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Breastfeeding

Nursing your infant should be a fun, exciting, rewarding, and loving experience for you and your baby. But nursing mothers, especially those nursing for the first time, must realize that this takes time and practice. Getting started may be the most difficult time for the nursing mother, but don't give up! Most babies are very sluggish in the beginning and will need some help in getting started. Don't forget, this is new to them too! It is good to try to nurse the infant shortly after delivery, but don't be surprised if he is not interested. Chances are he is not hungry, and is simply worn out from the birth process.

Probably the most important thing is for the mother to RELAX! Get yourself comfortable before you get started. Don't try to force the nipple into the baby's mouth. Instead, take advantage of the "rooting reflex." Hold your nipple and areola, and then touch it to the baby's cheek. He should naturally turn his head toward the nipple and grasp it with his mouth. Try to get as much of the areola as possible into his mouth. This will be more comfortable for you, and also allow the baby to empty the breast more completely. Be sure to hold your breast away from the baby's nose so he can breathe easily. Babies will not usually suck continuously but stop and then start again while nursing. If he seems to be going to sleep and forgets to suck, try stroking the cheek from the corner of his mouth towards the ear. This usually stimulates him to start again.

The first few days after delivery, the baby will be getting colostrum instead of the true milk from your breast. Colostrum is a yellowish and creamy fluid, which is very rich in antibodies. It helps to protect your baby from infection and helps to prepare the intestinal tract for the milk, which will be coming.



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The stimulus for milk production is the emptying of the breast, so more frequent feedings should help the milk come in more quickly. You should empty the breast with nursing or pumping at least eight times each day. The milk usually comes in at about two to four days after delivery, and you will know when this happens. Your breasts may become full fairly rapidly, and the colostrum changes to the thinner, whiter milk. Although breast milk may appear watery, it contains all the important nutrients that your baby needs.

Feed the baby from both breasts with each feeding, alternating the side with which you start. When you get settled into breast-feeding, generally the baby should nurse no longer than twenty minutes on each side. Breast milk is very easily digested in the baby's intestinal tract, so your infant may want to feed every two to three hours the first several weeks at home. Don't worry that you aren't making enough milk. Many babies go through a stage at two to three weeks of age when they seem hungry all the time. Don't be reluctant to feed your baby as often as he may desire during this time, which may be every two hours. This is a natural growing spurt for the baby, and also his way of helping to increase your milk supply. It is important to realize that his milk requirements are going to increase rather remarkably during the first few months of life. To keep up with this, your milk supply will have to increase substantially, and rather than supplementing his feedings with formula because of the concern that he's not getting enough milk, it is better to increase the frequency of your feedings so that your milk supply will be stimulated to keep up with your baby's demands. You can usually answer the question as to whether or not the baby is getting enough milk if: (1) he is gaining weight, (2) he has five to six wet diapers per day, (3) he has at least one stool per day, and (4) he is content. By content we mean he does not cry all the time as if



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nothing is making him happy. On the other hand, he should not sleep so much that he never gets hungry. If you are concerned your baby is not getting enough milk, you should call our office.

The first several weeks of nursing are a time to pamper yourself. Lots of rest, relaxation, and good nutrition are very important to build up a good milk supply. This is the time for your spouse to pitch in and help around the house, i.e. cleaning, fixing meals, and running errands. Try to sleep when the baby is sleeping. If you can, keep visitors to a minimum the first few weeks. You and your baby need to adjust to being home together. A good balanced diet is also important, and you should continue to take your prenatal vitamins daily. Be sure to drink lots of fluids, also. You may find that some foods you eat will upset your infant, causing gas and discomfort. If the baby seems unusually fussy after a particular food, leave it out of your diet for a while and then try it again to see if this food was responsible.

Many breast feeding mothers would like to have more freedom to be gone for longer periods from their infant, yet still provide only breast milk for feeding. It is possible to pump the milk and freeze it for later feedings. This also allows many mothers to work and still continue nursing their infant on a full-time basis. There are several breast pumps available, which are effective, or you may find it easier to simply hand express the milk. Most hand pumps are difficult to use and tiring; therefore they are not recommended. Electric pumps, which are the most effective in emptying the breasts, may be rented or purchased. Purely Yours is Dr. Flynn's recommended brand.

The milk you pump should be stored in sterile bottles or bags, preferably plastic ones if you freeze it. Freeze your milk in small (2-4 ounce) portions so that they will thaw quickly. Fresh milk may be used at room temperature below 72 degrees for up to 10 hours. Fresh milk may be used from an insulated bag with



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cooling pack up to 24 hours. The milk may be refrigerated (32 to 39 degrees) if it is to be used within 1 week; otherwise, it should be frozen. Frozen milk may be stored in the freezer compartment inside a refrigerator for up to 2 weeks, in a refrigerator freezer with separate door for up to 4 months, or in a separate deep freeze at zero degrees for up to 6 months. Running luke-warm tap water over the bottle for approximately ten minutes can thaw the milk. Do not put it in the microwave as this may burn the baby and remove valuable milk properties. Thawed milk may be stored in the refrigerator at 32 to 39 degrees for up to 24 hours. Do not refreeze.

If you try to pump while nursing full-time or in the first few weeks, you may have difficulty obtaining even an ounce. Don't be discouraged; it takes time, patience, and practice to become an expert at it. It usually takes about one to three minutes of gentle suction on the nipple to initiate the letdown reflex and establish a good milk stream. Also later in the nursing process, when good milk supply has already been established, pumping the breast should be easier than earlier on. Not only will you have more freedom, but also your husband and others will have the chance to feed the baby occasionally.

It is important to remember that breast fed babies tend to have more frequent bowel movements, which can be very loose, almost liquid. This is very normal and does not represent diarrhea. The number of stools may vary from five to ten per day. The stool is usually yellowish to greenish in color. Breast stools may be seedy or curdy for the first few months; this is a sign that he is getting the fatter, richer, desired hind milk. Fortunately, the odor is not unpleasant, and the frequency of bowel movements will gradually decrease after six to eight weeks of nursing. Some older breast fed infants may have a bowel movement only once each day to every other day.



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Breastfeeding References:

1. *Breast Feeding Pure and Simple* by Gwen Gotsch
2. *The Complete Book of Breast Feeding* by Marvin Eiger, M.D. and Sally Olds
3. *Reference Book for Breast Feeding*
4. *Nursing Mother/ Working Mother* by Gale Pryor
5. *New Mother's Guide to Breastfeeding* by Joan Meek, M.D.