

Learning to...

Breastfeed Your Baby

Hamilton Regional
lactation
Committee

Please bring this book with you to the hospital when you have your baby

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Introduction

Your breastmilk is the perfect food for your baby. Breastmilk helps your baby grow and develop in the best possible way.



During the first few weeks after your baby's birth, you and your baby will be learning to breastfeed.

Like learning any new skill, it may take a little time and practice before you feel confident.

Your health care providers will give you information and support as you get started and whenever you need help.

Breastmilk is the only food your baby needs for the first 6 months. Breastfeeding should be continued until the first year of age, even after your baby starts to eat solid foods. Health experts recommend breastfeeding for up to 2 years of age or longer.

In this book we call the baby "he".

We feel this is simpler than writing "he or she" every time.

The benefits of breastfeeding

Your breastmilk is made especially for **your** baby.

The benefits of breastfeeding begin right away and increase as you breastfeed longer.

For you	<p>Breastfeeding helps your body in these ways:</p> <ul style="list-style-type: none">• contracts the uterus which reduces bleeding after childbirth• helps you return to pre-pregnancy weight earlier• may help keep your bones strong• may reduce the risk of cancer of the breasts and ovaries• may decrease your chance of developing Type II diabetes <p>The skin-to-skin contact with your baby can help you form a close emotional bond and increase your breastmilk supply.</p> <p>Breastfeeding is more convenient than formula feeding. You can go places with your baby easily as there are no formula or bottles to prepare or warm up. You also save a lot of money by not having to buy baby formula.</p>
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For your baby	<p>Breastfeeding is best for your baby because it helps your baby's body and mind reach their full potential.</p> <p>Formula increases your baby's risk for:</p> <ul style="list-style-type: none">• infections of the ear, lungs, bowel and urinary tract• allergies• diseases such as diabetes, obesity, Crohn's disease, ulcerative colitis and lymphoma, which is a type of cancer• sudden infant death syndrome, also called SIDS• colic-like symptoms: crying, gas, constipation
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Your health care team's commitment to support and promote breastfeeding

We believe in the benefits of breastfeeding and this guides our actions. Here is how we show our commitment to breastfeeding.

We believe that:

- breastmilk is the best food for your baby
- breastfeeding benefits you and your baby
- learning about breastfeeding can help you make an informed choice about feeding your baby
- newborn babies need only breastmilk, no formula or other liquids unless medically necessary for their health
- the use of soothers or artificial nipples should be avoided while breastfeeding is being established, unless medically necessary



We will:

- respect your decisions about feeding your baby
- help you start breastfeeding within the first hour of your baby's birth, if you and your baby are well enough
- encourage you and your baby to stay together and to have skin-to-skin contact
- guide, teach and support you as you breastfeed your baby or express your breastmilk
- let you know where you can get breastfeeding help and support in the community
- make sure that health care providers who care for mothers and babies have the knowledge and skills needed to support and promote breastfeeding

Getting started

What do I need to know?

As you learn to breastfeed, your health care providers will give you information, skilled help and support. Like learning any new skill, it gets easier with time and practice. Soon your confidence with breastfeeding will grow. Women who feel confident about their ability to breastfeed have less trouble with breastfeeding and continue to breastfeed for a longer time.

Some women who have not breastfed before or who have had problems with breastfeeding may worry about whether they will be able to breastfeed successfully. If you have any questions or feel worried about this, please talk with your health care providers. We can help you through difficulties as you learn to breastfeed.

Support from your partner or support person, family and friends is very helpful. Your partner or support person can care for you and help you get enough rest. If you have other children, they can spend time with you and help with baby's care. Your family and friends may also want to help. Think about your needs and let them know what would be helpful.

Here are some ways that people can help you:

- spending time and talking with you
- changing your baby's diaper
- holding, rocking, cuddling or bathing your baby
- buying groceries, making meals
- helping with laundry or cleaning
- caring for your older children



What should I expect at first?

As soon as possible, you can hold your baby “skin-to-skin” after a vaginal or cesarean birth. Skin-to-skin means putting your naked baby on your bare chest, with a cover over both of you to keep you warm and cozy.

Research shows that babies who are held skin-to-skin:

- are more likely to latch onto the breast and breastfeed well
- cry up to 10 times less
- stay warmer
- have fewer heart rate and breathing problems
- have better levels of oxygen in the blood
- have less pain during needle pokes
- go home earlier from the hospital

Your baby may feed only a few times in the first 24 hours of life. This is normal. Continue skin-to-skin contact and offer your breast frequently. Your baby will wake up more often on the second day.

How do I get my baby to latch on properly?

Since breastfeeding is a new skill, you will need help until you are feeding comfortably.

Start to breastfeed within the first hour after the birth of your baby. The first time you breastfeed you may want a nurse to help you. It may take several tries to get your baby latched on correctly and comfortably. Making sure you have a good latch is the best way to avoid problems such as sore nipples.

Read how to do this on the next few pages.

1. Make yourself comfortable

You can breastfeed sitting up or lying down. You may find it easier to learn breastfeeding if you are sitting up in a straight back chair with a foot stool to lift your feet. Lying on your side is helpful if you had a cesarean birth.

Try different positions and see what works best for you and your baby.

Make sure your back and arms are supported. Use pillows to make yourself comfortable and lift your baby to breast level. Your baby needs to be very close to you, so remove any clothes or blankets between you and your baby.

If you have pain from the birth, you may need to take pain medication. It is important to be comfortable while breastfeeding.

2. Hold your baby close for feeding

The pictures show different ways to hold your baby for feeding. In all positions, your baby should face you.

Cross-cradle hold

In the cross-cradle position, you can easily see your baby latch onto the breast. This makes it a good position when you are learning to breastfeed.



Wrap your baby's body and legs around you. This is called "tummy to tummy".

Football hold



The football hold is helpful if you have large breasts or have had a cesarean birth. Some premature babies breastfeed better in this position. Your baby will be at your side with his head higher than the rest of his body. His tummy touches the side of your chest.

Lying on your side



Lying on your side may allow you to get more rest. In this position, baby is tucked in close to you, tummy to tummy.

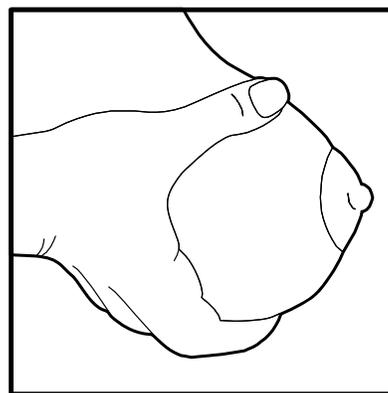
3. Support your breast

Hold your breast with your hand in the shape of the letter “C” or “U”.

With a “C” hold, your fingers are underneath and your thumb on the top of the breast.

Do not pinch your breast.

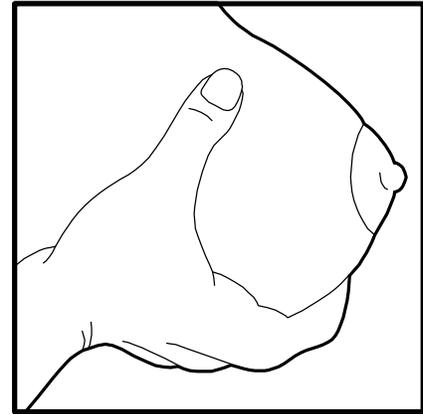
Make sure your hand is well back from the dark part of your nipple, called the areola.



“C” Hold

With the “U” hold, your thumb is on one side of the breast and your fingers are on the opposite side.

Once your baby is latched on and feeding well, you may not need to continue holding your breast.



“U” Hold

4. Support your baby’s neck

With your other hand, support the base of your baby’s head. The palm of this hand should be supporting your baby’s shoulders.

Your baby’s head should be tilted back slightly. Be careful not to push your baby’s head into your breast. Your nipple should point towards your baby’s nose.

5. Wait for a wide open mouth and pull your baby close

Tilt your baby’s head back slightly so his chin touches the underside of your breast. Your nipple should be sitting slightly above your baby’s upper lip.

Wait for your baby to open his mouth wide with his tongue forward and down. Your baby’s mouth should look like he is yawning. If your baby does not open wide, it may help to express a few drops of milk down to the end of your nipple. Be patient.

As soon as your baby's mouth is open wide, aim your nipple to the roof of his mouth and quickly pull him towards you. Move baby's head and body together in a straight line. His chin should be touching your breast.

Your baby's lower lip should be as far back from the nipple as possible so that his tongue draws in the most amount of breast tissue. Your baby's top lip will be closer to the nipple than his bottom lip.

Your baby is able to breathe easily while breastfeeding. You do not need to hold your breast away from your baby's nose.



These pictures show a baby latched properly.

Wide open mouth, both lips curved back, not sucked in.



While you are in the hospital, your nurse or a breastfeeding specialist called a lactation consultant, can help you make sure your baby latches on to your breast properly.

Signs of a good latch

- ✓ Baby's body is facing your body so he does not have to turn his head.
- ✓ Baby has taken the breast deeply into his mouth, chin first and off centre so he takes more areola with his bottom jaw than his upper jaw.
- ✓ The baby is pulled in so close that his chin is pressed into the breast.
- ✓ When baby comes off the breast, the nipple should be rounded, **not pinched**.

How should it feel when my baby is latched on well?

As your baby sucks it is normal to feel a gentle tugging or a pulling feeling on your nipple and areola.

Because your hormones are changing and your breasts are stretching, your nipples may feel a little tender for a few days. They should not be cracked or bleeding.



When your baby is latched on well, breastfeeding should not hurt.

If it hurts, reposition your baby or ask for help.

When should I feed my baby?

After the first 24 hours, breastfeed your baby at least 8 times in 24 hours. Feed your baby as long as he wants. Do not limit the length of time your baby feeds. In the first few days a feeding may last up to an hour.

**The more you feed your baby,
the more milk you will make.**

In the first 24 hours after birth, you may find your baby is sleepy and that you need to wake him to feed. Undress him to his diaper and hold him skin-to-skin. In the next 24 hours, your baby will be more awake and want to feed more often.

Spend as much time as you can with your baby, getting to know him. You will learn to recognize the signs that your baby is hungry and ready to feed.

Here are some signs that your baby is hungry and ready to feed:

- his eyes move quickly behind his closed eyelids
- he brings his hands closer to his face
- he tries to lick or suck at whatever is close to his face
- he turns his face from side to side
- he wakes up

**Crying may be one of the last signs
that your baby is hungry.**

How can I tell if my baby is finished feeding?

Offer your baby both breasts at each feeding. Do not limit the time your baby breastfeeds. As your baby is breastfeeding you should hear or see your baby swallowing.

Here are some signs that your baby has finished feeding:

- he has stopped swallowing
- he seems more relaxed and sleepy
- he may not seem interested in sucking even after you burp and move him
- he settles and becomes quiet and content

When should I burp my baby?

After your baby has stopped swallowing and is finished the first breast, take him off the breast by placing a finger in the corner of his mouth to break the suction. Then try to burp him. Sometimes your baby may not burp. Offer the other breast. Try to burp him again after the second side.



What will my milk be like?

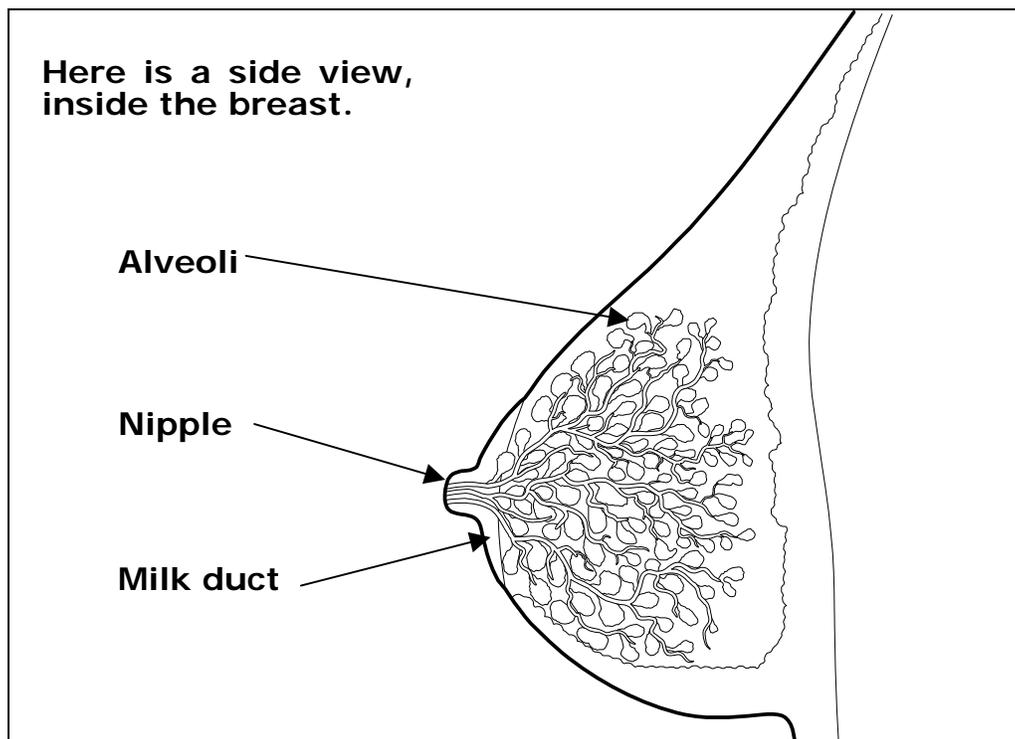
Colostrum is the first breastmilk. This thick, rich milk provides all the nutrition your baby needs for the first days of life. It also helps protect your baby from infection. You will have colostrum for the first few days. Breastmilk naturally changes to meet all the needs of your growing baby. There will be a gradual change from colostrum to mature breastmilk over the next 2 weeks.

How is milk made in the breast?

During pregnancy, hormones cause small clusters of glands in your breast, called alveoli, to develop and make breastmilk. When your baby starts to breastfeed, his sucking causes a hormone called prolactin to be released. This signals the breast to make milk.

Another hormone called oxytocin causes the milk glands to contract, which moves milk out of the alveoli into the milk ducts. The ducts carry the milk towards the nipple.

To get milk, your baby needs to open his mouth wide and get the areola, not just the nipple, in his mouth. As oxytocin starts the flow of milk, you may feel a tingling feeling in your breasts. This is called the “let-down” or “milk ejection” reflex.



Your breasts continue to make breastmilk as your baby feeds. During a feeding, the breastmilk changes to meet the needs of your baby. The breastmilk made toward the end of a feeding has more fat, protein and calories. There is no such thing as an “empty” breast. There is always breastmilk in the breast. As your baby removes breastmilk, your breasts will make more milk to replace it.

**The more you feed your baby
the more milk you will make.**

Your breasts naturally adjust to make the right amount of breastmilk. As your baby grows, your breastmilk will change to meet his needs. If you have more than one baby, your breasts will be able to make enough breastmilk.

When will my baby start to gain weight?

Most babies lose up to 10% of their birth weight in the first 4 days after birth. Your baby may lose a little more if you were induced, had intravenous fluid, an epidural or a cesarean birth. In these first few days, your baby is learning to coordinate his suck, swallow and breathing.

Have your baby's weight checked by the doctor or midwife 1 or 2 days after you go home.

Most babies start to gain weight by day 4 or 5 and are back to their birth weight around 14 days of age.



Does my baby need any other food or drink?

Your baby does not need any other food or drink for the first 6 months. Even in hot weather, your breastmilk is all your baby needs. Feeding your baby anything else can reduce your milk supply and may cause health problems for your baby.

Generally, healthy full-term babies do not need anything else but breastmilk for the first 6 months of age, unless there is a medical problem.

Your baby is born with extra fat and fluids to help him through the first few days. Your baby's stomach is very small in the first few days and only needs small amounts of breastmilk, frequently.

The amount of milk your body makes will increase as your baby grows. When your baby is having a growth spurt, he may feed very often for a few days. Growth spurts most often occur at 2 or 3, 6 and 12 weeks of age. A growth spurt usually lasts from 2 to 7 days.

The World Health Organization and the Canadian Pediatric Society recommend that babies be breastfed for 2 years and beyond if desired.

Family foods may be started after your baby is 6 months old.



Can my baby have a soother?

Soothers are not recommended for the first 4 to 6 weeks, while your baby is learning to breastfeed.

Using soothers may result in the baby having fewer feedings a day. Fewer feeds can reduce the amount of breastmilk you make and slow your baby's growth.

How can I be sure my baby is getting enough breastmilk?

It is very rare for a mother not to have enough breastmilk for her baby. However, some women worry that their baby is not getting enough breastmilk.

You can tell that baby is breastfeeding well when:

- ✓ You hear, see and feel your baby sucking and swallowing.
- ✓ Your baby is feeding at least 8 times in 24 hours, about every 2 to 3 hours.
- ✓ Your baby has enough wet diapers and stools (see the chart on the next page).
- ✓ Your breasts feel softer and less full after feeding.
- ✓ Your baby seems content after feeding.
- ✓ Your baby is alert and growing.

During the first few weeks, it is helpful to keep track of how often you feed your baby and the number of wet diapers and bowel movements or stools your baby has each day.

Use this chart as a guide to the number of wet diapers and stools your baby should have during the first month of age.

	Wet diapers	Stools
Day 1	1 to 2 wet diapers.	At least 1 stool that is black and tarry, called meconium.
Day 2	At least 1 to 2 wet diapers. It is common to see small pink spots on the diaper, caused by uric acid in the urine.	A least 1 stool that may have a greenish colour.
Day 3	3 or more wet diapers. You may still see small pink spots.	At least 3 stools that are dark green or yellow.
Days 4 to 6	6 or more wet diapers each day, without any pink spots. Diapers will seem heavier as your baby passes more urine.	3 to 4 soft, seedy, yellow stools each day. Your baby may have a stool with every diaper change.
Day 7 to 1 month of age	6 to 8 heavy, wet diapers each day, that have pale or colourless urine.	At least 3 soft, yellow stools each day.

Why do breastfeeding babies need Vitamin D supplements?

Vitamin D is needed for bones to grow strong. Some babies are at risk for not having enough vitamin D. This is called a vitamin D deficiency.

Because it is hard to tell which babies might be at risk, it is recommended that all breastfed babies receive vitamin D supplements until they are eating foods other than breastmilk. Talk to your doctor or midwife about Vitamin D supplements for your baby. For more information go to the Canadian Pediatric Society's website:

www.caringforkids.cps.ca/pregnancy&babies/vitamind.htm

How do I feed my baby when we go out?

It is easy to breastfeed your baby when you go out. Most people will not even notice that you are feeding your baby. Choose a comfortable place where you can relax. Many shopping malls and large department stores have a room where you can feed and change your baby with more privacy. Breastfeeding is not recommended in washrooms.

To become comfortable with feeding when you go out, try:

- covering up with a blanket, or wear clothes that pull up from the waist or undo at the front
- practice feeding at home, in front of a mirror
- take a friend or family member with you, or bring something along to look at or read



Canada's Human Rights Code protects a woman's right to breastfeed wherever and whenever she chooses.

How do I take care of my breasts?

Wash your breasts daily. Do not use perfume, scented soap or creams on your breasts. Wash the nipple with just warm water, as soap may cause drying. Wear a bra that fits well and is not too tight. Do not wear a bra with underwire.

After breastfeeding, gently express a drop or two of your breastmilk onto your nipples and areola. Let them dry before putting on your bra. The breastmilk moisturizes the skin and can help prevent infections. This also protects your nipples.

Keep your nipples dry between feedings. Uncover your breasts for a few minutes after feedings to allow air around your nipples. If you use breast pads, change them often and whenever they get wet. Do not use breast pads with a plastic backing.

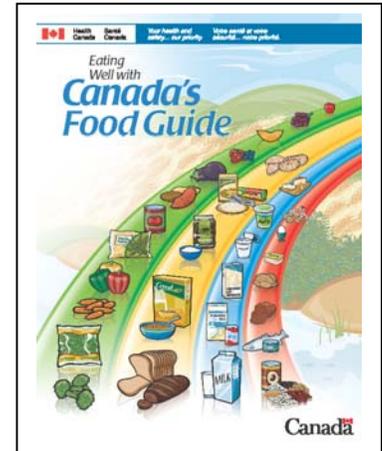
Caring for yourself

What should I eat and drink?

Healthy eating is good for your body, especially when you are breastfeeding. While you are breastfeeding you need extra energy from food and extra fluids. You may feel more hungry and thirsty.

Eating well with Canada's Food Guide gives you advice on how to choose foods.

If you do not have a copy, please ask your doctor or midwife, a dietitian or visit Health Canada's website: www.hc-sc.gc.ca (click on Canada's Food Guide)



Every day, enjoy a variety of foods from each of the 4 food groups:

- vegetables and fruit
- grain products
- milk and alternatives
- meat and alternatives

Healthy foods to choose more often are:

- dark green and orange vegetables
- orange fruit
- whole grain and enriched products
- lower fat foods and milk products
- leaner meats, poultry and fish
- dried peas, beans and lentils

Eating Well with Canada's Food Guide gives a range of servings for each food group. When you are pregnant or breastfeeding you need extra energy, so you will need more than the minimum number of servings. You do not need to increase the calcium in your diet while breastfeeding.

Caffeine

Caffeine is found in drinks such as coffee, iced and hot tea and cola. Foods like chocolate that are made from cocoa contain caffeine too. Caffeine is also found in some medications for colds or headaches.

Caffeine passes into breastmilk. If you drink a moderate amount of caffeine there should be no effect on a healthy full-term baby. A moderate amount is no more than 3 cups a day of drinks that contain caffeine (3 cups = 750 ml = 24 ounces). However, caffeine may have a different effect on a preterm or sick baby.

Alcohol and drugs

Alcohol passes into breastmilk, so it is best not to drink any alcohol, such as wine, beer or liquor while you are breastfeeding.

If you choose to drink alcohol while you are breastfeeding, it is best to limit yourself to small amounts, drink with food and when your baby is not likely to breastfeed for a few hours.

For example, if a mother who weighs 150 pounds has 2 alcoholic drinks, it will take 4½ hours before her breastmilk is clear of alcohol. If her baby is ready to feed before then, it would be best to feed him breastmilk that was expressed earlier, when the mother's milk was clear of alcohol.

Recreational or street drugs such as marijuana, are not recommended during breastfeeding.

For more information call Motherisk: 1-877-327-4636.

Herbal teas

Some herbal teas are not safe to drink while breastfeeding. The herbs in these teas have drug-like effects which can be passed to your baby through your breastmilk. This can be harmful to your baby.

There is little information available from research about which herbal teas are safe to drink. These herbal teas are considered safe to drink as they have little or no effect on your body:

- citrus peel
- orange peel
- ginger
- lemon balm
- rosehip
- linden flower (not recommended for people with heart problems)



For more information call Motherisk: 1-877-327-4636 or talk with a health care provider.

Food that affects your baby

If you think your baby seems to get gas or become irritable from certain foods you have eaten, stop eating them for a few days. Then, try them again in small amounts to see if your baby is still affected.

Can I diet when I am breastfeeding?

It is best to follow Eating Well with Canada Food Guide. If you choose to diet, avoid crash or fad diets. Regular exercise will also help with weight loss.

Breastfeeding will help you lose weight. Each month, in the first 4 to 6 months after your baby is born, you may lose 1 to 2 pounds.

Can I take medication when I am breastfeeding?

Before you take any medications while you are breastfeeding, check with your doctor, pharmacist or Motherisk (1-877-327-4636, <http://www.motherisk.org/>). This includes medications that you can buy “over-the-counter” without a prescription.

How can breastfeeding affect sexuality?

When you are breastfeeding, you may feel less interested in sex because of changes in your hormones. This is normal. Most women find their usual interest in sex returns gradually, over the year after childbirth.

Some women may have vaginal dryness. Many couples use a water soluble lubricant such as K-Y Jelly[®] to make sex more comfortable. You can buy lubricant at the drugstore without a prescription.

Some women leak breastmilk when they become sexually aroused or have an orgasm. If this makes you or your partner feel uncomfortable you can wear a bra with breast pads during sex.

You can become pregnant even if you have not had your menstrual period since your baby was born. If you are breastfeeding it may take several months for your menstrual periods to start again.

A birth control method should be used to prevent pregnancy while you are breastfeeding.

For information about birth control while breastfeeding speak to:

- your family doctor
- your midwife
- a lactation consultant
- a La Leche League
- your local Public Health Office

Expressing your breastmilk

You may express your breastmilk:

- to have breastmilk available when you are away from your baby
- if your breasts are too hard for your baby to latch onto properly
- if you need to increase your breastmilk supply

It takes practice to express your breastmilk. Do not worry if you only collect small amounts at first. If your baby is not feeding from your breasts, it is important to express your breastmilk as often as the baby normally feeds to keep up your breastmilk supply. Most moms would need to express their breastmilk 8 to 10 times in 24 hours if the baby is not feeding from your breasts well.

How do I collect my breastmilk?

You can express your breastmilk by hand or with a breast pump. This depends on what you feel comfortable with and the needs of your baby.

For an occasional feeding, express by hand. This is usually easy and needs no equipment. If you prefer, you could use a hand pump.

When you are expressing breastmilk for a premature or sick baby, a hospital grade electric pump is the best choice. Pumping both breasts at the same time works best.

Do not use a pump with a rubber bulb. The rubber bulb is hard to clean and may damage your nipples.

What do I need to collect and store my breastmilk?

Collect your breastmilk in a clean container. Plastic or glass containers that close tightly are best for storing your breastmilk. You may use plastic bags that are made for freezing breastmilk.

Before you begin, wash the containers and pump parts with very hot, soapy water. Rinse well and air dry.

How do I express my breastmilk by hand?

There are many ways to express breastmilk by hand. With practice, you will find the way that works best for you.

Before you start, wash your hands and the collection container with soap and water.

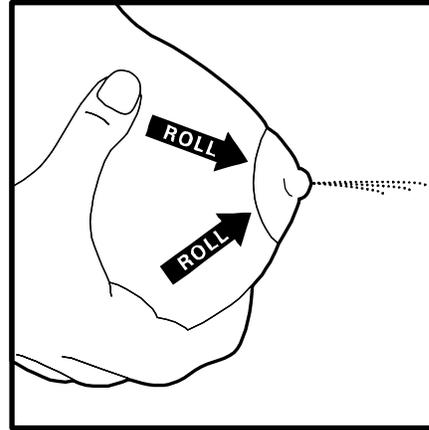


To encourage milk flow, first massage your breasts and nipples by moving fingers in a circular motion around the breast. Remember to be gentle. You can bruise your breasts easily. Using a warm moist towel on your breasts for 5 minutes can also help your breastmilk to flow.

Support your breast from underneath. Your hand should form a large “C” shape. Place your thumb and 2 fingers about 2 to 3 cm (1 to 1½ inches) behind the nipple. Push your thumb and fingers straight back towards your chest.

Next, roll your thumb and 2 fingers together.

Imagine you are pushing the breastmilk out, not squeezing the nipple shut.



Repeat this rhythmic motion as long as your breastmilk flows. Then move your fingers around the areola to express breastmilk from all areas of the breast. When the breast becomes soft and the flow stops, switch to the other side.

To get more breastmilk, go back and forth from breast to breast until no more breastmilk spurts out.

In the beginning expect to spend 20 to 30 minutes to empty both breasts. Do not worry if you only get a few drops when first learning to express. Expressing breastmilk will get easier and better with practice.

Where can I get a breast pump?

You can buy or rent a pump at some breastfeeding clinics, hospital gift shop and some pharmacies. Certain pumps may be better for your situation than others. For more information talk to a lactation consultant or a public health nurse.

How do I use a breast pump?

Read all the instructions that come with your pump. It is important that the pump is put together properly, and that you use it properly so you do not injure your nipples or breasts. Follow the cleaning instructions. Make sure you wash your hands well before handling the pump parts.

You can express breastmilk at any time. You may find it easier to express right after feeding your baby. Do not pump right before a feeding unless your breasts are very full and your baby finds it hard to latch.

If your baby is not breastfeeding at all or very little, express both breasts every 3 hours.

How do I store my breastmilk?

Appliance	Storage Time
One door fridge	up to 5 days
Freezer section inside a fridge	2 weeks
Freezer section of a 2-door fridge	3 to 6 months
Deep freezer	6 to 12 months
Breastmilk storage times are for healthy full-term babies.	

Pour your milk into a clean storage container. Leave about 1½ cm or ½ inch at the top of the container, so that it does not push the lid open during freezing. Close the container tightly and label it with the date.

Milk should be stored in single feedings. It may take several collections to get one feeding of breastmilk. Cool each collection in the refrigerator before adding it to already frozen breastmilk.

If you plan to use your milk within 5 days, you do not have to freeze it.

If you have a baby in the hospital, check with your baby's caregiver for storage times for breastmilk in the NICU/Special Care Nursery.

Remember to use a cooler bag to transport breastmilk to the hospital.

Important:

- Place containers at the back of the fridge and freezer where it is the coldest.
- Previously thawed breastmilk is safe for 24 hours in a refrigerator.
- After the storage time has passed, throw out the breastmilk.



How do I thaw frozen breastmilk?

Always use the oldest breastmilk first. Never thaw breastmilk in the microwave. Thaw frozen breastmilk by leaving it in the refrigerator overnight or place the container in a pan of lukewarm water.

How do I use stored breastmilk?

After the breastmilk is thawed, keep it in the refrigerator and use it within 24 hours. Before feeding, warm the milk in a container of warm water only to body temperature. When the breastmilk is warm, swirl it to mix the breastmilk. You may see white flecks in the breastmilk. This is normal.

Do not microwave breastmilk. A microwave can make “hot spots” in the breastmilk that may burn the baby’s mouth and it can also destroy valuable nutrients.

Breastmilk should never be refrozen.

Some helpful hints

- It is important for you to rest, eat healthy foods and drink enough fluids.
- Feeding your baby with an artificial nipple during the first 4 to 6 weeks may change the baby’s suck and cause problems with breastfeeding. Ask your caregiver about other feeding methods that you can use temporarily while your baby is learning to breastfeed.
- If possible, express or pump in a quiet, restful place. Think about your baby and try to relax. This will help your breastmilk “let down” or flow easily. Other things that can help are heat, massage, music or looking at a picture of your baby.

What should I do when I go out?

Continue to express or pump while you are away from your baby. This will help to keep up your breastmilk supply.

If you are collecting your breastmilk, carry the milk in a cooler bag with an ice pack.

If you return home and your baby has just been fed, you can attempt to breastfeed or you may need to pump your breasts for comfort.



Managing problems

Some women run into problems and decide to stop breastfeeding earlier than they had planned. The most common reasons for stopping breastfeeding early are sore nipples and concern about not having enough breastmilk.

If you have a problem with breastfeeding, ask for help right away. Do not switch to formula feeding your baby without getting help. Problems can be solved so you can continue to breastfeed your baby or express your breastmilk for your baby.

What should I do if my baby refuses to breastfeed?

There are many reasons why a baby may refuse to breastfeed. Talk with your baby's health care provider as soon as possible. Your baby may need a check-up and you may need to express your breastmilk.

What should I do if my nipples become sore?

At the first sign of nipple pain, ask your health care provider, lactation consultant or La Leche League for help with breastfeeding. Changing the way your baby is positioned and latched on to your breast can usually solve the problem right away. Once your baby is breastfeeding well, your nipples will feel better and will heal quickly.

If you continue breastfeeding and your baby is not latched on correctly, your nipple can become red, blistered, cracked or start bleeding.

Here are some ways to feel more comfortable while your nipples are healing:

- Massage and hand express to get the breastmilk flowing before you put your baby to breast. This helps soften the nipple and relieves discomfort.
- When you feed your baby, offer the least sore nipple first. Babies usually suck more vigorously at the start of a feeding.
- Use relaxation techniques such as deep breathing before and during feeding.
- Talk with your health care provider about using medication that relieves pain.
- After you feed your baby put a warm or cool moist washcloth on your nipples for a few minutes. Use whatever feels best. Express a little breastmilk and gently massage it into your nipples. Let your nipples dry uncovered for 5 to 10 minutes.
- You can apply a thin layer of pure lanolin ointment to your nipple. The lanolin ointment does not harm your baby and does not need to be washed off before you feed your baby. You can buy ointment called Lansinoh[®] or Purelan[®] at the drug store.

Do I have enough breastmilk for my baby?

One of the most common reasons that women stop breastfeeding early is because they think they do not have enough breastmilk or that their baby is hungry. It is very rare not to have enough breastmilk for your baby. The list on page 17 can help you check that your baby is breastfeeding well.

If you think you may not have enough milk, talk with your health care provider, a lactation consultation or La Leche League for help.

What should I do if my breasts get very full and uncomfortable?

After the first 1 to 3 days your breastmilk changes in colour and amount. Your breasts may become full as the amount of breastmilk increases “milk comes in”. This is called engorgement. This full feeling should go away in 1 or 2 days.

Try these steps if your breasts feel very full or hard:

1. Feed your baby more often.
2. Have a warm shower or bath before feeding your baby. In the bath or shower, gently massage your breasts towards the nipples.
3. Express enough breastmilk (using guidelines on page 26), to make the areola feel softer. You may express breastmilk by hand or with a breast pump. If you need a breast pump ask a health care provider which type you should use. Do not use a pump with a rubber bulb.
4. Continue to feed your baby often, at least 8 times in 24 hours. This is about every 2 to 3 hours.

Wear a cotton bra that supports your breasts. Use cold packs on your breasts for 10 to 15 minutes between feedings. If you are very sore or your breasts are so hard that your baby cannot latch on, ask your health care provider for help.

What should I do if a breast hurts, but I do not feel sick?

If you feel a hard, firm area on your breast which hurts, but you do not feel sick, you may have a plugged milk duct.

Try these things to help:

- Continue to breastfeed your baby at least 8 times a day. This is about every 2 to 3 hours.
- Begin feeding on the breast that hurts in order to encourage drainage.
- Make sure your baby is latched on properly.
- Change breastfeeding positions throughout the day, with at least one feeding with the baby's nose pointing towards the plugged duct.
- Make sure that your bra is not too tight. Take off your bra to breastfeed.
- Gently massage the sore area with the heel of your hand while you are breastfeeding or having a shower or bath. Massage from the sore spot towards the nipple.
- Rest when your baby rests.
- If your breast is still sore after trying these things for 24 hours, call your health care provider.

What should I do if my breast hurts and I feel sick?

If your breast hurts and you feel sick, you may have a breast infection called mastitis, which needs treatment.

Call your health care provider right away if your breast hurts and you:

- have chills or a fever
- see red streaks or the skin on your breast changes colour
- feel as if you have the flu

If you are given antibiotic medication, **take the pills until they are all gone**, even if you start to feel better after a day or two.

Apply moist warm compresses before feeding your baby to help with breastmilk flow. To help ease the pain apply cool compresses for 10 to 15 minutes after feeding or expressing. It is safe to take ibuprofen, such as Advil[®] or Motrin[®], to relieve pain or discomfort.

Continue to breastfeed your baby at least 8 times a day to keep your breasts well drained. It is safe to feed your baby from the sore breast.

If you feel sick, it may help to rest in bed and drink plenty of fluids. If you are not feeling better after 24 hours, call your health care provider again.

Can I breastfeed if my nipples are flat or inverted?

Nipples normally come in different shapes and sizes. A baby does not usually have problems latching onto his mother's nipples.

Women who have one or both nipples that are flat or dip inward (inverted) can still breastfeed their baby. You may need some extra help when you begin to breastfeed. During pregnancy it is not helpful to pull or rub your nipples to help them "come out".

If your baby has a problem latching onto your breast, contact a lactation consultant for help. If your baby is not latching on, pump your breasts to keep up your breastmilk supply. Use the pumped breastmilk to feed your baby.

What if my nipples are pierced?

If your nipples are pierced, take out the nipple jewelry for feedings. You may have more leaking due to the holes in the nipple area.

What if my doctor says my baby needs a supplement?

Very rarely there is a medical reason that a baby needs a supplement. Your expressed breastmilk is the best supplement. Expressing breastmilk will also increase your breastmilk supply.

If your baby needs a supplement, your health care provider can tell you about different supplements and how to give your baby the supplement.

Follow-up care, help and support

When does my baby need a check-up?

- Your baby needs to have an appointment with the doctor or midwife within 48 hours or 2 days after your baby leaves the hospital. Your midwife may visit your baby at home.
- Over the next month, the doctor or midwife will continue to check your baby to make sure he is healthy and gaining weight.

When should I get help?

Ask a health care provider for help if:

- your baby does not want to eat – refuses 2 feedings in a row
- your baby does not wake, cry or fuss to be fed after 6 hours
- your baby cries a lot and is not sleeping between feedings
- your baby vomits 2 whole feedings in a row or vomits at all feedings in 8 hours
- your baby does not have the expected number of wet diapers and stools for his age
- breastfeeding is painful or your nipples are red, cracked or blistered
- you feel a burning pain at the nipple or inside your breast
- you have itching or a rash on your nipple or areola
- you have a lump on your breast that does not go away with massage after 24 hours
- you have a fever, or flu-like symptoms
- you have any questions or concerns about breastfeeding

Where can I get breastfeeding support?

In the hospital, you can get help from your nurse, doctor or midwife, or a lactation consultant. When you go home, call your local Public Health Office for information about breastfeeding services in your community. Here's where you can get help and support if you live in the Hamilton area.

Health Connections 905-546-3550

8:30 - 4:30 Monday to Friday

Telephone support and referral for breastfeeding and other family health issues.

Public Health Breastfeeding Clinics

Support by Public Health Nurse Lactation Consultants

Limeridge Mall – Ontario Early Years Centre

Located on the second floor, across from Sport Check
(Old Navy entrance)

1:00 to 4:30 Monday to Friday

Free parking. Room is open for shoppers to feed their babies anytime during normal mall hours (except Sundays).

By appointment – Call Health Connections **905-546-3550**

Healthy Babies, Healthy Children

Postpartum, home visiting program. The nurse can support parents with breastfeeding and/or other newborn issues. Usually referred from hospital but client can also self-refer.

Call Health Connections **905-546-3550**

St. Joseph's Hospital Breastfeeding and Newborn Assessment Clinic

8:00 am to 6:00 pm - 7 days a week **905-522-1155**
Ext. 33485

Breastfeeding Clinic

Stonechurch Family Health Centre/McMaster Family Practice

Eileen Shea – Monday, Tuesday, Thursday and Friday

..... **905-575-1300**

Joseph Brant Memorial Hospital Breastfeeding Clinic

– Burlington

(for women who have delivered at Joseph Brant)..... **905-681-4840**

La Leche League **905-381-1010**

General number to access peer support, dates and times for meetings

After hours telephone support – Telehealth **1-866-797-0000**

Motherisk **1-416-813-6780**

Information about medications and breastfeeding

Dr. Jack Newman drjacknewman@sympatico.ca **1-416-498-0002**



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For more information or to contact the committee, please check our website at:
www.hamiltonrlc.com

dpc/pted/lgbkl/LearningToBreastfeedYourBaby-lw.doc
dt/June 3, 2009

