



A Guide for Expectant and New Mothers

**YOU'VE
GOT
WHAT IT
TAKES**

**NURTURE YOUR
BABY WITH
BREASTFEEDING**

Why Doctors Recommend Breastfeeding

Health experts around the world agree that breast milk is best for babies. They recommend giving only breast milk for about the first six months of life and continuing breastfeeding with appropriate solids foods until the baby is at least one year old.

Nothing compares to breast milk. It is the perfect food for your baby and contains all the nutrients your baby needs to grow, develop and thrive. Breast milk is also easier to digest than formula, so breastfed babies may have fewer “fussy” periods.

Breastfeeding keeps babies healthy. Breastfeeding helps protect babies from common illnesses like ear and respiratory infections and diarrhea because of the protective substances found in breast milk. Breastfeeding also reduces the risk of SIDS. Breastfed babies are at a lower risk for several long-term problems like diabetes, certain cancers, obesity, asthma, and allergies.

Breastfeeding keeps mothers healthy. Studies have found that women who breastfeed are less likely to develop some types of breast and ovarian cancer, as well as type 2 diabetes. Many women also return to their pre-pregnancy weight and shape faster.

Breast milk is special. Unlike formula, breast milk is always changing – over time and throughout the feeding. Studies show that breastfed babies grow up to be less picky eaters because they are used to different flavors in mothers’ milk!

Breastfeeding saves money. Breast milk is free and does not require any special equipment. Health care costs may also be lower since breastfed babies generally require fewer medications and visits to the doctor.

What to Do ... Before You're Due

There is a lot you can do before your baby comes to help make your breastfeeding experience a success.

Tell your family and friends you plan to breastfeed. If they are aware of your choice, they will be better prepared to help you when the baby comes.

Take advantage of breastfeeding classes and read about breastfeeding. Learn all you can while you have the time.

Avoid free gifts from formula companies. Moms who keep samples of formula in the home tend to stop breastfeeding sooner.

Discuss your breastfeeding goals with your doctor and the pediatrician you have chosen for your baby to ensure that everyone is aware of what YOU want. Include your breastfeeding goals in your birth plan and share them with the hospital staff.

Talk to your doctor about your birth plan. Learn about how pain medication and how your baby is delivered can affect breastfeeding. Explore different options for pain relief during labor.

Collect the names and numbers of breastfeeding support resources in your community. Keep them in a handy place for when you come home from the hospital.

Learn about newborn behavior. Learn about baby cues so that you will know when your baby is ready to nurse. Find out ways to soothe a new baby, so that you will be ready when the baby arrives.



When Your Baby is Born . . .

Hold your baby skin-to-skin against your chest as soon as possible. Your baby may find her own way to the breast! Your baby will be calmed by your voice and your smell. She learns to feed by being close to you.

“Room in” with your baby in the hospital. If you are together, you can respond to her feeding cues sooner. It will also give you both special time to bond.

Feed your baby as soon as she shows you that she’s hungry. Look for increased alertness or activity, rooting motions, or mouthing of the hand or fingers. Do not wait until your baby is crying. She will be frustrated and more difficult to feed.

Know that your baby will want to nurse often. Her tummy is tiny and breast milk is easy to digest. At first, your body makes small amounts of very special milk called colostrum. It is all your baby needs for the first few days of life. Frequent feedings, day and night, help your milk increase in volume or “come in” sooner. The more milk your baby takes, the more milk your body makes!

Give your baby only breast milk. If your baby gets formula or water supplements, she may feel too full or sleepy to breastfeed. This can dramatically decrease your milk supply.

Sometimes breastfeeding can be challenging in the beginning, but finding support can help you stick with it. Most moms feel that they have gotten the hang of it after a few weeks. Make good use of the knowledge of the hospital staff and ask who you can call in your area once you get home.



First Milk ...Colostrum It's All Your Baby Needs

Colostrum is the milk you will make in the first few days after your baby is born. It is often thick and can be clear to yellowish in color. Colostrum coats your baby's insides and helps prevent allergies, viruses, and infections in your baby. Your colostrum is so protective – it's similar to giving your baby his first immunization.

You will produce very small amounts of colostrum in the first day. As your baby's stomach size increases, so does your milk supply.

Most babies go into a very deep sleep about two hours after delivery and may be hard to wake for the first 24 hours. It is important that you wake your baby to feed often – about every two to three hours.

If you are having difficulty waking your baby, practice skin-to-skin contact, which will often wake a baby.

Your Baby's Stomach Size

You'd be surprised at how small your baby's stomach is at birth. It can only hold 1 teaspoon at each feeding. As your breast milk comes in, your baby's stomach gets bigger...Perfect timing – your baby will get just the right amount of milk!

DAY 1:

About 1
teaspoon

DAY 3:

About
2 tablespoons

DAY 10:

About
2 ounces

Signs of Success

For the first month of life, your baby nurses at least 8 - 12 times every 24 hours.

When nursing, your baby's mouth is open very wide. His lips should be flipped out and he should take in most of the dark skin around the nipple, especially on the bottom. His chin should touch your breast. Holding him tummy to tummy and supporting his neck and shoulders can help keep a good latch. Try not to push or force his head to the breast.

You can see or hear your baby swallowing as he nurses.

By the end of the first week, your baby makes at least 4 soft yellow stools and wets at least 6 diapers every 24 hours. Frequent bowel movements are a good sign of milk intake in newborns, but babies may stool less often after the first month of life.

Your baby gains weight. Bring him to the doctor for a weight check about two days after he leaves the hospital. Most babies lose a little weight after birth, but should be back up to birth weight by about two weeks of age.

Keep in Mind ...

Sore nipples are usually a sign of a poor latch. Tender nipples are common when mothers and babies are learning to breastfeed, but persistent soreness after the first few days may be a sign of a problem. Frequent breastfeeding does not cause sore nipples.

If your breasts feel overly full, nurse more often. Breastfeeding your baby is the best way to relieve discomfort from fullness.

Your baby might not have a predictable feeding schedule in the early weeks. Expect her to feed in clusters, perhaps several times in a few hours with stretches of sleep in between.

If you nurse your baby in bed, do so safely. Be sure to keep the area free of pillows, quilts and fluffy comforters. Set up your baby's crib or bassinet within arm's reach of your bed and place her there for sleep.

My Breastfeeding Plan ...

EXCLUSIVE BREASTFEEDING

My goal is to exclusively breastfeed my baby. Please do not give my baby any supplements before speaking to me or my birthing partner. I need all of my baby's suckling to be at my breast in order for me to establish a good milk supply.

NO BOTTLES OR PACIFIERS

Please do not give my baby artificial nipples including pacifiers or any types of bottles with formula, water, or glucose water. If there is a medical reason for supplementation, I would first like to speak with a lactation consultant or pediatrician about trying alternate feeding methods with expressed milk.

SKIN-TO-SKIN

When my baby is born, I would like to have him/her placed on my chest, skin-to-skin with me for at least one hour. If possible, please perform routine newborn evaluations with my baby on my chest. Throughout our stay, I want to be able to hold my baby skin-to-skin as much as possible. A blanket may be placed over us, but not between us, if extra warmth is necessary.

FIRST HOUR

Please help me initiate breastfeeding within 1 hour of delivery. This means placing my baby skin-to-skin as soon as possible after birth and offering to help me begin breastfeeding when my baby seems ready (e.g., rooting, licking lips, etc.). Please do not force my baby to take the breast if he/she is not showing signs of readiness. Instead, keep my baby skin-to-skin with me until he/she is ready to try to latch.

ROUTINE EXAMS

Please examine my baby in my presence and do not take him/her away from me unless he/she requires medical treatment that cannot be done in my room.

EMERGENCY CESAREAN

If I have a cesarean, I would like to hold my baby skin-to-skin as soon as possible after the operation. If I am unable to for some time after the delivery, then please allow my partner to hold my baby skin-to-skin.

ROOMING IN

I would like to room in with my baby 24 hours a day to give my baby plenty of skin-to-skin time and so I can learn my baby's feeding cues and feed him at his first sign of hunger. If for some reason my baby and I are not in the same room, please bring him/her to me at the earliest hunger cues, such as sucking on hands, making sucking noises, rapid eye movement, or rooting.

BREASTFEEDING ASSISTANCE

Please teach me how to identify a good latch and how to correct my baby's positioning and latch if improvement is needed. Please teach me how to recognize my baby's early hunger cues and how to tell if my baby is breastfeeding well.

EXPRESSING MILK

If my baby is unable to breastfeed or is separated from me due to medical reasons, I want to be able to express my milk within 6 hours of delivery. If you think I am going to need a pump after my hospital stay, please remind me to call my WIC office or health insurance provider.

FORMULA MARKETING

Please do not give me formula or any marketing materials which promote the use of formula.

BREASTFEEDING SUPPORT AFTER DISCHARGE

I would like to receive contact information for breastfeeding support in case I need help with breastfeeding after my baby and I are at home.

Making Milk

- Feed early and often. The more milk your baby takes, the more milk your body makes.
- Breastfeed whenever your baby is hungry. Watch your baby, not the clock. Let your baby tell you when he is full rather than timing a feeding. If he is satisfied after only one breast, that is okay.
- Say “no” to pacifiers and bottles until your baby is at least 3 - 4 weeks old.
- Do not accept free samples, gifts or educational materials from formula companies.
- If you have breastfeeding questions or concerns, contact a breastfeeding specialist, WIC nutritionist or peer counselor right away rather than stop nursing or offer formula.

Have Questions? Need Advice?

Massachusetts WIC Nutrition Program

Massachusetts Breastfeeding Coalition

La Leche League

Nursing Mothers' Council

International Lactation Consultant Association

National Women's Health Information Center

ZipMilk

(800) 942-1007

www.massbreastfeeding.org

(800) LA LECHE

(617) 244-5102

www.ilca.org

(800) 994-9662

www.zipmilk.org

1-800-WIC-1007

www.mass.gov/wic



TDD/TTY: (617) 624-5992

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