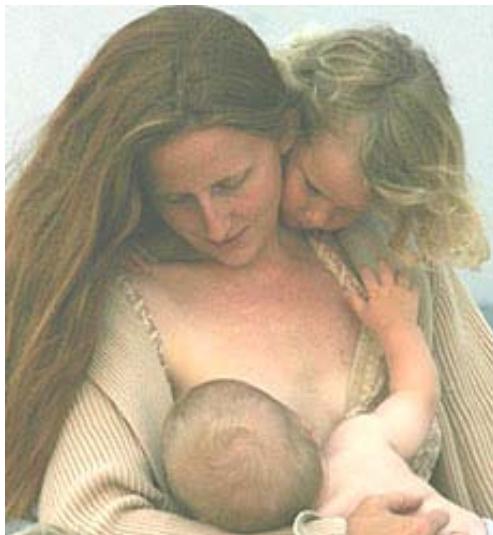




NORTHLAND HEALTH  
Together with Northland  
Kotahitanga o te Taitokerau

# BREAST FEEDING SIMPLY THE BEST



# **CONGRATULATIONS**

Congratulations on the birth of your baby. Breast-feeding will be a unique experience for you and your baby. For most women, breastfeeding is a learnt art that requires assistance and support to start and continue breastfeeding.

Our staff are committed to supporting breastfeeding and are here to help and guide you towards success.

## **The Ten Steps to Successful Breastfeeding**

1. Have a written breastfeeding policy that is communicated to all health care staff.
2. Train all health care staff in skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within half an hour of birth
5. Show mothers how to breastfeed and how to maintain lactation even if they should be separated from infants.
6. Give newborn infants no food or drink other than breast milk, unless medically indicated
7. Practice rooming in – allow mothers and infants to remain together 24 hours a day
8. Encourage breast-feeding on demand
9. Give no artificial teats or pacifiers to breast feeding infants
10. Foster the establishment of breastfeeding support groups, refer mothers to them on discharge from hospital

# **WHY BREASTFEED?**

## ***GOOD FOR BABY***

- ♥ Protection against ear infections
- ♥ Protection against diarrhoea, gastroenteritis and tummy upsets
- ♥ Protection against chest infections and wheezing
- ♥ Lower risk of diabetes
- ♥ Increased mental development
- ♥ Better mouth formation and straighter teeth
- ♥ Always ready, clean and at the right temperature
- ♥ Less likely to have allergies

## ***GOOD FOR MOTHER BECAUSE***

- ♥ Lower risk of pre-menopausal breast cancer
- ♥ Lower risk of ovarian cancer
- ♥ No cost, always with you
- ♥ Very portable
- ♥ Reduced risk of postnatal depression

## ***THE FIRST BREASTFEED***

Offer your breast to your baby as soon as possible after birth (ideally within 1 hour). Try skin-to-skin contact from birth until after the first breastfeed. This helps with bonding, keep your baby warmer and will enable your baby to feed sooner.

## **Baby/ Cue led feeding (Demand Breast Feeding)**

- Breastfeeding on demand means there should be no restrictions on how long or how often your baby is fed.  
Breastfeed baby when baby shows cues for wanting to feed
- Night feeds are essential to successful breastfeeding. We encourage you to room in with your baby day and night, so you do not miss feeding cues and for safety reasons.
- Initially babies commonly wake more at night to feed and sleep more during the day. Ensure you rest when baby is sleeping.

## **First Breastmilk (Colostrum)**

The amount of colostrum you provide in the first few days is enough for your baby, to fill his/her small walnut sized tummy. Colostrum is easily digested and passes through the tummy quickly. A baby will get between 5mls to 125mls (1 tsp to ½ cup) of colostrum. In a day, on average a baby gets approximately 35mls.

## **How often do I feed?**

Your baby needs to breast feed frequently. About 8-12 feeds in a 24-hour period. When your breasts are full of milk let your baby suck on one breast until baby lets go. Offer the other breast. Sometimes baby will be satisfied with one side; other times it will need both. Some babies want a long feed and some have several short feeds.

## **What if my baby is not breastfeeding well?**

Some babies for various reasons do not attach and suck at the breast soon after birth. If your baby is full term and healthy then provided your baby is offered the breast 3-4 hourly your baby will come to no harm. A feeding plan will be made with you and staff will support and assist you. You may need to hand express and you will be shown how to do this. If you are having feeding problems try SKIN TO SKIN WHEN attempting to feed.

If your baby is in **SCBU (Special Care Baby Unit)** and unable to breastfeed you will be shown how to express and store your milk. **You need to express 6-8 times a day**

## How to Attach Baby



- ♥ Sit in a comfortable position upright in a chair with good support for your back & legs
- ♥ Hold baby around neck and shoulders (not on head) allowing baby's head to tilt slightly backwards
- ♥ Turn baby's body towards your chest (baby's tummy against your tummy)



- ♥ Line baby's nose up with your nipple by tilting head slightly backward (aim nipple towards the roof of baby's mouth). Chin touching your breast, brush the underside of the breast/areola and nipple against baby's lower lip.
- ♥ Wait for a wide open mouth (yawn like)



- ♥ Bring baby to breast swiftly wait a few sucks until attachment gets established. You should feel a strong pain free sucking
- ♥ Check that baby's cheeks are round during sucking, lips flanged (fish lips)



- ♥ Listen for swallowing  
Check your nipple shape after your baby has come off the breast. It should be rounded rather than pinched

- **Don't hesitate to ask for help**

## Different Positions for Breastfeeding



## Baby's Feeding Cues

Learn to recognise and respond to your baby's early feeding cues. Crying is the last cue and often means,

**“YOU HAVE MISSED MY FEEDING CUES  
AND NOW I AM TOO AGITATED TO FEED.  
SETTLE ME FIRST!”**

### **“I’m nearly ready”**

- *Breathing becomes more rapid*
- *A light sleep state*
- *Licking the lips*
- **A GOOD TIME TO GET READY TO FEED BABY**

### **“I’m ready now”**

- *Rooting reflex – searching with mouth*
- *Mouth to hand*
- *Sucking fist, blankets etc*
- **FEED BABY**

### **“Too late”**

- *Crying*
- **SETTLE BABY FIRST, THEN FEED**

## **Be Sure Baby is Positioned Correctly at the Breast**

Baby's mouth should be wide with lips flanged out on your areola (dark area surrounding your nipple). If baby is well attached you will hear swallows and see baby sucking in long drawing sucks. Please make sure you ask staff to check baby is attached correctly.

## **Sore Nipples**

Nipples are often sore in the first few days when baby initially attaches. If pain does not settle after 10-12 sucks then take baby off by sliding your finger down your breast and into the corner of baby's mouth, **between gums**, breaking suction. Ask staff to observe positioning and attachment.

If you see the following:

- ❖ A pinched nipple
- ❖ White nipples
- ❖ Blisters
- ❖ Cracks
- ❖ Bleeding nipples

**Ask for help. Further damage can be avoided by altering  
position or improved attachment of your baby.**

## **Full breasts**

About 3-4 days after the birth your breasts may become full and hard. This is normal as your milk comes in.

If can be difficult to attach your baby to the breast due to your fullness. It is very important at this stage to ensure your baby is attaching correctly.

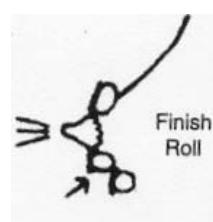
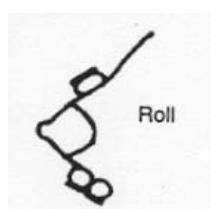
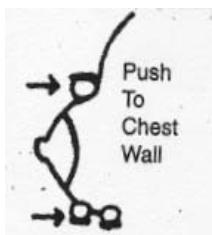
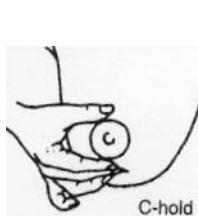
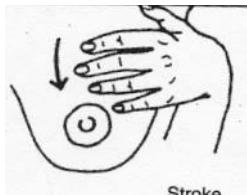
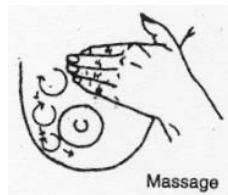
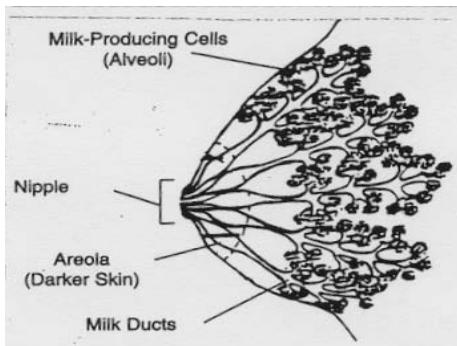
### **TRY**

- A warm shower and expressing a small amount of milk before feeding the baby
- Placing a warm face cloth on the breast before you feed and hand expressing a little milk to soften areola.
- Gently massage away lumpy areas
- Feed frequently and try different positions

The full feeling will improve over the next few days.  
If you notice a reddened area on your breast or if you feel unwell contact your midwife as soon as possible

## **Hand Expressing Breast Milk**

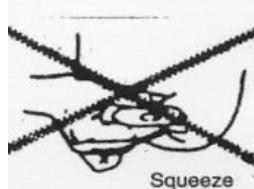
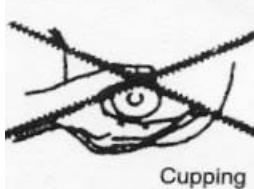
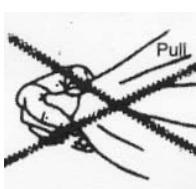
- ★ Wash hands well
- ★ Be comfortable – (express beside baby or have a photo by your side)
- ★ Gently massage the breast in a circular pattern for a few minutes, using the flat of your hand. Then stroke breasts downwards to nipple
- ★ Put first finger and thumb on either side of the areola. Forming the letter C
- ★ Push straight back into chest wall
- ★ Roll thumb and fingers forward as if making thumb and fingerprints at the same time
- ★ Repeat rhythmically to drain the ducts– position, push and roll repeat
- ★ Rotate the thumb and finger position to milk the other ducts
- ★ Collect milk into sterile syringe or cup
- ★ The entire process should take 20-30 minutes. You need to hand express for the first 48 hours if baby not feeding.



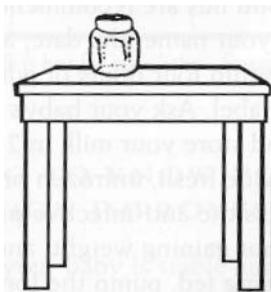
Right Hand



Left Hand

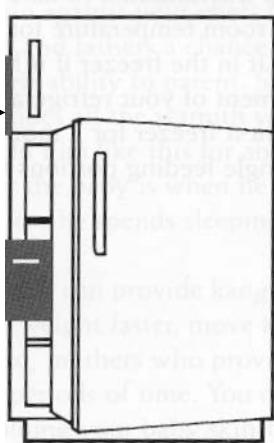


## Storage of Breast Milk

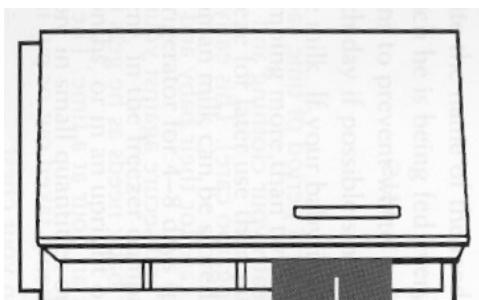


Up to 4 hours at room temperature

4 months in fridge freezer



2 days in fridge (fresh) →  
THEN FREEZE



4 months in chest freezer

**Do not store breastmilk in freezer door**

## Thawing Breastmilk

Human milk	Room temperature (25° or less)	Fridge (4° c)	Freezer (-20°c)
Fresh	4 hours	2 days	4 months
Thawed in fridge	4 hours	24 hours	Do not reheat or refreeze
Thawed in pan of warm water	Use right away		Do not reheat or refreeze

**Always freeze expressed breastmilk in plastic containers. If using stored or frozen breastmilk use the  freshest milk first (in other words – (the milk you most recently expressed.)**

# DAYS ONE TO SEVEN AND WHAT TO EXPECT

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
<b>Good attachment and positioning, confident</b>							
<b>Hear baby swallowing</b>							
<b>Nipples tender L,R</b>							
<b>How many feeds over 24 hours</b>							
<b>Hand expressing applying breast milk before and after feeds</b>							
<b>Breasts filling</b>							
<b>Wet nappies</b>							
<b>Dirty nappies</b>							
<b>Baby Settling</b>							

**Fill in days 1 – 7 so staff and your midwives can assist you with any problems and questions you need answered**

## COMMENTS

## **Growth spurts**

At different stages in baby's growth he/she needs more milk, usually at around:

- 7 – 8 days
- 6 weeks
- 3 months
- 5 months

Your baby knows what to do to increase the supply and will feed more frequently sometimes

1-2 hourly for a few days to increase the amount of milk. Trust baby as long as they have a **good wet nappy every 3 – 4 hours then just feed as demanded.**

Between 4 – 8 weeks of age your baby may cry for prolonged periods. Research shows us that this is the period of time when baby's cry more than at any other time of life. Your baby cannot be entertained easily – cannot read books yet, nor play with toys! But also does not want to just eat and sleep, so is unsettled.

Unfortunately mothers often think it is because their baby is not getting enough milk. This period coincides with a decrease in breast size, which is normal at this time. Enjoy your baby and remember if you have good wet nappies every 3-4 hours then baby is getting enough. Enjoy your baby, by 12 weeks things begin to settle.

## **BREASTFEEDING SUPPORT**

- Your Lead Maternity Carer (LMC)
- Plunket 09 4382508
- Plunket Family Centre – 33 King Street Kensington, Whangarei 09 4371907
- \* La Leche League – Kaye 09 4377444
  - Madeleine 09 4372307
- Health Hotline – 0800 933 922
- **Breastfeeding Clinic – Breastfeeding support.** Te Puawai Ora – Ph/text Cell - 021679837 or 09 4304100 ask for cell phone

**Tuesday** 10 AM TILL 2 PM

**Thursday** 10AM TILL 2PM – Keay Street off Maunu Rd. All welcome

- **Plunket Breastfeeding Support**

**Monday – Wednesday- Friday** 0900-1530  
Phone – 4371907 for appointment

**WWW.BREASTFEEDING.COM**

**WWW.BREASTFEEDINGONLINE.COM**

**WWW.DRJACKNEWMAN.COM**

## **BREASTFEEDING CLINIC AVAILABLE**

**TE PUAWAI ORA  
3 KEAY ST WHANGAREI**

**TUESDAY 10AM TIL 2PM (HELEN)  
THURSDAY 10AM TIL 2PM (ANGE)**

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**TEPUAWAITANGA O OTANGAREI  
175 WILLIAM JONES DRIVE**

**WEDNESDAY 10:00AM TIL 1200 (MARY)  
PHONE/TEXT 0212721062**

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**Compiled by: Helen Parker IBCLC**

**Whangarei Hospital**

**Maternity Services**

**Ph: 09 4304100 Ask to be put through  
to Helen Parkers/Ange Yendells cell  
phone or text or phone direct**

**021679837**

Review date – March 2011.

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