



## **Breastfeeding**

### **Why is breastfeeding good for my baby?**

There are many reasons why breastfeeding is best for your baby:

- The colostrum, a yellow, watery pre-milk that your breasts make for the first few days after birth, helps your newborn's digestive system grow and function.
- Breast milk has antibodies that help your baby's immune system fight off sickness. Babies who are breastfed also have a lower risk of asthma, obesity, allergies, and colic.
- Babies who are breastfed have less gas, fewer feeding problems, and often less constipation than those given formulas.
- Breastfed babies have a lower risk of sudden infant death syndrome (SIDS)

### **Why is breastfeeding good for me?**

Breastfeeding provides the following benefits for mothers:

- It is convenient—the baby's food is always available and at the right temperature.
- Breastfeeding releases the hormone oxytocin, which makes the uterus contract and helps it return to its normal size more quickly. It also reduces vaginal bleeding after delivery.
- It may decrease your risk of some forms of cancer and other illnesses.

### **When does my body begin to produce milk?**

During pregnancy, your nipples may start to leak colostrum. After birth, your body sends a signal to your breasts to start making milk. Within a few days, colostrum is replaced by milk. When your baby suckles at your breasts, the nerves in your nipples send a message to your brain to release hormones that tell the ducts in your breasts to "let down" milk so that it flows through your nipples, known as the "let-down reflex". It first occurs a few days after delivery.

### **How do I begin breastfeeding?**

Most babies are born with the instincts they need to nurse. Within an hour after birth, most babies will exhibit the rooting reflex: to turn toward the nipple, open his or her mouth, and suck.

- Place your baby skin-to-skin immediately after birth and as often as possible during the first days of life. This helps your baby adjust to life outside of your body.
- Your baby's initial alertness and eagerness is followed by an increasingly deeper sleep. At roughly 24 hours of life, your baby will be more awake and interested in nursing.
- Research shows that the critical days for breastfeeding success are the first six to seven days after delivery, and later near the baby's sixth week.
- It is important to get the help you need during these times. Fatigue may play a large role in any doubts about continuing breastfeeding. Your baby may nurse several times close together (cluster feedings) and sleep several hours without nursing.
- Healthy, full-term newborns may breastfeed every hour or several times in one hour



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- When you and your baby are ready to begin nursing, find a good position. Cup your breast in your hand and stroke your baby's lower lip with your nipple. The baby will open his or her mouth wide (like a yawn). Quickly center your nipple in the baby's mouth, making sure the tongue is down, and pull the baby close to you. Bring your baby to your breast— not your breast to your baby. If the baby is not latched on well, start over.

### Latching on

If latches-on only to your nipple and not the areola, problems may develop, such as sore nipples and a poor milk supply for your baby.

You may have to repeat these steps several times before your baby latches-on correctly

- Sit tummy-to-tummy with your baby. Make sure your baby's ear, shoulder and hip are in a straight line and the baby's nose is level with the nipple.
- Bring your baby close to your breast.
- Touch your nipple to your baby's lips.
- When your baby's mouth opens wide, quickly pull your baby in to latch-on since the mouth will be open for only a few seconds. **NOTE:** *Bring your baby to your breast, rather than bringing your breast to your baby's mouth.*

Your baby will be able to breathe even though his/her nose may press into your breast. It is helpful in the first week to continue to support the weight of your breast throughout the nursing session. Support your baby's head at the base of the neck as well.

Look for the following after your baby is latched-on:

- Your baby's mouth should be about one inch from the tip of your nipple around the areola.
- Your baby's lips should be turned outward against the breast.
- The motion of the suck is along the jaw, not in the cheeks.
- Your baby's ears, shoulder and hip should be in a straight line.
- Breastfeeding should not hurt. You should feel a strong rhythmic tug on your breast. A little bit of nipple tenderness within the first minute is normal during the learning period. However, sore, reddened, bleeding or cracked nipples are not normal.

### Burp your baby

Not every breastfed baby needs to burp with every feeding. Generally, breastfed babies do not swallow as much air as bottle fed babies do. If your baby has been crying before the feeding, and is pulling on and off the breast, try burping then try breastfeeding again. Some babies do not burp right away, and you may need to try several positions.



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### Helpful positions for burping your baby include:

- Propped up with baby's tummy against your shoulder
- Lying tummy-down across your lap
- Sitting up, leaning forward with your hand on the left side of the baby's body supporting the baby's stomach and neck

### How do I end a breastfeeding session?

To break the suction, insert a clean finger between your breast and your baby's gums. When you hear a soft pop, pull your nipple out of the baby's mouth.

### Breastfeeding after a cesarean birth

A Cesarean birth does not directly affect the breastfeeding process. However, discomfort, fatigue, and the medications used in surgery may present more of a challenge when you begin breastfeeding. Nurse your baby as soon after delivery as possible (8 to 12 times per 24 hour period). Once you begin regular feedings, your milk supply will increase.

Your partner or support person can be very valuable in helping you lift and position your baby. You may be more comfortable using the [football hold](#), [side-lying](#), or [cradle hold](#) while cushioning your abdomen with a pillow

### How long should breastfeeding sessions last?

Let your baby set his or her own nursing pattern, nursing from the first breast thoroughly, until your breast feels soft — typically about 20 minutes. Then try burping the baby. After that, offer the second breast. If your baby's still hungry, he or she will latch on. If not, simply start the next breast-feeding session with the second breast. If your baby consistently nurses on only one breast at a feeding during the first few weeks, pump the other breast to relieve pressure and protect your milk supply.

### How will I know when it is time to feed my baby?

When babies are hungry, they will nuzzle against your breast, make sucking motions, or put their hands to their mouths. Crying is a late sign of hunger. You may nurse very often (8 –12 times in 24 hours) in the baby's first weeks of life.

Some babies are happiest when they're sucking on something. Enter pacifiers — but there's a caveat. Giving your baby a pacifier too soon might interfere with breast-feeding, since sucking on a breast is different from sucking on a pacifier. The American Academy of Pediatrics recommends waiting to introduce a pacifier until breast-feeding is well established, usually three to four weeks after birth. Avoiding pacifiers shortly after birth can help protect your milk supply as well as promote healthy weight gain for your baby.



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### Healthy lifestyle changes during breastfeeding:

When you are breastfeeding, you need more food and nutrients than normal to provide fuel for milk production. Follow these guidelines:

- Eat a well-balanced diet. During breastfeeding you need about 500 calories a day more than you did before you became pregnant or about 2,500 calories a day for most women.
- Make sure you get 1,000 mg of calcium a day. Your health care provider may suggest that you keep taking a daily vitamin.
- Avoid foods that bother the baby. If your baby acts fussy or gets a rash, diarrhea, or congestion after nursing, let your baby's doctor know. This can signal a food allergy.
- Drink at least eight glasses of liquid a day.
- Rest as much as possible. If you can, sleep when the baby sleeps.
- Don't smoke. Smoking can reduce your milk supply, as well as change the taste of your milk and interfere with your baby's sleep. Secondhand smoke also is a concern. Secondhand smoke increases the risk of sudden infant death syndrome (SIDS), as well as childhood asthma, bronchitis, pneumonia and middle ear infections (otitis media).
- Be cautious with medication. Many medications are safe to take while you're breastfeeding. Still, it's best to get your health care provider's OK first.

### What birth control methods can I use while breastfeeding?

- Barrier methods such as latex condoms or a copper intrauterine device (IUD) are good options because they do not affect your milk supply. Good choices for hormonal birth control are the progestin-only pill, implants, or injections. These options rely on the hormone progestin and do not contain estrogen
- Combination birth control pills contain estrogen and progestin. Estrogen can decrease your milk supply when you begin breastfeeding. Therefore, this type of birth control pill should not be used until milk flow is steady.
- The lactation amenorrhea method (LAM) is a method of birth control that can be used for the first 6 months after birth. When an infant suckles regularly, it can prevent ovulation and menstruation. If a woman does not ovulate, she cannot become pregnant. LAM is highly effective ONLY if used correctly. For this method to work, a woman must follow certain breastfeeding guidelines.

### How do I continue breastfeeding after I return to work?

If you want to breastfeed when you go back to work, you need to have access to a breast pump.

- Talk to your employer about pumping at work. Find out if there is a clean, private place you can go to pump and a place for storage.
- Practice with the pump a few weeks before your first day back at work. Be sure the pumped milk is stored properly. Give some of the pumped milk to your baby in a bottle or cup. This will help your baby get used to drinking your milk from a cup or a bottle. Talk to your doctor or your baby's doctor about when to start trying the bottle.



## **How can I keep my breasts healthy while I am breastfeeding?**

To keep your breasts healthy and to increase the chances of breastfeeding success, try these tips:

- Learn proper nursing technique.
- Use your finger to break the suction before removing your breast from your baby's mouth.
- Gently pat your nipples dry after feedings. You also might want to expose them to air and dry heat (such as a hair-dryer on low).
- Use only cotton bra pads. Change them as soon as they get wet.
- Apply 100% pure lanolin or hydrogel dressing to your nipples after feeding.
- Do not wash your nipples with harsh soaps or use perfumed creams.
- If one nipple is tender, offer the other breast first.

## **Give it time**

If breast-feeding is tougher than you expected, try not to get discouraged. Feeding a newborn every few hours is exhausting, and it's OK to have a slow start. Just remember that the more often you breast-feed your baby, the more milk your breasts will produce — and the more natural breast-feeding is likely to feel.

If you're struggling, ask a lactation consultant or your baby's doctor for help — especially if every feeding is painful or your baby isn't gaining weight. Although your nipples might be tender for the first few weeks, breast-feeding isn't supposed to hurt. If you haven't worked with a lactation consultant, ask your baby's doctor for a referral or check with the obstetrics department at a local hospital.