

The Art of Breastfeeding

Authors: Vinaya Gavini, M.D., F.A.A.P. & Rachel Lethorn, M.S., PA-C, ATC

Why Breastfeeding?

Breastfeeding has important advantages to both the mother and the baby. Breastfeeding can provide the best nutrients and immune support available to your child from the beginning. A statement from the American Academy of Pediatrics regarding breastfeeding:

"Human milk is the preferred feeding for all infants, including premature and sick newborns...It is recommended that breastfeeding continue for at least the first 12 months, and thereafter for as long as mutually desired."

American Academy of Pediatrics

Over half of all infants are being breastfed today, according to the National Immunization Survey conducted in 2001. The U.S. General Surgeon also recommends Breastfeeding for the first 12 months of life.

Advantages for your Child

Your breast milk has the perfect combination of nutrients for your baby, including the right amount of fat, sugar, water, proteins, hormones, enzymes and protective antibodies. Breast milk is considered a living tissue protecting your baby against allergies and diseases. Breast milk changes to suit your baby's needs. Your baby's immune system is also strengthened by breast milk. The Mother passes special cells to the baby, called white cells, which coat the baby's intestines preventing harmful bacteria entering the baby's bloodstream. Breast milk actually contains antibodies to fight bacteria, fungus and viral illnesses. Studies show breastfed babies to have a lower incidence of allergies, eczema, colic, gas, gastroenteritis, meningitis, diabetes, Crohn's disease, celiac disease, speech problems, cataracts, increased cholesterol, dental problems, childhood cancer, pulmonary disease and more. Formula fed infants are **sixteen times more prone to illness** in the first two months of life. Breastfeeding has also shown to increase IQ scores by 8 points higher than formula fed babies. Additionally, breastfeeding is clean, less expensive and convenient. Finally, breastfeeding provides important closeness and bonding which helps children to develop trust.

Advantages for the Breastfeeding Mother

Breastfeeding has multiple advantages for the baby and Mother. First there are short-term benefits. Right after birth, when the baby suckles the breast, a chemical called oxytocin is released, which causes the uterus of the mother to contract helping it to shrink in size. This chemical also helps to prevent hemorrhage or excessive bleeding. Breastfeeding burns calories, thus helping the mother get back to her pre-pregnancy weight. Also, there is a delay in the return of menstrual cycles, which helps to decrease the chance of iron deficiency anemia

and provide some contraception. Women who are bottle feeding their babies typically get their periods in six to eight weeks. However, women who are breastfeeding may not get menses until 6 months after the birth of their baby. Additionally, there are important long term benefits to breastfeeding also. The breastfeeding mother has a decreased risk of developing uterine cancer, breast cancer, ovarian cancer, heart disease and osteoporosis. An article in the New England Journal of Medicine estimates that breastfeeding for a total of 6 to 24 months in a woman's reproductive years lowers the risk of breast cancer by 11-25%. Along with these health benefits of breastfeeding are also emotional benefits. Breastfeeding provides a unique closeness of the infant and mother for bonding. The hormone prolactin, produced when breastfeeding, produces calmness in both the mother and child. Finally, there is a financial and practical benefit to breastfeeding too. The breastfeeding mother never has to mix and measure formula. Formula can be very expensive and time consuming, whereas breast milk is always available and at the right temperature.

Starting Out Right

Breastfeeding is very natural, but babies do need to be taught how to do it. Some babies seem to get the hang of it very quickly, while others need more practice. The more you know about breastfeeding, the greater likelihood of success. Reference books are always good to have on hand. The one we recommend is *The Womanly Art of Breastfeeding*. There are also support groups and classes, including the La Leche League. For information or meetings call 1-800-LALECHE. Many doctor's offices and hospitals offer classes. Each baby is different, and each nursing experience is unique.

Basic Guidelines for Getting Started

Start Early - Babies have a sucking reflex, which is instinctive and is strongest at birth. Also, babies are the most alert the first hour after birth. Your milk will not be in this early, but practice for the baby while the breast is soft and easier to grasp is important.

Feed Often – Babies will usually give cues when they are hungry, and in time you will learn your baby's cues. Newborns typically nurse 8-12 times a day. The more you nurse, the sooner your milk comes in. Newborns tend to be sleepy and you may even have to wake them up to feed. During the day you should offer the breast every 2-3 hours, and at night every 4 hours for newborns. Once they can hold more milk as they grow, they only need to breastfeed 6-8 times a day and may sleep more at night.

Feeding on Demand – Babies can nurse as long as they are interested. Some will nurse for short periods and others will nurse for longer periods. You should offer both breasts at each feeding, nursing your baby 10-15 minutes on the first side. The baby may or may not be interested in the other side. Make sure you switch

the starting side each time. You can remember which side by using a safety pin or bracelet, and changing it with each feed.

Colostrum – This is a yellow fluid that is produced during the later part of your pregnancy. This is the perfect first food for your baby, providing him with all his nutritional needs for the first couple of days; and also providing antibodies and immune factors to fight infection.

Getting the Right Supplies – Set up a comfortable place for nursing. You will spend lots of time during the first weeks nursing your baby. Make sure you have a nursing pillow so the baby is at the level of your breast. This will also help from straining your neck. A comfortable chair is important so you can relax and enjoy this special time with your baby. Also, get plenty of diapers, wipes and burp clothes or cloth diapers for the baby. When you breastfeed it is a good idea to have a bottle of water or something to drink on hand at all times for you. As a breastfeeding mother you have increased nutritional needs.

Avoid supplement feeding – Babies can become confused during the early stages of breastfeeding when artificial nipples are introduced. Also, giving formula can decrease your milk supply. It takes the baby longer to digest formula than breast milk. Thus, the baby is less likely to nurse as often as he normally would. The use of supplemental formula increases the risk of allergies in your baby.

Expect Engorgement – Your milk will come in between the second and sixth day after the baby's birth. The baby will be getting colostrum until your milk comes in. It will take about two weeks for your milk to gradually change from colostrum into mature milk. When the milk does come in, your breast will probably get engorged, swollen and hard. This can be very painful at first. The breasts become very full because of some swollen tissue and additional blood that has rushed to your breast. Some mothers only notice a small amount of engorgement, while others notice more. Warm showers and nursing the baby often will help to relieve this discomfort. Some women also find it helpful to use warm or cold compresses between feedings, as well as massaging the breasts to help relieve the hardness.

Taking care of the Breastfeeding Mother – Breastfeeding is a very rewarding and challenging experience. In order to take good care of your baby, you must take good care of yourself. Breastfeeding takes a lot of energy from the mother, so lots of rest is important. Most practitioners recommend that you sleep when your baby sleeps. Labor is also physically draining. Babies are born with extra nutrients and breastfeed the first day mostly for comfort. It is natural for a baby to become fussy on the third and fourth day, as they are hungry. Most women are sent home from the hospital by the second or third day. It is important to relax and help your baby learn how to breastfeed so you can both enjoy this experience. You may need some pain medicine, like Tylenol, to help you to get through the tough times. Additionally, a good balanced diet is important. Lactation

consultants are available in the hospital and for out patient consultation. If breastfeeding is hurting, make sure the baby is latching on properly. There are several good websites that you can visit which are listed at the end of this article.

Getting a Good Breast Pump – First, you must decide if you need a breast pump. Some mothers do fine without one. However, most women especially those who are planning to return to work need to invest in a good breast pump. Also, there are some medical conditions which require the mother to suspend from breastfeeding. These mothers can pump their milk, and give it to the baby in a bottle. The situations in which pumping usually is required are: a premature or sick baby who is unable to nurse, a mother who is going back to work, relief of engorged or overfull breasts, and/or when mother's milk supply is low and requires additional stimulation to increase her supply. There are manual and electric pumps. Working mothers will need a convenient, efficient and easy to clean pump. Most working moms prefer an electric double pump due to the speed of the process. Also, some mothers may want to have a breast pump on hand in case of emergency or even if they just want an evening without baby. The breast pump we recommend is Medela, "Pump in Style Advanced Breast Pump." Please visit our ecommerce site <http://www.breastpumpwarehouse.com> for good value and service.

What to Do with Pumped Milk – Make sure your hands and the container used to store the milk are clean. Breast milk can be safely stored for up to 24 hours at 60 degrees F (15 degrees C), just below room temperature. Milk can be refrigerated for up to 8 days. Milk can also be stored in the freezer for 3 months. If milk is frozen and thawed, it should never be refrozen for storage. You should thaw the frozen milk under running water and not on the stove or in the microwave oven, as that takes out the nutrients.

Latching On

First, position yourself and your baby correctly. You should be in a relaxed position with as many pillows as necessary to prevent from straining your muscles. If you are sitting up, make sure the baby is at the level of your nipple and not lying in your lap, so you don't have to lean forward. The baby should be on his side with his chest facing you— chest to chest. There are different positions for holding the baby. You should choose the position you are most comfortable with. Hold the baby with one arm, and with the free hand offer your breast to your baby. Your fingers will form a C around your breast, and should be behind the areola, the darkened skin of the breast around the nipple. Tickle the babies' lip with your nipple, and he should open his mouth to feed. Bring the bay to you, instead of you chasing the baby. You may have to offer the breast a few times for him to become interested. Center your nipple above the babies tongue. His mouth should be open wide because the baby needs to get a large portion of the areola and the nipple in his mouth. The babies' gums should not be on your nipple, they should be covering the areola. The baby should be pulled close

enough to you, so that the baby's chin and tip of his nose touch your breast. Look for a good sucking technique. There should be a rhythmic motion of his jaw and you should hear him swallowing the milk. If the baby latches on incorrectly, take him off and try again. Break the suction by putting your finger in the baby's mouth on the side and either push on your breast or the baby's cheek. This takes practice both for the mother and the baby. Breastfeeding should not be painful.

Holding your Baby during Breastfeeding

It is good to vary the positions of breastfeeding to decrease nipple soreness. Different positions put pressure in different angles on your breast helping to prevent soreness.

Cradle – This is the most commonly used position. The mother should be sitting in a comfortable chair, in a relaxed position. The baby should be lying on his side with his chest facing yours. The baby's head should rest on your forearm in the crook of your elbow. Your forearm supports his back, and you can hold his thigh or buttocks in your hand. Use as many pillows as necessary to hold the baby at the level of your nipple and remain comfortable.

Cross-Cradle – The baby is supported on pillows in the same set up as the traditional cradle position. However, the baby is resting on pillows and not your forearm. If you are going to feed on the right breast, your right hand supports the right breast, and the fingers of your left hand support the baby's head. You will place your thumb and index fingers behind the baby's head, so the head can rest in the web of your hand. Again, bring the baby to your breast for him to latch on. This position helps you to manipulate your breast and the baby if it is necessary.

Football Hold – A good position for babies having trouble latching on. Position your baby at your side with his head resting in your hand and his legs under your arm. Use pillows to bring the baby up to the level of your nipple. Pull the baby in to the breast, and make sure he is not kicking the back of the chair. This position gives a good view for the mother to see what is happening when the baby latches on. This is also a nice position for mothers who have had a Cesarean birth, as the baby is away from the incision.

Side Lying – A nice technique to give mom extra comfort. Mom should be lying on her side with a pillow under her head. The baby should also be lying on his side with his mouth in line with your nipple and his knees pulled close to your body. Offer your breast to the baby by supporting the breast with your hand. You can make a C with your fingers and thumb around the breast. Pull the baby in to breastfeed. This position takes some practice, but is nice for nighttime feedings.

Nipple Care – Prevention and Healing Tips

The main cause of sore nipples is improper latch on. Breastfeeding should not hurt. So it is important to work with your baby early on to prevent sore nipples. Also, let your nipples dry after feedings. If you do have a sore nipple, then try offering the other side the first few minutes of the feeding. Babies suck the most vigorous the first few minutes of each feed. Changing positions can also help with nipple soreness. Wash your breast with warm water daily, avoiding any soaps or lotions, which can dry the skin. The breast pads you use should not have any plastic lining, which prevents the breast from drying. If your breasts are engorged or very large, it may help to express your breast until the milk flows easily before the baby latches on. Rubbing a few drops of the breast milk into your nipples after each feed will help to heal sore breast, as human breast milk has healing properties due to the antibodies in it. Lanolin ointment is a good choice to treat sore nipples. This ointment retains internal moisture of the breasts while allowing the surface to dry. This is also safe to the baby, and does not need to be removed prior to the next feed.

How much do I Breastfeed?

You may breast feed your baby approximately every 2 hours. During the first month, you can breast feed your baby twice during the night. During the second month, your baby can breast feed once during the night. If your baby wants to breastfeed more often than these broad guidelines, it is acceptable as long as you are not getting overtired in the process. Babies will nurse for both nourishment and comfort. You can learn to breastfeed just about anywhere with practice. This makes breastfeeding so convenient. Also, babies do have growth spurts, and may feed more often during those times. Usually growth spurts do not last more than a few days. If your baby wants to breast feed constantly you may need to see a lactation consultant.

Is my Baby Getting Enough Milk?

There are signs that your baby is getting enough breast milk. With adequate breast feeding your baby will seem satisfied after each meal and start to gain weight after the first 3-5 days after birth. Babies tend to lose weight the first few days after birth. Babies typically regain their birth weight by 2 weeks, and double their birth weight by 5 months. Also, the baby will have 6 to 8 wet diapers per day and 2-5 or more stools per day if they are getting proper nutrition.

When Not to Breastfeed

There are a few medical problems which can prevent a mother from breastfeeding. Some of those illnesses include serious maternal cardiac or kidney disease, severe anemia or cancer. There are also some infections which can prevent a mother from breastfeeding, which include tuberculosis, HIV and AIDS. Drug abusers can pass their addiction to their babies and should obviously not breastfeed. Occasionally a mother may have to temporarily suspend breastfeeding due to an illness or infection. However, usually these mothers can pump throughout the illness to keep their milk supply at the right level, and

resume feeding when appropriate. In some instances there are medical problems in the infant that can also cause problems with nursing. However, usually the mother can pump while the medical problem is treated. Usually infants who are ill do better with breast milk because of the beneficial effects of the antibodies. Finally, certain breast surgeries can affect your breast so that it may impair your ability to breastfeed. Breast enhancement usually does not interfere with breastfeeding. However, breast reduction usually will hinder your ability to breast feed, as lactation ducts are removed.

What Medications are acceptable when Breast Feeding?

You can not breast feed while you are taking certain medications. Please contact your health care provider to get more information.

Vinaya K. Gavini, M.D., F.A.A.P.

8550 N. Silvery Lane, Suite# 101, Dearborn Hts, MI 48127 (Tel: 313-730-7002);

47601 Grand River, Suite#C200, Novi, MI 48374 (Tel: 248-348-4200).

www.yourkidsdoctor.com

References:

La Leche League International. (1997). *The Womanly Art of Breastfeeding* (6th ed.). New York: Plume-Penguin Group.

Newcomb, P. et al. *Lactation and a reduced risk of postmenopausal breast cancer*. New England Journal of Medicine 1994; 330: 81.

Why Breastfeed? (Parenting Web, 2003)

<http://www.parentingweb.com/lounge/whybf.htm>

Exclusive Breastfeeding: The Gold Standard (World Alliance for Breastfeeding Action, 2004) <http://www.waba.org.my/wbw/wbw04/wbw2004.html>

Advantages of Breastfeeding (Breastyfeeding.com, 1998)

http://www.breastfeeding.com/all_about/all_about_more.html

Why Breastfeed? Did You Ever See a Smart Cow? (Breastfeeding Basics, opened March, 2005) http://www.breastfeedingbasics.com/html/why_breastfeed.shtml

Breastfeeding Positions (Pregnancy info.net, opened March, 2005)

http://www.pregnancy-info.net/breastfeeding_positions.html

When not to Breastfeed (Pregnancy-info.net, opened, March, 2005)

http://www.pregnancy-info.net/when_not_to_breasfeed.html

Breastfeeding Benefits: How they Add Up (Breastfeeding Basics, opened March, 2005)

<http://www.breastfeedingbasics.com/html/Benefits.shtml>

Breaking the barriers to breastfeeding. Journal of American Dietetics Association 2002, 101: 1213.

Breastfeeding – Best for Baby. Best for Mom. (National Women’s Health Information, June 2004) <http://www.4woman.gov/breastfeeding/index.htm>

Breastfeeding and the Use of Human Milk (American Academy of Pediatrics, Policy Statement, Pediatrics vol. 115 no. 2, Feb 2005)

A Well-Kept Secret: Breastfeeding’s Benefits to Mother (La Leche League, New Beginnings, vol. 18 no. 4, July-August 2001, p. 124-127).
<http://www.lalecheleague.org/NB/NBJulAug01p124.html>

Breast Feeding: Hints to Help You Get Off to a Good Start (American Academy of Family Physicians, September 2004) <http://familydoctor.org/019.xml>

You Can Still Breastfeed (Janes Breastfeeding Resources, opened March, 2005)
<http://www.breastfeeding.co.uk/articles/newman21.html>

How can I tell if my Newborn baby is getting enough milk? (Breastfeeding Basics, opened March, 2005)
http://www.breastfeedingbasics.com/html/how_can_i_tell.shtml

When Breastfeeding Doesn’t Work Out (Breastfeeding Basics, opened March, 2005) http://www.breastfeedingbasics.com/html/when_breastfeeding_doesn.shtml

Establishing Your Milk Supply: Staring Out Right (Breastfeeding Basics, opened March, 2005) <http://www.breastfeedingbasics.com/html/establishing.shtml>

Breast Milk or Formula: Making the Right Choice for Your Baby (U.S. Food and Drug Administration, FDA Consumer magazine, October 1995, rev. June 1996)