

Breastfeeding

Did you know?



The Importance of Human Colostrum and Early Feedings

- Colostrum is a yellow, sticky fluid made in the body at 28 weeks gestation and is secreted during the first three to five days after your baby is born.
- It continues to be secreted in breastmilk for up to two weeks after delivery.
- It contains over 60 components, 30 of which are exclusive to human milk.
- One drop of colostrum contains approximately one million white blood cells which help to protect your baby from viruses and infections.
- Colostrum continues to offer the immunities that were available to baby via the placenta.
- Colostrum is high in protein, as well as vitamins and minerals.
- Colostrum contains high amounts of sodium, potassium, chloride and cholesterol that are thought to encourage optimal development of your baby's heart, brain and nervous system.
- The yellow color of colostrum is due to B-carotene, one of many antioxidants that are present in colostrum.
- Colostrum's natural laxative benefit encourages the passage of meconium, which reduces the risk of jaundice in babies.
- Colostrum is your baby's "first immunization!"

Why Do Newborns Eat So Frequently?

- Babies breastfeed for many reasons other than hunger. When he/she is nursing, your baby is right next to your heartbeat, breathing pattern, warmth and smell, all things that comforted him/her inside the womb.
- Sometimes babies breastfeed more often when they need to be close to mother, when they are frightened, lonely or uncomfortable.
- Sucking at the breast helps baby tolerate discomfort and releases hormones that help baby grow.
- Sometimes babies "cluster" feed, or eat more often during certain periods of the day. Holding, touching and skin-to-skin contact during breastfeeding reassures your baby that you are near and his/her world is safe.
- Milk volume increases daily in the first few days after your baby is born. As your milk becomes more abundant, your baby will naturally space feedings 1 1/2 to 3 hours apart. A baby's job in the first few days of life is to help "turn on mom's milk with frequent suckling." Remember to try and sleep when baby sleeps.

The Breastfeeding Support Group meets every Tuesday, 11 a.m.-12:30 p.m.

For more information, call **816.691.5177**.

Babies were born to be breastfed.

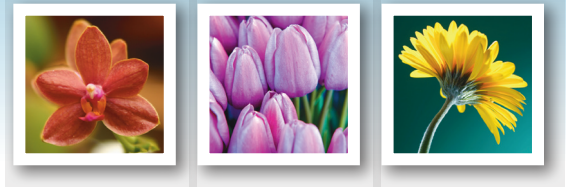
To speak with a lactation specialist, please call 816.691.5177.

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Breastfeeding

Education Overview



Times: Breastfeed on cue or at least 8-12 times in 24 hours until baby is back to birth weight. This is usually by 10-14 days of age. It is never too soon to nurse again. Breastfeeding is more than food; **skin-to-skin contact is an excellent way to comfort and awaken a sleepy baby.**

Technique: The four basic “holds” for breastfeeding are: cradle, cross-cradle, side-lying and football. Getting your breast ready to feed is done by massaging with two hands for 30 seconds to a minute. This helps get the colostrum closer to the nipple; thereby, your baby gets a quicker reward. During a feeding, doing an occasional deep compression of the breast will help your baby drink better and the gentle movement will keep him/her “on task.” When preparing your baby to latch, encourage him/her to take a large portion of the areola (dark brown area around nipple). Do not let him/her “nipple feed” as this can cause trauma and lead to poor weight gain.

Expression: Your lactation consultant or nurse will teach you how to express a few drops of colostrum/milk. Expressing before the feeding will help entice your baby. Expressing colostrum after feeding, rubbing it around and allowing nipple to air dry before pulling up your bra flaps will help heal transitional soreness, the mild pain experienced in the first week.

Nipple and Breast Care: Do not use soap or body wash on your nipples. If the soap from your hair and/or shoulders runs over your nipples, it is okay. Bra size should be about a cup larger than you wore during your pregnancy. For transitional soreness, you may use lanolin if you are not allergic to wool.

Engorgement: This is swelling of your breasts in the early days that may cause them to feel hard.

Recommended treatment is to massage breasts for 30 seconds before a feeding, feeding frequently and applying cold compresses 10 minutes after nursing. A cold compress could be a bag of frozen peas wrapped in a towel and returned to the freezer after applied. Ibuprofen can also help with swelling and discomfort.

Medications: Call your baby’s pediatrician for research-based information on any medicine during breastfeeding. Stool softeners, Motrin and pain medication ordered by your obstetrician are safe. Avoid Sudafed and decongestants during early lactation as they can reduce your milk supply.

Diet: You may have two to three caffeine servings in 24 hours, 24 ounces per day or less. You may now have deli meats and soft cheeses. Nursing requires approximately 500 extra calories per day.

Plugged Ducts/Mastitis: While massaging your breasts, you may notice a sore lump. This is usually milk trapped in the breast. While nursing, find the sore lump and massage it in a deep circle and then towards the nipple to get the milk released. If allowed to remain in the breast, it can inflame the tissues leading to mastitis (a breast infection). If the lump persists more than 24 hours or you experience symptoms of mastitis (101 degree fever, chills, red area on the breast or muscle aches like the flu), call your doctor immediately. However, you should continue to nurse.

Growth Spurts: Your baby will have days of frequent breastfeeding occurring at about seven to 10 days, 3 weeks, 6 weeks, 3 months and 6 months of age. During these brief times, just feed as often as he/she likes and your milk supply will increase to meet the demands of a growing baby. No food or formula supplements are necessary.

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