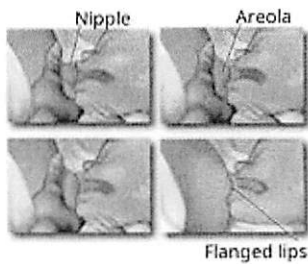


Education Materials

Obstetrics and Gynecology

Breastfeeding



Choosing to breastfeed is one of the best decisions you can make for yourself and your baby. A change in hormones during pregnancy causes your breasts to make breast milk in your milk-producing glands. Hormones prevent breast milk from being released before your baby is born. They also prompt milk flow after birth. Once breastfeeding has begun, thoughts of your baby, as well as his or her sucking or crying, can stimulate the release of milk from your milk-producing glands.

Benefits of breastfeeding

Research shows that breastfeeding offers many health benefits for infants and mothers. It also offers a cost-free and convenient way to feed your baby.

For your baby

- Your first milk (*colostrum*) helps your baby's digestive system to function better.
- Special cells in your milk (*antibodies*) help your baby to fight off infections.
- Breastfed babies are less likely to develop asthma, allergies, obesity, or type 2 diabetes. They are also at lower risk for sudden infant death syndrome (SIDS).
- Nutrients in breast milk are better able to meet your baby's needs compared to infant formula.
- Breast milk improves your baby's brain development.

For you

- Breastfeeding helps to create a very special bond between you and your baby.
- Breastfeeding is convenient. Breast milk costs nothing and is always available at the correct temperature.
- Breastfeeding helps to burn calories. It helps you to lose the weight that you gained during pregnancy.
- Breastfeeding makes your uterus return faster to its size before pregnancy. It also slows bleeding (*lochia*) after you give birth.
- Breastfeeding helps to lower your risk of developing type 2 diabetes, osteoporosis, rheumatoid arthritis, cardiovascular disease, and breast, ovarian, uterine, and endometrial cancer later in life.

Breastfeeding basics

Starting breastfeeding

- Find a comfortable place to sit or lie down, with your neck and back well-supported.
- Place a pillow or a rolled-up blanket under your baby to bring him or her to the level of your breast (if you are seated). Nursing pillows are specially designed to help support your arms and your baby while you breastfeed.
- Make sure that your baby's tummy (*abdomen*) is facing your abdomen.
- Gently massage your breast. With your fingertips, massage from the outer edges of your breast inward toward the nipple. This encourages milk flow. If your milk flows slowly, you may need to continue this action during the feeding.
- Support your breast with 4 fingers underneath and your thumb above your nipple (make the letter "C" with your hand). Make sure your fingers are well away from your nipple and your baby's mouth.
- Stroke your baby's lips gently with your finger or nipple.
- When your baby's mouth is open wide enough, quickly bring your baby to your breast, placing your entire nipple and as much of the areola as possible into your baby's mouth. The areola is the colored area around your nipple.
 - More areola should be visible above your baby's upper lip than below the lower lip.
 - Your baby's lips should be opened and extended outward (*flanged*) to ensure an adequate, comfortable latch.
 - Your baby's tongue should be between his or her lower gum and your breast.
- Make sure that your baby's mouth is correctly positioned around your nipple (*latched*). Your baby's lips should create a seal on your breast and be turned out (*everted*).
- It is common for your baby to suck about 2–3 minutes in order to start the flow of breast milk.

Latching

Teaching your baby how to latch onto your breast properly is very important. An improper latch can cause nipple pain, decreased milk supply, and poor weight gain in your baby. Also, if your baby is not latched onto your nipple properly, he or she may swallow some air during feeding. This can make your baby fussy. Burping your baby when you switch breasts during the feeding can help to get rid of the air. However, teaching your baby to latch on properly is still the best way to prevent fussiness from swallowing air while breastfeeding.

Signs that your baby has successfully latched onto your nipple

- Silent tugging or silent sucking, without causing you pain. Infant's lips should be extended outward (*flanged*).
- Swallowing heard between every 3–4 sucks once your milk has started to flow (after your let-down milk reflex occurs).
- Muscle movement above and in front of his or her ears while sucking.

Signs that your baby has not successfully latched onto your nipple

- Sucking sounds or smacking sounds from your baby while breastfeeding.
- Nipple pain.

If you think your baby has not latched on correctly, slip your finger into the corner of your baby's mouth to break the suction and place it between your baby's gums. Attempt to start breastfeeding again.

Signs of successful breastfeeding

Signs from your baby

- Your baby will gradually decrease the number of sucks or will completely stop sucking.
- Your baby will fall asleep.
- Your baby's body will relax.

- Your baby will let go of your breast by himself or herself.

Signs from you

- Breasts that have increased in firmness, weight, and size 1–3 hours after feeding.
- Breasts that are softer immediately after breastfeeding.
- Increased milk volume, as well as a change in milk consistency and color by the fifth day of breastfeeding.
- Nipples that are not sore, cracked, or bleeding.

Signs that your baby is getting enough milk

- Wetting at least 1–2 diapers during the first 24 hours after birth.
- Wetting at least 5–6 diapers every 24 hours for the first week after birth. The urine should be clear or pale yellow by the age of 5 days.
- Wetting 6–8 diapers every 24 hours as your baby continues to grow and develop.
- At least 3 stools in a 24-hour period by the age of 5 days. The stool should be soft and yellow.
- At least 3 stools in a 24-hour period by the age of 7 days. The stool should be seedy and yellow.
- No loss of weight greater than 10% of birth weight during the first 3 days of life.
- Average weight gain of 4–7 oz (113–198 g) per week after the age of 4 days.
- Consistent daily weight gain by the age of 5 days, without weight loss after the age of 2 weeks.

After a feeding, your baby may spit up a small amount of milk. This is normal.

Breastfeeding frequency and duration

Frequent feeding will help you make more milk and can prevent sore nipples and extremely full breasts (*breast engorgement*). Breastfeed when you feel the need to reduce the fullness of your breasts or when your baby shows signs of hunger. This is called "breastfeeding on demand." Signs that your baby is hungry include:

- Increased alertness, activity, or restlessness.
- Movement of the head from side to side.
- Opening of the mouth when the corner of the mouth or cheek is stroked (*rooting*).
- Increased sucking sounds, smacking lips, cooing, sighing, or squeaking.
- Hand-to-mouth movements and sucking on fingers or hands.
- Fussing or crying.

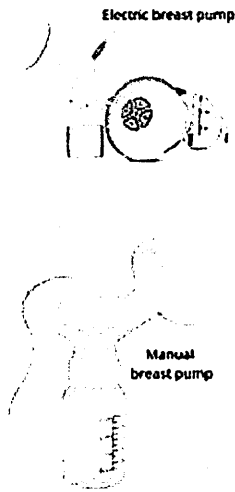
Avoid introducing a pacifier to your baby in the first 4–6 weeks after your baby is born. After this time, you may choose to use a pacifier. Research has shown that pacifier use during the first year of a baby's life decreases the risk of sudden infant death syndrome (SIDS).

Allow your baby to feed on each breast as long as he or she wants. When your baby unlatches or falls asleep while feeding from the first breast, offer the second breast. Because newborns are often sleepy in the first few weeks of life, you may need to awaken your baby to get him or her to feed.

Breastfeeding times will vary from baby to baby. However, the following rules can serve as a guide to help you make sure that your baby is properly fed:

- Newborns (babies 4 weeks of age or younger) may breastfeed every 1–3 hours.
- Newborns should not go without breastfeeding for longer than 3 hours during the day or 5 hours during the night.
- You should breastfeed your baby a minimum of 8 times in a 24-hour period.

Breast milk pumping



Pumping and storing breast milk allows you to make sure that your baby is exclusively fed your breast milk, even at times when you are unable to breastfeed. This is especially important if you go back to work while you are still breastfeeding, or if you are not able to be present during feedings. Your lactation consultant can help you find a method of pumping that works best for you and give you guidelines about how long it is safe to store breast milk.

Caring for your breasts while you breastfeed

Nipples can become dry, cracked, and sore while breastfeeding. The following recommendations can help keep your breasts moisturized and healthy:

- Avoid using soap on your nipples.
- Wear a supportive bra designed especially for nursing. Avoid wearing underwire-style bras or extremely tight bras (sports bras).
- Air-dry your nipples for 3–4 minutes after each feeding.
- Use only cotton bra pads to absorb leaked breast milk. Leaking of breast milk between feedings is normal.
- Use lanolin on your nipples after breastfeeding. Lanolin helps to maintain your skin's normal moisture barrier. Pure lanolin is not harmful (not *toxic*) to your baby. You may also hand express a few drops of breast milk and gently massage that milk into your nipples and allow the milk to air-dry.

In the first few weeks after giving birth, some women experience breast engorgement. Engorgement can make your breasts feel heavy, warm, and tender to the touch. Engorgement peaks within 3–5 days after you give birth. The following recommendations can help to ease engorgement:

- Completely empty your breasts while breastfeeding or pumping. You may want to start by applying warm, moist heat (in the shower or with warm, water-soaked hand towels) just before feeding or pumping. This increases circulation and helps the milk flow. If your baby does not completely empty your breasts while breastfeeding, pump any extra milk after he or she is finished.
- Apply ice packs to your breasts immediately after breastfeeding or pumping, unless this is too uncomfortable for you. To do this:
 - Put ice in a plastic bag.
 - Place a towel between your skin and the bag.
 - Leave the ice on for 20 minutes, 2–3 times a day.

If engorgement persists after 48 hours of following these recommendations, contact your health care provider or a lactation consultant.

Overall health care recommendations while breastfeeding

- Eat 3 healthy meals and 3 snacks every day. Well-nourished mothers who are breastfeeding need an additional 450–500 calories a day. You can meet this requirement by increasing the amount of a balanced diet that you eat.
- Drink enough water to keep your urine pale yellow or clear.
- Rest often, relax, and continue to take your prenatal vitamins to prevent fatigue, stress, and low vitamin and mineral levels in your body (*nutrient deficiencies*).
- **Do not** use any products that contain nicotine or tobacco, such as cigarettes and e-cigarettes. Your baby may be harmed by chemicals from cigarettes that pass into breast milk and exposure to secondhand smoke. If you need help quitting, ask your health care provider.
- Avoid alcohol.
- **Do not** use illegal drugs or marijuana.
- Talk with your health care provider before taking any medicines. These include over-the-counter and prescription medicines as well as vitamins and herbal supplements. Some medicines that may be harmful to your baby can pass through breast milk.
- It is possible to become pregnant while breastfeeding. If birth control is desired, ask your health care provider about options that will be safe while breastfeeding your baby.

Where to find more information:

La Leche League International: www.llli.org

Contact a health care provider if:

- You feel like you want to stop breastfeeding or have become frustrated with breastfeeding.
- Your nipples are cracked or bleeding.
- Your breasts are red, tender, or warm.
- You have:
 - Painful breasts or nipples.
 - A swollen area on either breast.
 - A fever or chills.
 - Nausea or vomiting.
 - Drainage other than breast milk from your nipples.
- Your breasts do not become full before feedings by the fifth day after you give birth.
- You feel sad and depressed.
- Your baby is:
 - Too sleepy to eat well.
 - Having trouble sleeping.
 - More than 1 week old and wetting fewer than 6 diapers in a 24-hour period.
 - Not gaining weight by 5 days of age.
- Your baby has fewer than 3 stools in a 24-hour period.
- Your baby's skin or the white parts of his or her eyes become yellow.

Get help right away if:

- Your baby is overly tired (*lethargic*) and does not want to wake up and feed.
- Your baby develops an unexplained fever.

Summary

- Breastfeeding offers many health benefits for infant and mothers.
- Try to breastfeed your infant when he or she shows early signs of hunger.
- Gently tickle or stroke your baby's lips with your finger or nipple to allow the baby to open his or her mouth. Bring the baby to your breast. Make sure that much of the areola is in your baby's mouth. Offer one side and burp the baby before you offer the other side.
- Talk with your health care provider or lactation consultant if you have questions or you face problems as you breastfeed.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

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