Breastfeeding Guide

HOW TO GET OFF TO A GREAT START

Breastfeeding Guide - How to Get Off to a Great Start

Everyone needs good nutrition. But it is even more important for babies and children because they need good nutrition in order to grow and develop.

Your breastmilk is more than nutrition. It also protects your baby. Your breastmilk helps keep your baby from getting sick. And it lowers your baby's risk of asthma, allergies, and sudden infant death syndrome (SIDS).

Your breastmilk protects your child for a long time, long after you stop breastfeeding. For example, it lowers your baby's risk of being overweight later in life. And it lowers his risk for adult diabetes and some types of cancer.

Breastfeeding is good for you, too. It lowers your risk of breast cancer, ovarian cancer and diabetes. And it burns about 600 calories a day, making it easier to lose some of the weight you gained while you were pregnant. Breastfeeding also helps in other ways. It helps your baby's brain develop. It creates a close bond between you and your baby. It saves money in formula and health care costs and cuts down on the days you miss from work. And breastmilk is a natural resource, so it helps our planet.

By breastfeeding, you are doing something that is good for your health and your baby's health - for life.

Congratulations for breastfeeding!

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Your body is built for breastfeeding

During pregnancy, your body gets ready to breastfeed. In the fourth month of pregnancy, your breasts start making colostrum, the first milk for your baby. Colostrum can be yellow or clear. The colostrum that you feed your baby during the first few days after birth will boost his immune system and help him poop. This lowers his chance of jaundice, a condition where the baby's skin and eyes turn yellow.

Your newborn baby has a tiny stomach – about the size of a small marble. On the first day, his stomach can only hold about one teaspoon of colostrum each time you feed him. Your baby's stomach and appetite will grow as he grows.

Colostrum is the only thing your baby needs the first few days after he is born.

How long should I breastfeed?

Any amount of breastfeeding is good, but the longer you breastfeed, the better. The American Academy of Pediatrics says that women should breastfeed their babies "exclusively" (feed only breastmilk to their babies) for about the first 6 months. At that point, mothers should start giving baby foods and continue to breastfeed, at least until the baby is 12 months old. Experts say that women should keep breastfeeding after one year as long as the mom and the baby both want to.

Tips for getting breastfeeding off to a good start

These steps can help you breastfeed. Let your nurse know that you want to follow these steps.

1. Breastfeed within the first hour after birth, even if you had a caesarean (or c-section) birth.
2. Feed only breastmilk to your baby. Ask for a breast pump if your baby is not feeding from your breast.
3. Hold your baby "skin-to-skin" as much as you can. This means that your baby's skin is touching your skin.
4. Keep your baby in your room, day and night, except for special procedures.
5. Do not give a pacifier or bottle to your baby.

Your baby's first hour

When your baby is born, he should be placed on your bare chest. This skin-to-skin contact will comfort your baby after the delivery. The staff can do most things they need to do while you are holding your baby. Your baby will start to look for your breast and nipple. His head will bob up and down as he crawls to your breast. It may take some time, but your baby will attach to your breast when he is ready. It is truly amazing to watch your baby find your breast and start feeding.

If he does not show interest in the first hour, place his cheek on top of one of your breasts so he can feel, smell and taste your nipple. If he still does not show interest in eating, ask for help. Your baby should breastfeed within the first hour or so after birth.

Hand expression of colostrum

Some babies are extra sleepy in the first few days or need more time to practice breastfeeding. If your baby will not feed from your breast, you may need to remove your breastmilk by hand. This is called "hand expression." Hand expression of colostrum is better than pumping because colostrum can stick to pump parts, so you might not collect as much of it.

To hand express:

1. Wash your hands.
2. Use a clean container with a wide opening or a spoon to collect your colostrum.
3. Hold the container near your nipple. With your other hand, place your fingers and thumb in line with your nipple and about one to two inches away from your nipple.
   - Press your finger and thumb toward your ribs.
   - Squeeze gently and catch your milk in the cup.
   - Relax your hand.
   - Repeat the process. Press in, squeeze gently, relax, and repeat.
4. It may take a few minutes before you see any colostrum. Your baby only needs about one teaspoon each time you feed him.
5. Ask a nurse or lactation consultant to help you express and feed your colostrum to your baby.

Once you are in your room

- **Ask to keep your baby in your room at all times – day and night.**
- **Feed only breastmilk to your baby. Do not give bottles or pacifiers.**
- **Hold your baby skin-to-skin as much as possible.**

Babies love skin-to-skin contact. Once you are in your room, dress your baby in just a diaper, cap, and socks and hold her against your bare chest. Cover her back with a blanket. Tuck the ends of the blanket behind your own back to keep her snuggled up close to you. You can also put a blanket around your shoulders, too. Skin-to-skin contact with dad is also a great way for dads to bond with their babies.

Holding babies skin-to-skin helps them:

- Breastfeed better
- Cry less
- Recover from the delivery more quickly

How do I hold my baby for breastfeeding?

There are many positions you can use. Try different positions to find what works best for you.

Laid Back Hold

- Lay back and use pillows for support and comfort.
- Place your baby face down between your breasts.
- Let your baby search, crawl up, nuzzle, and attach to your breast. Help your baby in whatever way feels natural.
- Place a blanket across your baby's back, if needed.

Cross-Cradle Hold

- Place a pillow in your lap to bring your baby up to breast level. Put your baby on the pillow, tummy to tummy with you, with the baby's nose across from your nipple.
- Support your baby's head by holding your hand at the base of his skull.
- Lift your breast to bring your nipple up to your baby's nose. To lift your breast, lean back and place your fingers below your breast near your ribs, keeping your hand far away from the nipple.
- Once your baby is latched on, you can let go of your breast and bring your arm around your baby into a regular cradle-hold. If your breast are large, you may need to support your breast the whole time.

Clutch (Football) Hold

- Place a pillow at your side.
- Put your baby on the pillow with his legs under your arm.
- Slide your arm under your baby's back. Support the base of his head and neck with your hand.

Side-Lying Hold

- Lie on your side with knees bent. Place pillows between your knees, under your head and neck, and behind your back, if needed.
- Put your baby on his side, facing your nipple.
- Support your baby by placing your arm, a pillow, or a rolled-up blanket behind him.

How do I attach my baby to my breast?

If you are using the laid back position, allow your baby to latch on when he is ready. If you are using a different position, you will control the attachment more than your baby.

Follow these tips

1. Hold your baby so that his nose is in line with your nipple. Touch your baby's nose and upper lip with your nipple.

2. Wait until his mouth opens very wide.

3. Quickly bring the baby onto your nipple and breast so that his chin touches your breast first and he gets a large mouthful of nipple and breast.

4. If you feel painful tugging or pinching, slide your finger into the corner of his mouth to break the suction and try again. It may take a few tries to get a good, comfortable latch.

You can tell your baby is attached well if:

- You are not feeling sharp pain. Gentle tugging is normal.
- Both of your baby's lips are flipped out, not pulled in.
- More of the bottom of your areola (the dark area around nipple) is in the baby's mouth than the top.
- His chin is buried in your breast with his nose tipped away slightly or lightly touching.
- His mouth is as wide open as a yawn.

After the first two days, you may also:

- Hear your baby swallow; or
- See milk leaking from your baby's mouth or your other breast.

Your nipple should look the same coming out of your baby's mouth as it did going in. If your nipple looks pinched when it first comes out of your baby's mouth, your baby is not attaching well. About half of all babies don't attach well on the first day. Ask for help right away and be patient. It may take a few days for you and your baby to learn the art of breastfeeding.

How often should I feed my baby?

Your baby is ready to feed any time he shows **early signs of hunger**, which are:

- Eye movements under eyelids
- Sucking motions while sleeping
- Restless body movements while sleeping
- Bringing hands toward mouth

Don't wait until he is fussy or crying. That makes it harder to breastfeed.

If someone offers to take your baby to the nursery so you can rest, tell them you would like to keep your baby in your room. Room-sharing protects you and your baby from infection, and helps you both sleep better. Also, you will get more skin-to-skin contact with your baby, and you will learn your baby's hunger cues faster.

How do I tell if my baby is full?

Your baby will signal when he is full when he:

- Lets go of your breast and nipple
- Falls asleep and stops sucking
- Relaxes his hands and body.

If your baby comes off the breast relaxed and sleepy he has probably had a good feeding. If he stops sucking and does not come off the breast on his own, slide your finger into the corner of his mouth to break the suction. Burp him and offer the other breast. He may nurse again right away or he may take the other side in a few minutes or a few hours.

If your baby comes off the breast crying, he may not be getting a good latch. Ask for help right away.

Sleepy babies

Sleepy babies are not good at showing signs that they are hungry.

Try waking your baby first with a variety of motions and sounds, such as different positions, using different words and sounds, and touching different parts of his body. Then get ready to feed.

- Place your baby in skin-to-skin contact and gently rub his back, arms, hands, and feet.
- Talk to him in a calming voice.
- When he begins to move more or opens his eyes, move him to your breast to feed.
- When he stops sucking, gently squeeze and massage your breast. Move your hand to a different area of your breast to massage and squeeze every time your baby stops sucking.

Most sleepy babies will get better at showing hunger cues in a few days. It may take 10 to 15 minutes to wake a sleepy baby.

Sleepy babies should:

- be encouraged to nurse at least 8 times a day or every 1–3 hours during the day, and
- have no more than one four-hour sleep period in 24 hours.

How do I tell if my baby is getting enough to eat?

Weight gain is the best way to tell if your baby is getting enough to eat. Tracking how many wet and poopy diapers your baby has can also be helpful.

Your baby may have some pale yellow, pink or red wet diapers and some black, brown or greenish poopy diapers in the first two to three days.

Baby's Average Diaper Output in the First 4 Weeks

Day	Wet Diapers	Urine Color	Poopy Diapers	Poop Color
1	Number will vary	Yellow/Pink/Red	Number will vary	Black
2	Number will vary	Yellow/Pink/Red	Number will vary	Blackish/Green
3	3 or more	Yellow/Pink/Red	3 or more	Greenish/Yellow
4	4 or more	Clear/Pale Yellow	3 or more	Greenish/Yellow, Seedy
5 to 28	6 or more	Clear/Pale Yellow	3 or more	Yellow, Seedy

Your baby's poop can look watery and seedy and at other times it will look more like cottage cheese. By day six, many breastfed babies will poop in almost every diaper. At least three or four of those diapers should have a large amount of poop - about the size of a golf ball, but soft and spread out. After 4-6 weeks, a baby may only poop a few times a week.

Day 1

Day 3-4

Day 5

Newborns often lose weight in the first couple days of life. Your baby should regain his birth weight by day 10-14. After he regains his birth weight, he should gain about 4 to 8 ounces a week. Be sure to see your baby's health care provider within 3-5 days of hospital discharge to make sure your baby is gaining weight. Use the **First Week Daily Breastfeeding Log** on page 11 of this book to track your baby's diapers. When your baby is four days old, complete the **How do I know if breastfeeding is going well** survey, on page 12.

My breasts feel too full. Do I have too much milk?

When your baby is 2 to 5 days old, your milk supply will increase and your breasts will feel heavier. Nurse your baby often to keep your breasts from becoming too full.

If your breasts get too full, take a short, warm shower or put a warm, wet towel over your breasts and nipples for a minute or two and hand express a little milk before each feeding. Gently massage your breasts toward your nipples while your baby is breastfeeding. Cold packs can be used for up to 20 minutes between feedings if the fullness becomes uncomfortable.

If your breasts become so full that you have trouble hand expressing, try the softening method found at http://www.breastmilkcounts.com/educational-activities.html.

Do I have too little milk?

Many babies will nurse very often at one time of the day. Many babies do this in the evening. This is normal. The more often you nurse your baby, the more milk you will make. Breastfeed often and do not give your baby formula. Exclusive breastfeeding for the first few weeks is very important for building a good milk supply.

Sometime between your baby's first and third week of life, he may want to nurse more often. About this same time your breasts will naturally soften and feel less full. This does not mean you don't have enough milk. It means your baby is having his first growth spurt and your milk supply is changing to meet your baby's needs.

Try not to give your baby formula. Instead, set up a little area or "nest" by gathering plenty of supplies around you such as snacks, drinks, phone, remote controls, books, and magazines. Try to spend as much time as you can in your "nest" with your baby so you can get to know and enjoy your baby. Relax and nurse as often as your baby wants.

Growth spurts usually happen around these times.

- 1 to 3 weeks of age
- 6 weeks of age
- 3 months of age

First Week Daily Breastfeeding Log

Baby's Name:	Baby's Birth Date:	Birth Time:	Birthweight:

- Fill in the start time and day of week in each box. The start time should be the time your baby was born and should be the same for each day.
- The day of week should change each day.
- Circle a B each time your baby breastfeeds.
- Circle a W each time your baby has a wet diaper.
- Circle an S each time your baby has a soiled or dirty diaper.
- Circle the plus sign if your baby has more than the daily goal for wet and soiled diapers.

Day 1 (1st 24 hours)

Start Time:	Day of Week:													Goal
Breastfeedings	B	B	B	B	B	B	B	B	B	B	B	B	+	6 +
Wet diapers	(pale yellow/pink/red)													Any
Soiled diapers	(black tarry)													Any

Day 2 (2nd 24 hours)

Start Time:	Day of Week:													Goal
Breastfeedings	B	B	B	B	B	B	B	B	B	B	B	B	+	8-12 +
Wet diapers	(pale yellow/pink/red)													Any
Soiled diapers	(black tarry)													Any

Day 3 (3rd 24 hours)

Start Time:	Day of Week:													Goal
Breastfeedings	B	B	B	B	B	B	B	B	B	B	B	B	+	8-12 +
Wet diapers	W	W	W	+	(pale yellow/pink/red)									3-5 +
Soiled diapers	S	S	S	+	(greenish)									3-5 +

Day 4 (4th 24 hours)

Start Time:	Day of Week:													Goal
Breastfeedings	B	B	B	B	B	B	B	B	B	B	B	B	+	8-12 +
Wet diapers	W	W	W	W	+	(clear/pale yellow)								3-5+
Soiled diapers	S	S	S	S	+	(greenish to yellow)								3-4+

Day 5 (5th 24 hours)

Start Time:	Day of Week:													Goal
Breastfeedings	B	B	B	B	B	B	B	B	B	B	B	B	+	8-12 +
Wet diapers	W	W	W	W	W	+	(clear/pale yellow)							4-6+
Soiled diapers	S	S	S	S	+	(yellow, seedy)								3-4+

Day 6-28

Start Time:	Day of Week:													Goal
Breastfeedings	B	B	B	B	B	B	B	B	B	B	B	B	+	8-12 +
Wet diapers	W	W	W	W	W	W	+	(clear/pale yellow)						4-6+
Soiled diapers	S	S	S	S	+	(yellow, seedy)								3-4+

Let your baby breastfeed until he ends the feeding. Burp him and offer the other side each time. He may fill up on one breast but you should always offer the other to be sure. You CAN'T nurse too often. You CAN nurse too little.

A breastfed baby's poop is normally loose and unformed and will change colors in the first several days. It should be yellow by day four. It may appear seedy to cottage cheesy.

Your baby is probably getting enough to eat in his first week if he is meeting the goals for the number of daily breastfeedings and wet and dirty diapers and regains his birth weight by day 10-14. Some babies will go for days without a poop and this is normal too.

If you have question about how to use this log, please call your WIC breastfeeding counselor. If your baby is not meeting the goals, call your doctor and your WIC breastfeeding counselor.

Take this log to your baby's doctor at his first office visit which should be at 3-5 days of age.

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TEXAS WIC Smart Choices • Healthy Families

How do I know if breastfeeding is going well?

The following questions will help you know whether you and your baby are off to a good start with breastfeeding.

Answer these questions when your baby is 4 days old.

Do you feel breastfeeding is going well?	❑ Yes	❑ No
Are your baby's swallows easier to hear since his first days in the hospital?	❑ Yes	❑ No
Is your baby able to latch on to your breasts without causing you discomfort?	❑ Yes	❑ No
Does your baby let you know when he/she is hungry?	❑ Yes	❑ No
Is your baby alert and active? (Answer no if you have to wake your baby for most feedings.)	❑ Yes	❑ No
Does your baby end each feeding by coming off your breast on his own?	❑ Yes	❑ No
Does your baby seem calm and satisfied after feedings?	❑ Yes	❑ No
Do your breasts feel full before feedings?	❑ Yes	❑ No
Do you have any sore, tender areas in your breast that are firm and red?	❑ No	❑ Yes
Does your baby nurse at least 8-12 times a day?	❑ Yes	❑ No
Is your baby waking at least one time during the night to breastfeed?	❑ Yes	❑ No
Are your nipples sore or do they look pinched when your baby comes off your breast?	❑ No	❑ Yes
Is your baby having bowel movements that are soft and mustard-yellow?	❑ Yes	❑ No
Is your baby having 3 or more poopy diapers each day that are larger than the size of a quarter?	❑ Yes	❑ No
When you notice a wet diaper, it is clear to pale yellow? (Pink to red wet diapers after day four can be a sign of dehydration.)	❑ Yes	❑ No
Is your baby having at least 3-5 wet diapers in 24 hours?	❑ Yes	❑ No

If you only checked answers in the left column, you are doing well!

If you checked any answers in the right column, call your WIC breastfeeding counselor right away.

Call your WIC breastfeeding counselor any time you have any questions or concerns about breastfeeding.

BREASTMILK
EVERY OUNCE COUNTS

Adapted from The Breastfeeding Resource Center, Mercy Health Center, Oklahoma City, OK and The Lactation Program, Presbyterian/St. Luke's Medical Center, Denver, CO

How do I know when to call the doctor?

You should call your baby's doctor if he:

- Does not regain his birth weight by 2 weeks of age.
- Has fewer than six wet diapers a day by day six.
- Has fewer than three poops a day by day three.
- Still has black poop on day four.
- Will not wake up to nurse at least eight times a day.
- Falls asleep or stops nursing right after attaching to your breast.

How do I take care of myself?

Forget about housework and try to sleep when your baby sleeps. When you are tired, lie down for feedings. Have snacks and drinks beside you each time you sit down to nurse. Keep meals simple — like a sandwich, soup, and fruit. Limit drinks with caffeine to no more than three a day. Most medicines are safe to take when you are breastfeeding but check with your doctor to make sure. Or call the Infant Risk Center at 1-806-352-2519.

Many women have mildly sore nipples the first few days of breastfeeding. If the discomfort only happens at the beginning of feedings and goes away when your milk starts to flow or within 30 seconds, this is probably normal. To soothe sore nipples, rub breastmilk into them or use a lanolin cream that is made for breastfeeding mothers.

If the soreness lasts the entire feeding or is severe, see a breastfeeding counselor right away. If you have soreness at the beginning of feeding only and it does not go away within two weeks, see a breastfeeding counselor. Call your local WIC clinic for breastfeeding help. Most likely, you are sore because of the way the baby is positioned or the way the baby is latching on. The soreness should go away after someone helps you figure out the cause.

Hang in there. Breastfeeding gets easier. Take it one day at a time and be proud of what you are doing for your baby. You are giving your baby the best possible start in life.

BREASTFEEDING HELP AND INFORMATION

Would you like to talk to someone about breastfeeding?

Most WIC clinics have breastfeeding Peer Counselors who can help with basic breastfeeding issues and International Board Certified Lactation Consultants to help with more difficult problems. Peer Counselors are WIC moms just like you who have breastfed their own children. WIC trains them to help other moms. Call your WIC clinic to speak to a breastfeeding Peer Counselor.

Visit the Lactation Care Center, the Lactation Foundation or Mom's Place on Facebook to ask a question or call to talk to a Lactation Consultant.

Mom's Place, Austin - 1-800-514-6667

The Lactation Foundation, Houston - 1-877-550-5008

The Lactation Care Center, Dallas – 1-855-550-6667

Join an online mom-to-mom breastfeeding group.

http://forums.llli.org/

http://www.breastfeeding.com/forums/

http://messageboards.ivillage.com/ivpsbreastfeed?ice=ivl,searchmb

http://forum.kellymom.net/

For more breastfeeding information, visit www.breastmilkcounts.com.

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