHS

Breast milk is all your baby needs for the first six months of life.

1. Babies need no other food or fluid, including water.
2. Introducing other food or fluids can cause problems for breastfeeding and your baby's health.

The early months of your baby's life are essential to long term development.

1. Breastfeeding gives your baby the body-building components that are particularly suited to his health and development.
2. Milk from animal and plant sources do not contain the body-building components particularly suited to the human body.

The first milk is Colostrum.

- Colostrum is concentrated milk that your breasts produce from about the middle of pregnancy.
- Colostrum gives your baby protection against disease that no formula can give.
- The amount of Colostrum is small during the first few days so the baby's stomach will not be over-filled. This is important while the baby is learning to coordinate sucking, swallowing, and breathing.
- Baby's stomachs are very tiny at birth and grow a little larger each day. Milk production increases gradually every day, matching the baby's stomach size.

Babies are born with extra fluid stores.

- This extra fluid is used over the first few days while their stomach is too small to accommodate much fluid.
- The weight loss babies normally experience in the first few days is simply loss of this "water weight"

Breast milk is the only food your baby needs for the first 6 months of life.

- Breast milk has all the nutrition and fluid your baby needs for the first 6 months, even in hot weather. Breast milk is better for your baby than any other food or fluid. Giving other foods or fluids may decrease your baby's desire for breast milk.

Giving your baby only breast milk for the first 6 months is best for your baby's health.

- Your baby's body has iron stores that were obtained from your body during pregnancy. Your breast milk has a protein that enables your baby's body to use these iron stores. If your baby is given other food or liquid that has iron, the special breast milk protein cannot work and then the baby may become anemic.
- Babies who have only breast milk for 6 months have fewer illnesses than babies who eat or drink other foods or fluids. Breastfed babies have less pneumonia and other respiratory illnesses. They also have less intestinal disease, fewer ear infections, and fewer allergies.

Babies are not ready to take other foods until 6 months of age.

- For the first 6 months, your baby's intestine has small pores in it, like a net. If given other foods, nonhuman proteins can go through the pores into your baby's body and cause allergies. Around 6 months, the pores in your baby's intestine close up. Your baby can then eat other foods. Around 6 months, baby is able to sit up. A baby must be able to sit up to swallow food properly. Around 6 months, baby's tongue can move in to accept food, unlike during breastfeeding when the tongue pushes out. By 6 months, the baby's mouth cavity has deepened. Your baby can then eat spoonfuls of food. Before 6 months, a special protein in your breast milk helps your baby fight off disease. At 6 months, your baby's body produces this protein.

Breast milk should still be baby's main source of nutrition during your baby's first year.

- Prior to 6 months, the baby does not produce enough stomach acid to digest foods or fluids other than breast milk. The introduction other foods may cause digestive problems; problems with oxygen levels, and the development of diseases. Breast milk is better than any other food for nutrition and disease protection. It is important to introduce solids after 6 months so baby will learn to eat different foods. It's important to keep breastfeeding beyond 6 months; breastfeed prior to each meal of solids, as the "first course." You also can keep your baby breastfeeding by gradually increasing meals, such as: one meal of solids a day at 6 months, then 2 solid feedings a day at 7 months, 3 meals a day at 8 months, then 3 meals plus snacks at 9 months. Breastfeed before each meal and before and after sleep periods; important fats found only in breast milk help build the brain, eyes, and digestive system. The brain and nervous system grow a lot over the next year or two. The amount of fat in your milk grows over this time. Breastfeeding until the second birthday helps your baby develop a better brain, eyesight, and a digestive system that absorbs nutrients better. These benefits last a lifetime!

Breastfeeding may continue longer than your Infant's first year of life.

- Breastfeeding offers comfort and emotional support. As your baby develops the ability to talk and walk, he may also get separation anxiety. Breastfeeding makes your baby feel secure. As your baby comes into contact with other children, the disease-fighting components of breast milk help him stay healthy. The AAP (American Academy of Pediatrics) recommends exclusive breastfeeding for 6 months, and continuing to breastfeed as long as you both desire, even into the third year of life or longer; the longer you breastfeed, the greater the benefits for you and your child. You can breastfeed during pregnancy, as well as nurse an older child along with an infant, called tandem nursing.

Prenatal Education Topic #3:

BREASTFEEDING - LATCH AND POSITIONING

Learn about Breastfeeding; and have a support system.

- Consider taking a breastfeeding class. Prepare a list of people you can or talk to that have breastfeeding experience. This can be family, friends, the La Leche League, or your clinic. The hospital will provide a list of contacts, including lactation consultants that you can call.

Ask for help from the hospital staff.

- The nurses are specially trained to assist you and your baby in learning to breastfeed. You and your baby learn to breastfeed together!

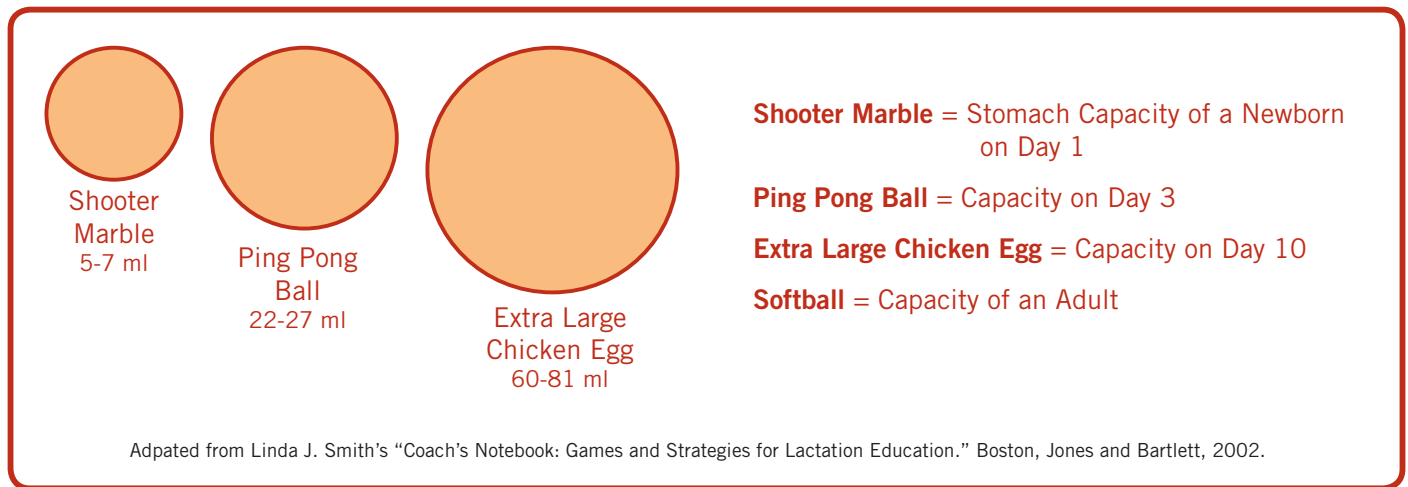


The first few days:

- **Day of birth:** Place your baby on your chest right after birth, with his skin next to yours. Baby may crawl to your breast and attach with very little assistance! After the first few hours, the baby may be sleepy. Take this time to sleep yourself. Day one Baby will be more alert and want to nurse often. This time of frequent feeding gives you lots of practice with nursing. Frequent feeding also stimulates your body to produce hormones, which trigger milk production.
- **Day two:** Baby may want to be at the breast very frequently. Simply feed as often as he wants.
- **Day three:** You may notice your breasts getting fuller and the milk changing to be more fluid in nature. Let your baby end the feeding by falling asleep or detaching himself. Let baby finish the first breast first, then offer the second breast.

Making milk:

- **The first milk is Colostrum.** Colostrum is produced since mid-pregnancy. The small quantity matches your baby's stomach size. It is thick and sticky. While your baby is learning to coordinate sucking, swallowing, and breathing, the properties of Colostrum protect your baby from overfilling or accidentally breathing it in. Colostrum also protects baby from disease. The extra water weight babies are born with provides them fluids while your Colostrum meets all their nutritional needs. Baby will lose this extra water weight over the next few days. Milk production begins as soon as the baby is born. It increases daily in amounts to match the baby's increasing stomach size. The baby's stomach is very small at birth, about the size of a marble, and your milk is produced in that amount! On the 2nd day, the baby's stomach is about the size of a thimble, then the next day a walnut. By the time your baby's stomach has expanded, the milk has changed so that it has more water and volume. This occurs about the third day after your baby is born.



How do I latch my baby to my breast?

- Hold your baby close, next to your skin, tummy to tummy. Press his chin into your breast with your nipple just opposite his nose. Tickle the baby's upper lip with your nipple to make his mouth open wide, like a yawn. Hold your hand behind the baby's neck and shoulders. This will allow the baby to tip his head back so he can open his mouth wider. Use your other hand to support the breast and compress it slightly in the same direction as his lips. This will help him to get more of a mouthful. When your baby's mouth is wide open, bring him to your breast quickly to help baby get more breast into his mouth. Baby should latch on to the areola, not just the nipple. This will enable baby to get more milk. If you feel discomfort with nursing, baby may not have enough breast tissue in his mouth. Insert your finger between his jaws and the breast tissue to break suction, and then relatch.

Breastfeeding positions:

- **Cross-cradle:** Hold baby tummy to tummy. Hold your forearm along baby's back, with your hand supporting baby's neck and shoulders. Your other hand supports the breast like a U.
- **Football:** Baby's body is under your arm and your hand supports his neck and shoulders. Baby's head is under the breast, looking up at you. Your other hand supports the breast like a C.
- **Side-lying:** You can rest while your baby feeds! Lay on your side, baby tummy to tummy with you. Use your upper arm to support your breast in a C hold. When baby's mouth opens wide, press baby onto breast with your lower hand between baby's shoulder blades. Another way is to hold your body up on one elbow. Place baby on her back, under your breast. Use your upper hand to support the breast in C hold. Tickle the baby's lip to get a wide gape then lower your breast into baby's mouth. Once baby is latched and sucking, pull out your lower arm and lay down. Turn baby in toward you.

Breast-Feeding Positions



Cradle hold



Cross-cradle hold



Football hold



Lying down

Prenatal Education Topic #4:

POSSIBLE EFFECTS OF MEDICATIONS AND ANESTHESIA

Medications and anesthesia in labor have been shown to have detrimental effects on labor progress, the infant and breastfeeding. These detrimental effects include:

- Prolonged labor.
- Your baby may have trouble breathing.
- Depressed infant reflexes including sucking.
- Disorganized infant suck.
- Decreased infant alertness, affecting infant's ability and readiness to feed.
- Delayed milk onset
- Decreased milk volumes.
- Shortened duration of breastfeeding.
- Increased infant weight loss.

Research shows that non-interventive birthing practices preserve normalcy of labor and delivery and accomplishes:

- Faster, easier births.
- Healthier, more active and alert mothers and newborns.
- Mother and baby are more ready to breastfeed.

There are many ways to help you through labor without pain medications and epidurals, in fact, these methods help you have a faster, more efficient labor, and give the baby the best start in life.

- Staying active, using breathing and relaxation, and having helpers will optimize labor progress, infant health, and breastfeeding success.
- **Attitude is important:** see labor not as something that happens to you, rather it is the work you do to deliver your baby! What you think about during labor can really help you through it- each contraction brings you closer to your baby; labor is a normal, healthy process; your body is well-designed for this wonderful process; you are bringing a new person into the world!
- **Out of bed:** Stay out of bed as much as possible. Being upright, such as walking and showering, utilizes gravity to help bring the baby down. Walking keeps you upright plus stimulates your contractions. It also keeps you off your tailbone, which opens more space for your baby to come out.
- **Telemetry monitoring:** this type of monitoring allows you more mobility. The nurse may be able to listen briefly to check your baby's heartbeat so you can be free to move around for longer periods of time.

- **Use a birthing ball to sit on or lean over.** This helps relieve back pressure, helps you stay upright, gives your helpers to your back for massage, and helps your pelvis open for the baby.
- Use the rocking chair and change your position often.
- **Use the shower:** Use of water in labor reduces pain. If you have back discomfort, point the shower spray over your back. If you want to sit while in the shower, you may use the ball or shower chair. Use the Jacuzzi tub. The motion and warmth of the water lessens pain. Warm water also helps your tissues stretch. It makes a comfortable transition for the baby.
- **Take a childbirth class with your partner** so you can have education and practice with breathing, relaxation, and other techniques to help in labor. It is good to have a coach to help you with these techniques and encourage you. Practice these techniques before you go into labor.
- Playing music and having a calm, quiet, dim environment may help with relaxation.
- Limit visitors and onlookers during your labor.
- Talk with your provider if you desire other ways to help you through labor.

Prenatal Education Topic #5:

EARLY SKIN-TO-SKIN CONTACT (SKIN-TO-SKIN COUPLET CARE)

What is "skin to skin couplet care"?

Skin-to-skin couplet care means your baby is placed unclothed onto your chest, against your skin, and under a blanket or your clothing. Your baby will be placed on your chest right after birth, having your baby skin-to-skin helps the baby to feel safe, stay warm and maintain a healthy blood sugar. Bathing and non-essential medical and nursing tasks are delayed for at least four hours after the baby is born, essential tasks will take place with your baby skin-to-skin.

How does "skin to skin couplet care" help breastfeeding?

- Baby can smell colostrum at birth. Amniotic fluid has a smell similar to colostrum, so baby is drawn to the breast by the familiar smell.
- Left undisturbed between your breasts, baby may nuzzle down on unassisted!
- Baby has more opportunity to feed and gains weight better.
- Baby is more aroused to feed.
- Baby breastfeeds better and longer overall.



What does "skin to skin" do?

- Stabilizes baby's temperature and vital signs.
- Gives baby better oxygenation and blood sugar levels.
- Stimulates milk production.
- Causes your uterus to contract and bleed less.
- Causes baby to be comforted and cry less.
- Promotes feelings of closeness and protectiveness.
- Provides the best opportunity to get breastfeeding off to a good start

What is Skin-to-skin?

- Simply put, the baby is placed bare-skinned onto your skin, on your chest. Any assessments or procedures that are done routinely for your baby will either be delayed for this important time together, or performed while the baby is on your chest.

Why is it important?

- Babies are comforted by being placed skin to skin with their mother right after birth. They are calmer and cry less. Being skin to skin is also pain-relieving to the baby, such as during an injection or heel-stick procedure. When babies are placed skin to skin, they warm up better and learn to stay warm faster.
- Skin to skin helps baby's respirations, heart rate, and blood sugar stay normal and their oxygen levels are highest when skin to skin.
- You are the best "recovery room" for your new baby! Being skin to skin helps lower your stress, and makes you feel closer to your baby. This is a great time for both of you to get to know one another. The bonding that takes place during skin to skin time lasts long after birth.
- The movement of your baby's body on your body stimulates hormones that cause your uterus to contract and bleed less.
- When babies are placed undisturbed on their mother's chest between the breasts, they often will crawl towards the mother's nipple and latch on unassisted! Babies are able to smell the colostrum in their mother's breasts. Since amniotic fluid is similar in smell to colostrum, babies are therefore naturally drawn to the breast. In addition, babies' hand movements at the breast, as well as their sucking, cause the mother's body to release milk-making hormones. Infants who have been placed skin to skin gain weight better and breastfeed better and longer. Babies need to be close to the breast to learn to breastfeed. This first skin to skin time is the best opportunity to begin breastfeeding.

The benefits continue:

- Even after the first four hours of skin to skin time, continue to place your baby skin to skin over the next several days. If baby is fussy, this will help calm him. If baby is too sleepy to nurse, this will stimulate and arouse him to breastfeed. Skin to skin time continues to help make baby warm and comforted. It also continues to help make breastfeeding a successful and enjoyable experience. Dad can do skin-to-skin too! Although Dad cannot breastfeed, the baby knows Dad's voice and feels safe with him also.



Prenatal Education Topic #6:

ROOMING IN

What is "rooming in"?

“Rooming in” means that your baby stays with you in your room throughout your hospital stay. Your baby will not go to the nursery except for photo's, circumcision, and some blood work. A parent can always go with the baby.

What are the advantages of rooming in?

- Baby sleeps better and cries less. It is less stressful for the baby.
- Mother's milk comes in sooner.
- Baby gains weight better.
- Baby develops less jaundice.
- Baby feeds more often.
- Women exclusively breastfeed longer and continue to breastfeed longer.
- You can get to know your baby better,
- You are better prepared to take care of your baby.
- You begin to recognize your baby's feeding cues.

What about sleep?

- Mothers have the same amount and quality of sleep when rooming in as when the baby is out of the room.
- Get your sleep in chunks: sleep when your baby sleeps.
- The day time is for sleeping, too. Limit distractions and visitors. Research shows that your rest is more often disturbed by visitors, than by the baby.
- Learn to nurse in the side-lying position so you can rest while baby feeds!

Prenatal Education Topic #7:

FEEDING ON CUE

What is "feeding on cue"?

1. Feeding on cue simply means feeding your baby whenever he shows feeding cues.
2. Feeding cues are signs of hunger.
3. Feeding cues are: mouthing movements, tongue protruding, rooting, hand to mouth movements, hand-sucking.
4. Crying is a late hunger sign.
5. Feed baby whenever he wants for as long as he wants.

What are the advantages of feeding on cue?

1. Since sucking and emptying the breasts determines milk supply, feeding the baby as often and as long as he wants means you will make as much milk as he needs.
2. Frequent feeding in the first few weeks after birth builds up milk making tissue in your breasts, assuring a good milk supply for months to come.
3. Baby latches and feeds better when you catch his early feeding cues such as tongue movements and rooting. If you wait until he is crying, it may take more time to calm him before feeding.
4. You bring comfort and pain relief to your baby when you feed on cue. Nursing is for comfort as well as nutrition. Babies cannot be held "too much" or "spoiled."
5. Newborns are used to constant closeness and feeding. Frequent feedings gives them that connection.
6. Babies gain weight better.
7. Babies have less jaundice.
8. Mothers have less engorgement.
9. The overall duration of breastfeeding is longer

Your baby prefers you. Avoiding pacifiers and bottles will help your baby breastfeed better.

1. The sucking action on a pacifier or bottle is very different from how a baby latches the breast.
2. When a baby sucks a pacifier or bottle, the breast does not get the stimulation to make milk.
3. Formula is more difficult for baby to digest

Infant Feeding Cues

- Baby is awake with arms and legs moving
- Baby makes fists or brings hands to mouth
- Baby starts to move head in sleep with rapid eye movements visible under the eyelids
- Baby makes "rooting" motions trying to latch
- It's been 2-3 hours since baby last breastfed well

Important to know:

- Breastfeed early and often, at least 8 – 12 times in 24 hours
- The more you breastfeed the more milk you will produce
- Allow baby to breastfeed as long as interested
- The breast is never empty, baby can come back for seconds
- Nipple pain should not occur, ask for tips on latching deeply
- All suckling should be at the breast
- Any time there is a need to give baby formula, pump both breasts 10 – 15 minutes

ALTERNATE FEEDING METHODS

FINGER FEEDING

- Wash your hands and make sure your finger nails are cut short. It really doesn't matter which finger you use. Choose one that is comfortable for you.
- Get into a comfortable position with your baby well supported. A nursing pillow can be very helpful. Some parents find it more comfortable to have the baby propped up on your knees facing you.
- Gently stroke the baby's lower lip to encourage him to open his mouth. The pad or soft part of your finger should be facing the top of your baby's mouth. The baby will draw your finger in.
- Once the baby starts suckling, slowing start squirting a little milk in the corner of the baby's mouth with the syringe. You should hear the baby swallow.
- With practice, finger feeding goes very quickly.

BOTTLE FEEDING

- Wash your hands
- Get into a comfortable position with your baby well supported. A nursing pillow can be very helpful. Some parents find it more comfortable to have the baby propped up on your knees facing you.
- Gently stroke the baby's lower lip to encourage him to open his mouth. Gently put the bottle nipple into the baby's mouth.
- Once the baby starts suckling, monitor how the baby is tolerating the feeding. You should hear the baby swallow. If the baby begins to gag or choke, pull the bottle out, bring the baby to a sitting position and wait a few seconds till offering the bottle again. Never allow a baby to suck on an empty bottle.

CUP FEEDING

- Wash your hands
- Get into a comfortable position with your baby well supported and swaddled in an upright sitting position.
- Fill the cup only halfway to avoid spilling.
- Hold the cup to the baby's lips. Tip the cup so that the milk just touches the lips.
- Wait for the baby to sip or lap at the milk.
- Keep the cup tilted just enough so that the milk is touching the baby's lips.
- All pauses as the baby needs them--let the baby control the feeding.
- The baby may push some milk back into the cup, so keep the cup touching the lips.

SUPPLEMENTAL NURSING SYSTEM FEEDINGS

- Wash your hands
- Fill the SNS with milk and position the tubing on your breast either with tape or a band-aid.
- Latch your baby on as you normally would. If your baby is grabbing the tubing, consider swaddling his arms. Once your baby is suckling, gently insert the tubing into the corner of the baby's mouth. Your baby will then be suckling both from your breast and the SNS.
- The rate of flow is controlled by gravity. Hold the bottle higher for a faster flow or lower for a slower one.



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BABY FRIENDLY[®] HOSPITAL INITIATIVE

10 Steps to Breastfeeding

The care given at our Family Birth Center is the healthiest possible for you, your family and your new baby. Our practices are designed to help you achieve the best birth for the healthiest baby and the most satisfying breastfeeding experience.

All of our infants are skin-to-skin for the first four hours (or longer) after birth. The skin-to-skin experience helps the baby to feel safe, maintain a healthy blood sugar and remain warm. The bath and other non-essential medical procedures will be delayed for the four hours of skin-to-skin care, and until the baby has breastfed well. Woodland Healthcare follows the Ten Steps of the Baby Friendly Hospital Initiative:

1. Our breastfeeding policy is made known to our staff.
2. Our staff has the skills and resources necessary to carry out this policy.
3. Our patients are taught the benefits of breastfeeding as well as how to breastfeed in our prenatal clinic, during their hospital stay, in our postpartum clinic, and in support groups.
4. We help mother and baby breastfeed within the first hour after birth.
5. We show mother how to maintain lactation when away from her baby.
6. Breastfeeding babies are not given formula or water unless medically indicated.
7. Mother and baby stay together in the same room; skin-to-skin couplet care is encouraged throughout the hospital stay.
8. Mother is encouraged to breastfeed when baby shows hunger cues. We teach mother to recognize hunger cues. Breastfeeding is important for physical contact and nourishment.
9. Breastfeeding babies are not given pacifiers or bottles.
10. Ongoing breastfeeding support is available from our resource list, in our Pre-Natal and Post-Partum Lactation Clinic, in our weekly Post-Partum Support Groups, and by calling our Lactation Services.

IF YOU HAVE QUESTIONS:

- How will I feed my baby?
- How do I get help?
- How do I best care for my baby, myself and my family?

WHERE TO GET HELP:

Woodland Healthcare
Lactation Services
530.669.5420

To Schedule an Appointment:
530.668.2600

Woodland Appointments:
Monday - Friday, 2 to 5 p.m.

Davis Appointments:
Thursdays, 9 a.m. to 12 p.m.

Skin-to-Skin Program classes:
Mondays, 2 to 3 p.m.
FREE

Post-Partum Support Group:
Mondays, 3 to 5 p.m.
FREE



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BREASTFEEDING

Benefits of Breastfeeding

Why should I breastfeed?

Benefits for your baby...

- The health benefits of breastfeeding are amazing! Antibodies from the mother are passed through the milk. Therefore, breastfed babies have higher resistance to infection (such as respiratory viruses and ear infections) and other serious bacterial infections. This protection cannot be duplicated by formula which contains no human antibodies. Because of the special properties of breastmilk, breastfeeding may decrease the chance of your baby developing allergies, diabetes, Crohn's disease, and ulcerative colitis later in life. It also reduces the incidence of some childhood cancers, such as lymphomas.
- Breast milk is absorbed quickly and is associated with less intestinal problems, less stomach upsets, constipation and diarrhea.
- Breastfeeding reduces the incidence of Sudden Infant Death Syndrome (SIDS).
- Feeding your baby only breast milk gives his/her brain and visual development an extra boost.
- The activity of suckling at the breast helps enhance the development of your baby's oral muscles and facial bones as well as speech development.
- Breastfeeding provides frequent, close physical contact and helps mother and baby become better acquainted.
- Breast milk is ready, warm, and always fresh.

Benefits for you...

- Breastfeeding after giving birth causes contractions of the uterus, which helps avoid heavy bleeding. During the six weeks after birth, the uterus continues to contract and shrink back to its pre-pregnant size.
- Breastfeeding is cheaper. Mothers do not have the added cost of formula and supplies (approximately more than \$1,400 per year for formula alone).
- Breastfeeding is more convenient. There is nothing to mix, measure, wash, or prepare. It is always available and at the right temperature.

For more information about prenatal breastfeeding classes/appointments or postpartum breastfeeding support call 530.668.2600 or ask your provider.

- Breastfeeding may help mothers return to pre-pregnant weight sooner than if not breastfeeding, especially if moms nurse the infant for six months.
- Breastfeeding triggers the release of the hormone Prolactin, known as the "mothering hormone", which promotes a feeling of relaxation and well-being. Prolactin also promotes a deeper sleep, which enables a mother to feel more rested in a shorter amount of time.
- Research has shown that breastfeeding reduces the risks of breast and ovarian cancer and may reduce the risk of osteoporosis.
- Breastfeeding helps mothers working out of the home miss work less due to their infant's illnesses.
- Exclusive breastfeeding delays the return of menstruation (though this is not always a reliable means of birth control).

BREASTFEEDING BASICS

After the baby is born, will I have any milk?

While you were pregnant, your body was preparing a very special blend of nutrients to meet your baby's needs. Colostrum (early breast milk) is the perfect starter food for your baby. This yellowish, creamy substance is found in the breasts during pregnancy and for a few days after delivery.

Your colostrum provides all the nutrition your baby needs right after birth and provides important protection against bacteria/viruses. Colostrum also acts as natural laxative which makes it easier for your baby to have bowel movements and clear the dark sticky stool called meconium from your baby's intestines.

What is in breast milk?

Over the first few days after your baby is born, the amount of breast milk you make will increase. Breast milk is made of fats, sugars, proteins, minerals, vitamins, and enzymes and is designed to promote brain and body growth. Antibodies are also present in your breast milk, which help boost your baby's ability to resist infection. As your baby grows older, your milk changes to meet his/her nutritional needs. Breast milk is the perfect food for babies.

How often should I breastfeed?

- Breastfeeding is all about supply and demand. Breastfeed as soon as possible after delivery and often so your baby can get colostrum and stimulate your body to produce breastmilk. If you have concerns about producing enough milk to keep up to this demand, remember, what your baby takes, your body makes – you will have enough milk.
- Look at your newborns' hand in a fist–this is roughly the size of a newborn's stomach. They don't need much to make them full, but they do need to feed frequently. Newborn babies want to feed on demand, which is usually every 1 to 3 hours per 24 hours (8-12 times in 24 hours) for the first two to four weeks. While breastfeeding, be cautious of well-meaning family and friends who encourage less frequent feedings. It is the frequency of nursing, not the duration of nursing sessions, that dictates how much milk is made.
- The frequency of nursing (not the duration of the feeding) is what stimulates your milk supply.
- Watch your baby for early cues he or she may be hungry (increased alertness or activity, mouthing, rooting, and sucking). Crying can also be a cue your baby is hungry, but it is a late sign of hunger – you will have an easier time breastfeeding if you learn to recognize your baby's early cues and feed your baby before he or she starts crying (crying makes breastfeeding much more difficult).

- If your baby does not show feeding cues in three hours during the day, attempt to wake him/her up.
- You should feed your baby throughout the day and night. During the night, make sure no more than approximately four hours pass between feedings.
- For sleepy babies, your health care provider may request that you wake your baby every three hours for feedings until your baby has regained his/her birth weight.
- Do not use a pacifier until your baby is at least a month old. Pacifiers should only be given after the baby has nursed and they should never be used in place of feeding the baby.
- Unless directed by your care provider, you should avoid giving any supplemental bottles in the first 4-6 weeks when you are trying to establish your milk supply. Supplemental bottles take away from the time your baby is sucking on the breast and may reduce your milk supply or cause nipple confusion.
- Most babies do not need extra water even if they have a fever or the weather is hot. Breastmilk provides enough water.

How long should I feed?

During the first week, bring in your full milk supply by offering both breasts at each feeding. Alternate which breast you start on. You may need to stimulate your baby to take the second breast.

After your milk supply has come in, encourage your baby to nurse as long as she/he wants on the first breast. This is so your baby can get the high-fat, calorie rich hind milk. You can tell your baby has finished the first breast when suckling slows down and your breast becomes soft. Then offer the second breast if your baby is interested. Alternate which breast you start with.

When will my milk “come in”?

Remember that colostrum is milk, and your milk is already “in” before your baby is even born. When people talk about your milk “coming in”, they are talking about the change in volume and appearance in your milk. For most women, this happens 2-4 days postpartum. As the volume of milk you are making increases, you may notice your breasts becoming larger, fuller, firmer, and heavier. This is called engorgement. Engorgement only happens once after the baby is born and typically doesn’t last long. The best treatment is to breastfeed your baby more frequently. Once engorgement resolves, your body continues to make milk.

How do I know my baby is getting enough milk?

In the first couple weeks after birth, you know your baby is getting a good supply of milk if he/she is making at least six wet diapers and 3-4 bowel movements a day. In addition, most babies will act satisfied after completing a feeding.

If breast feeding is going well, your baby will not lose too much weight after birth (though a small weight loss is normal) and will be back to his/her birth weight by 10-14 days of age. This is why it is very important to go to your pediatric appointments for the checkups we recommend.

Does breastfeeding hurt?

Sometimes breastfeeding may cause sore nipples in the first few days, but it should not hurt for the whole feeding or over a period of a few days or longer. If pain persists, don't 'tough it out' – seek help. To schedule an appointment with a Lactation Consultant, call 530.668.2600.

What medications can I take when I am breastfeeding?

It is best to avoid taking medications that aren't necessary. There are many common medications that are considered safe while breastfeeding (for example, Tylenol and Motrin). Check with your provider before you start taking any medications you have not already been told are safe.

You should also talk with your provider about vitamin, mineral, or other supplements you may wish to take while breastfeeding. Many providers recommend breastfeeding women continue to take a daily prenatal vitamin to ensure they are getting adequate amounts of the important vitamins and minerals they need (this is especially important if women are not eating a well-balanced diet or if their diet is deficient in calcium and vitamin D).

BREASTFEEDING MANAGEMENT

What does it take to make breastfeeding successful?

- You spent nine months focused on pregnancy, labor and delivery. Now give yourself some time to learn the Mom and Baby breastfeeding dance. Breastfeeding is a learning process for both you and your baby; and each mom and baby pair is unique. Breastfeeding takes practice and you learn it by doing it- and doing it, and doing it.
- Breastfeeding takes patience and time. Give yourself and your baby time to transition, to touch, to relax, to learn together, and to fall in love.
- The first few weeks of breastfeeding are critical for you and your baby to learn what works best for the two of you. This is also when your milk supply is being established. This time can be very frustrating as you have just gone through labor and delivery and you may be physically tired and emotionally drained. You and your baby may need to try several breastfeeding positions before you find the one(s) that work.
- Having people help and encourage you are some of the most important things you and your baby will need. Let others do things for you. Only you can breastfeed your baby so you should put all of your efforts into recovering from your delivery, breastfeeding and getting to know your baby.
- Listen to your instincts. If you're hungry, eat. If you're tired, nap. If you want to wear pajamas all day, do. If you're too tired to welcome visitors, defer. Spend time enjoying your baby. Take care of yourself as well as your baby in these first few weeks - you are doing important work!
- By about six weeks, you and your baby will have learned the breastfeeding dance and settled into somewhat of a routine. Life will feel more familiar again, your breasts will look more familiar again, and suddenly, your new family is growing and thriving.

How long should I breastfeed?

The American Academy of Pediatrics (AAP) recommends exclusive breastfeeding for six months. This means no water, juice, tea, rice cereal or solids until after six months. Breast milk is the only food your baby needs for the first six months.

Formula fed infants have twice the risk of having ear infections, higher rates of obesity, meningitis, diarrhea, infant botulism, allergies, asthma, eczema, type 1 insulin dependent diabetes mellitus, inflammatory bowel disease, multiple sclerosis, rheumatoid arthritis and childhood cancers.

How do I know my baby is getting enough?

The nurses and lactation consultants in the hospital will help you with positioning your baby at the breast. The baby should have a wide mouth and a deep off center latch when s/he is breastfeeding. You will hear your baby swallowing at the breast and see six wet diapers and 3-4 bowel movements a day.

How will my healthcare providers help me be successful with breastfeeding?

We know successful breastfeeding happens with support. Woodland Healthcare offers prenatal breastfeeding classes, breastfeeding information in your prenatal visits with your health care provider, breastfeeding support during your hospital stay after your baby's birth, and breastfeeding appointments and care in our pediatrics clinic after you leave the hospital with your newborn.

Woodland Healthcare is so committed to your breastfeeding success they have hired full-time International Board Certified Lactation Consultants (IBCLC) to offer patients lactation support during pre-natal appointments and classes, at the Family Birth Center, and in our post-partum lactation clinics. IBCLCs are healthcare professionals who specialize in the clinical management of breastfeeding, and they are able to provide substantive breastfeeding assistance and skilled technical management of lactation-related problems.

When should I call Pediatrics to schedule a breastfeeding support appointment?

- You would like a little extra help with your breastfeeding.
- You have any breastfeeding questions or concerns.
- By day four, if you do not feel your milk supply has increased.
- For treatment of sore nipples or sore breasts.
- Concern about your baby's output (urine and stools).
- If your baby is not feeding 8 to 12 times in 24 hours.
- If your baby is sleeping on the breast, not suckling well, and seems hungry each time you take him/her off.
- Ineffective positioning, latch-on and engorgement.
- Breastfeeding challenges (twins, premature infants, babies with a slow weight gain, and women who have had breast surgery, thyroid problems, fertility questions).
- Advice for the working mother regarding how to continue breastfeeding after returning to work and help with planning a daily routine.



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WOODLAND HEALTHCARE

1325 Cottonwood Street

Woodland, CA 95695

530.668.2600

DISCHARGE FEEDING PLAN

DATE: _____



SKIN TO SKIN CARE

Skin to skin care is where you sit with your baby wearing only a diaper and you with your bra removed. Snuggle your baby upright, nestled between your breasts.

Sit skin to skin with your baby on your chest _____ times a day for _____ hours each time.

BREASTFEED YOUR BABY

Nurse your baby every 2-3 hours or whenever your baby acts hungry. Use breast compression with every feed. Do not go longer than 4 hours without emptying your breasts. Latch your baby deeply and with an off center latch. Listen for your baby to swallow at the breast. Look for baby signs of saturation. Use a nipple shield with each nursing if advised by the lactation consultant. If you are given a nipple shield, please schedule a lactation appointment at discharge.

Your nipple shield size is _____



PUMP WITH A DOUBLE ELECTRIC BREAST PUMP

Double pump your breasts _____ times each day for 15 minutes after each breastfeeding. Don't go longer than 4 hours without emptying your breasts.

Your pump flange size is _____

SUPPLEMENT

After breastfeeding, supplement your baby _____ times each day with _____ ml of _____ at each feeding. Use a _____ to supplement your baby. See alternate feeding handout.

5 ml = 1 tsp, 15 ml = 1/2 oz, 30 ml = 1 oz



KEEP A FEEDING LOG

Write down on the log how often you are pumping, how much formula or expressed breast milk you are supplementing with, how often you are breastfeeding, and how often your baby is having wet and poopy diapers. We have blank feeding logs for you.

RETURN FOR A WEIGHT CHECK & LACTATION CONSULTANT APPOINTMENT

Return to _____ on _____ for a weight check. Please call ahead if you need to re-schedule your appointment.

NOTES:

FEEDING CUES

INFANT FEEDING CUES:

- Baby is awake with arms and legs moving
- Baby makes fists or brings hands to mouth
- Baby starts to move head in sleep with rapid eye movements visible under the eyelids
- Baby makes “rooting” motions trying to latch
- It's been 2 – 3 hours since baby last breastfed well

IMPORTANT TO KNOW:

- Breastfeed early and often, at least 8 – 12 times in 24 hours
- The more you breastfeed the more milk you will produce
- Allow baby to breastfeed as long as interested
- The breast is never empty, baby can come back for seconds
- Nipple pain should not occur, ask for tips on latching deeply
- All suckling should be at the breast



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MY PUMPING PLAN

DATE: _____

Reason for breastpump: _____

My breastfeeding goal right now: _____

How **often** should I pump? _____

How **long** should I pump? _____

• Aim for 10 nursing/pumping sessions each day •

Age: _____

Birth weight: _____

Current weight: _____

How much does my baby need to eat in 1 day (total)? _____

How often does my baby usually eat (average)? _____

About how much should baby eat at 1 feeding? _____

This just gives you an idea of how much baby needs.

Baby will eat as much as he/she needs, so do not force baby to finish a bottle.

My thoughts, questions and/or concerns _____

HOW DO I KNOW BABY IS GETTING ENOUGH BREASTMILK?

- Baby is eating 8-12 times per day (every 2-3 hours)
- Baby is gaining weight well:
 - birth to 4 months: 4-8 oz/wk
 - 4-6 months: 3-5 oz/wk
- Baby has a good amount of wet and dirty diapers:

FIRST WEEK OF LIFE	WEEK 2 TO 6 WEEKS OLD	AFTER 6 WEEKS
1 wet diaper for each day of life	At least 5-6 wet diapers	At least 4-5 wet diapers
4 dirty diapers by end of 1st week	At least 2-5 dirty diapers	It is normal to have fewer dirty diapers or even have many days go by between each bowel movement as long as baby is gaining weight well and poops are soft and large .

PUMPING TIPS

- Save time by using the breastpump to pump one breast while baby nurses on the other breast
- Gentle breast massage before and during pumping can help start breastmilk flowing and help with milk removal
- Bring a glass of water along with you when you nurse or pump
- You might notice that your breasts are fuller at different times of the day. Pump at these times if possible.
- DO NOT use the pump if it is painful to use. Call Woodland Healthcare Lactation Services if you are having any pain.
- To keep your milk supply strong, use the breastpump every time your baby receives a bottle.

• Remember – the more you breastfeed or pump, the more milk you will make •

BREASTMILK STORAGE

For healthy, full-term babies

	ROOM TEMPERATURE	REFRIGERATOR	SMALL FREEZER (INSIDE REFRIGERATOR)	FREEZER
Fresh breastmilk	5 hours	5 days	2 weeks	3-4 months
Thawed (defrosted) breastmilk	Use within 1 hour	Use up to 24 hours after thawing	Do not refreeze thawed breastmilk	Do not refreeze thawed breastmilk

NOTES:

**Questions? Call Woodland Healthcare
Lactation Services at 530.669.5420**

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