

Breastfeeding ... your premature baby

In this factsheet we call the baby "she". Other factsheets in this series use "he". We feel this is simpler than writing "he or she" every time.

Can I breastfeed my premature baby?

Yes. Breastfeeding is important for your premature baby. Breastmilk and the antibodies in breastmilk can help keep your baby healthy. Breastfeeding also helps your baby's jaw develop.

If your baby is not ready to breastfeed, you can express your breastmilk. The milk is given to your baby through a small tube, which is passed through her nose or mouth into her stomach. This is called gavage feeding.

The health care team will help you when it is time for your baby to start breastfeeding.

When should I start to express my milk?

You should express your breasts as soon as possible after your baby is born. Within 4 to 6 hours is ideal. Ask your baby's nurse to show you how to use the breast pump. Most hospitals have an electric breast pump.

What type of pump should I use at home?

If your baby is more than 3 weeks premature, you may be discharged before your baby is ready to leave the hospital. When you go home you will need to use a breast pump. Talk to your baby's nurse about which breast pump you should use.

If your baby was born more than 6 weeks early, you will need a good quality electric breast pump. It is best to use this pump with a double kit so you can express both breasts at the same time. This will save time and increase your milk supply.

How often should I express my milk?

Express your breastmilk often, at least 8 times in 24 hours. Try to pump every 2 hours during the day and every 4 hours at night for the first 2 weeks. This gives you a longer time to sleep between pumpings at night. Pump for about 15 to 20 minutes each time.

Even with regular pumping it may take a few days for your milk to "come in". It may take up to 2 weeks to build up a good milk supply.

Talk to your baby's nurse about how to label, store and transport your milk.

What should I do if my milk supply changes?

For the first few weeks, it is helpful to keep a record of when you use the pump and how much milk you express each time. Do not worry about small changes in your milk supply.

After 2 weeks of pumping, if your milk supply suddenly drops and does not come up in 2 or 3 days, talk to your baby's nurse or a lactation consultant.

Stress, some medications and herbal products, and smoking can decrease your milk supply.

To increase your milk supply, try to rest, relax and express your breasts more often.

When will my baby start to breastfeed?

Your baby may start breastfeeding about 6 to 8 weeks before her due date. To breastfeed, your baby must be able to suck effectively and co-ordinate sucking, breathing and swallowing.

If your baby is too young to start breastfeeding, it is important for her to get used to the close contact with your body. Even very premature babies can be held next to their mother's breasts. Hold your baby upright, under your shirt, on your chest. It is best if your baby wears only a diaper. This is called "Kangaroo Care", and it is very good for you and your baby. Your partner can also have "skin-to-skin" contact with your baby.

As your baby gets older, she will start to lick your nipple. Then she will take your nipple into her mouth. The next step is to take a few sucks at the breast.

At this point, your baby will tire easily. She may take some rest periods and the breast may fall out of her mouth. Your nurse can help you get your baby positioned so that she can get a good latch.

At first, your baby may only be able to breastfeed once or twice a day. As she gets older, she will be able to breastfeed more often and become better at it too.

The first feedings will take time and patience. This is a learning process for you and your baby. It will probably take several breastfeeding sessions before your baby latches on and breastfeeds well.

How do I know my baby is feeding well?

You will know your baby is feeding well when she has your nipple and some of the areola in her mouth. You will feel a gentle tug, but no pain when she is sucking. You may hear, see and feel her swallowing. Sometimes, preterm babies need help to stay latched at the breast. Your baby's nurse or the lactation consultant can help you with this.

Keep a record of when your baby feeds and how often she has wet diapers and bowel movements (stools).

Will my baby need anything other than breastmilk?

Premature babies usually grow well on their mothers' milk. Babies who are born very early sometimes require extra protein, minerals and calories. Your baby's nurse will let you know if your baby needs these "fortifiers". Fortifiers are added to your milk and are usually only needed while your baby is in the hospital.

How do I get ready to take my baby home?

When your baby is getting ready to go home, she should be breastfeeding at almost every feeding and gaining weight. At this point, you can room in with your baby for 1 or 2 days and breastfeed her at every feeding. You will do all her care, but you are still in the hospital where you can ask questions and see if you and your baby are ready to go home.

What follow-up care will my baby need?

After leaving the hospital, preterm babies need to have regular visits with their family doctor or pediatrician. Depending on your baby's needs, she may also need follow-up care with a lactation consultant. You can visit a lactation consultant or a breastfeeding clinic until beastfeeding is well established.

Some babies may need follow-up care in a special clinic for premature babies. The health care team at the clinic assess the baby's health and development, and keep track of the baby's weight, height and head measurements. The clinic staff also help parents learn about their baby's health, growth and development.



For more information about breastfeeding go to our website: www.hamiltonrlc.com

There are many people who can answer questions or help you with breastfeeding your premature baby.

Some choices are:

your doctor or midwife

a lactation consultant

nursing staff

a dietitian

a public health nurse

a La Leche League leader