

Your concise, easy-read..

Issue 15

# MOTHERS & others GUIDE

[www.mothersguide.co.uk](http://www.mothersguide.co.uk)



## Parenting and Feeding from Conception to Weaning



NICE recommends UNICEF Baby Friendly Initiative as a minimum standard for maternity providers. This booklet conforms with these standards.

See page 2 for details



## Formula Feeding

Check out; First Steps Nutrition Trust. This is an independent public health nutrition charity, which hosts information about infant milks for 0-12 month olds, how milks are made, the ingredients used, the infant milk market, infant feeding safety and other general information about infant milks. It's a 'must' site to visit as there are many leaflets to download.

[www.firststepsnutrition.org](http://www.firststepsnutrition.org);

[www.firststepsnutrition.org/infographics](http://www.firststepsnutrition.org/infographics) & [infantmilkinfo.org](http://infantmilkinfo.org)



**There is also a statement about formula preparation machines and baby kettles which it is important to read.**

### Also check out:

- UNICEF UK Baby Friendly Initiative's Guidelines on providing information for parents about the use of infant formula and formula feeding:- [www.unicef.org.uk/babyfriendly/baby-friendly-resources/bottle-feeding-resources/guide-to-bottle-feeding/](http://www.unicef.org.uk/babyfriendly/baby-friendly-resources/bottle-feeding-resources/guide-to-bottle-feeding/)

- NHS Better Health; Start for life.

- First Steps Nutrition Trust:- [www.firststepsnutrition.org](http://www.firststepsnutrition.org) and [infantmilkinfo.org](http://infantmilkinfo.org) - Infant milks: A simple guide to infant formula, follow-on formula and other infant milks, including specialist milks.



We would usually suggest that you try not to make a firm decision about how to feed your baby until your baby is in your arms after the birth, however if you want to find out more about formula milk and

feeding while you are pregnant here are some key points that you may want to consider and ask about in more detail from your health professional during your pregnancy.

## Brands of milk?

Despite the many brands on the market all formula milks have to be made to a standard composition but manufacturers are allowed to add certain variations. There is no evidence to suggest one is any better than the others.

However there is another option i.e. expressing and bottle feeding your own milk for as long as you are able to do it. Double breast pumps are available to express quickly and efficiently. The cost of buying a breast pump may still be less than you would spend on formula milk.

Any amount of breastmilk you can give your baby will be beneficial or you may consider donor milk. [www.humanmilkfoundation.org](http://www.humanmilkfoundation.org)

## Formula Milk Types?

Use newborn/first milk for the first year of life. There's no need to progress on to specific milks i.e. nungrier milk, follow on milk, toddler milks etc.

### How to make feeds and sterilise feeding equipment?

This is such an important issue and is best learned when you have had your baby. Your midwife will go through everything with you. It is now recommended just to make up one feed at a time for safety reasons. See the leaflets opposite – Ask your Midwife or Health Visitor about this for more detail.

### How do I know when my baby needs feeding?

If your baby is healthy and full term there is no need to feed by the clock. It is best to respond when your baby demonstrates feeding cues that they are hungry. (See photographs on page 17). This is called responsive feeding.

When feeding it's important to let them pace the feed allowing them to have natural pauses so they can decide when they've had enough milk. If they show signs that they are full, don't be tempted to encourage your baby to finish all the milk so they will go longer between feeds. This can lead to overfeeding and problems that may follow as a result of doing this.

### How can I develop that closeness with my baby when formula feeding?

Limit the number of people who feed your baby. It's best for mothers/partners to do this themselves. Hold your baby upright and close. Look into their eyes and talk quietly to them. Try and alternate the side you hold your baby on. By allowing your baby to use both eyes to see you during a feed, you are helping their eyes and brain to develop.

Minimise any distractions, so the focus is on them. This makes them feel loved and secure and will help your developing relationship.

## Underarm hold (rugby ball)



THIS POSITION MAY BE USEFUL IF YOU HAVE HAD A:

- Caesarean section.
- Small or premature baby.

OR IF YOU HAVE:

- Larger breasts or inverted nipples.
- Difficulty attaching your baby using other holds.

## Side lying hold

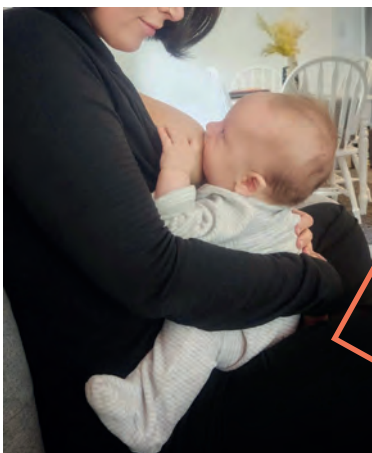


THIS ALLOWS YOU TO REST WHILST YOUR BABY FEEDS, IT MAY BE USEFUL IF YOU:

- Have had a caesarean section.
- Find it uncomfortable to sit.

Start off by lying on your side. Turn your baby completely on their side to face you. Bring their body close to you making sure their head is tilting back and they can then attach.

## Koala position / Upright breastfeeding



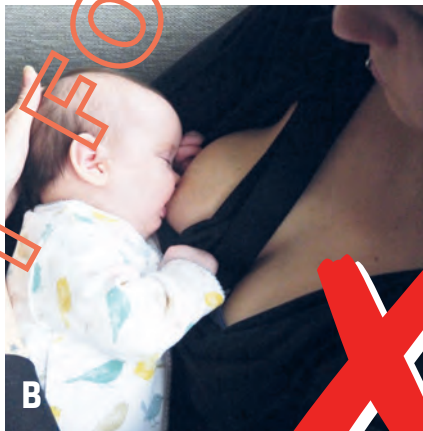
This position is when your baby straddles your thigh or hip, so that your baby's back and head are upright. It enables that special mother-baby eye to eye contact.

This position is easier with bigger babies who can already sit up on their own, while a newborn will need support from you.

This hold may be beneficial if your baby has reflux, or you have a fast let down, or an oversupply. It also works well with preterm babies as it helps them stay awake to feed.

## What to avoid whilst positioning your baby to breastfeed

Head-holding can result in your baby not attaching properly. (PHOTO A). Look at the close up (PHOTO B). If you hold your baby's head they will not be able to tilt their head back and open their mouth wide. Their nose will press into the breast and their chin will not indent your breast so they won't be able to breathe and breastfeed as well. **Ask if you need help. (Numbers on back page)** This is the correct hold (PHOTO C).





# Your Questions

## How do I recognise feeding cues?

Whether your baby is breast fed or bottle fed they show signals when they want to be fed. Keeping your baby close will help you to recognise these.

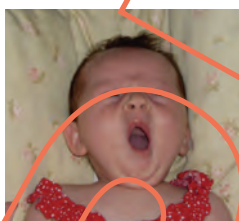
**THIS IS LUCIE DEMONSTRATING HER FEEDING CUES.**



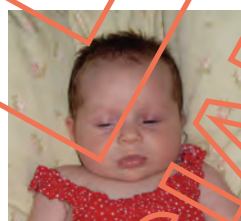
1. Asleep



2. Stirring



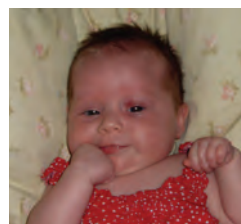
3. Facial Movements



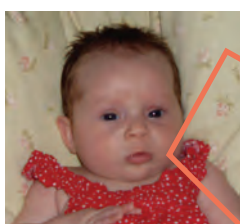
4. Eyes Flickering



5. Wriggling

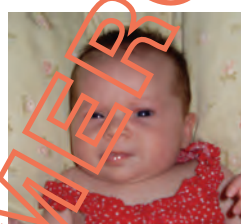


6. Rooting/Sucking Fingers

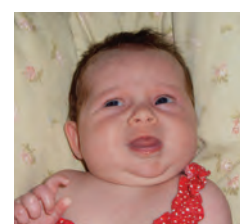


7. I'm ready to feed!

**HER MUM FEEDS HER BEFORE SHE PROGRESSES TO THIS...**



8. I'm Getting Angry!



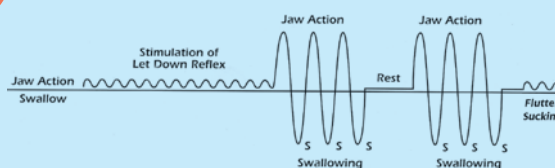
9. I'm Going To Cry

Crying is a late sign of hunger. So lift your baby for feeding when they show the signs. **Watch your baby not the clock.**

## If I'm breastfeeding how do I know my baby is taking in milk?

Observe your baby's body language as well as their sucking behaviour. Initially they should suck rapidly to stimulate your let down reflex. This then changes to longer slower sucks as your milk begins to flow. Your baby will have regular pauses. Knowing they are having good swallows will give you the reassurance that their attachment is good and they are taking plenty of milk.

Diagrammatic sucking pattern.



## How can I tell when my baby has had enough?

Eventually your baby's sucking will get slower with the occasional swallows. This may mean that they are coming to the end of the first breast. Their body will also become more relaxed. Your confidence will grow and you will begin to

recognise the signs when they have completed the first breast. Your baby will release your breast spontaneously. Use this break to change their nappy and offer the second side. They may not always need it.

At every contact you have with a member of the community health care staff, there will be an opportunity to discuss breastfeeding. They will carry out a feeding assessment and complete a breastfeeding assessment form. These will ensure that you have all the information to be able to breastfeed effectively and confidently at home and when you are out and about.

# Expressing

## Breast massage and hand expressing technique



You should be shown how to hand express your milk either antenatally or soon after your baby is born.

### Hand expressing is a very useful technique to learn, because:

- It is an effective method of removing your colostrum, antenatally and postnatally. However evidence shows that if your baby isn't breastfeeding then using a breast pump in addition to this can provide extra stimulation to help build a plentiful supply.

- It's easier to obtain milk to cup feed if your baby is not able to breastfeed. Nipple stimulation, gentle breast massage, can help when hand expressing as these aid milk flow.
- You can tempt your baby to feed and help your milk start to flow.
- It can help your baby attach if your breasts are full.
- You can help clear blocked ducts and relieve mastitis (see pg 25 for more information)

Please ask if you need help to do this

### MASSAGE SHOULD FEEL COMFORTABLE, SO REMEMBER TO BE GENTLE. WASH YOUR HANDS FIRST.



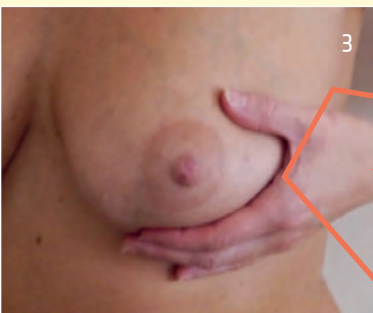
<https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/hand-expression-video/>



1. Lightly stroke or finger tap.



2. Gently stroke; one hand or both hands or massage by rolling your knuckles.



3. Position your thumb and fingers in a "C" shape

4. Find the correct place to press by cupping your breast with your thumb and fingers in a 'C' shape; about 2-3 cm back from the base of the nipple, where your breast feels firmer. The right position may vary from mother to mother so experiment to see what works for you.



5. Gently squeeze, bringing your fingers and thumb together in a rhythmic action (it may take a while for colostrum/milk to appear). If no milk appears after a few minutes, simply move the fingers a fraction forward or back to find the right spot. Avoid any sliding of your fingers as this may damage your breast tissue.



6. When the flow slows down move your fingers round to express a different part of your breast. Repeat the squeeze and release action for as long as you need. Repeat this for your other breast.



### Expressing your milk

Expressing your milk is not necessary unless you plan to be separated from your baby at any time before starting solid food, or you are returning to work. Your professional may suggest expressing as a short term measure if there are concerns that your supply is not quite matching their needs. Remember, a baby will always get more milk out than a pump will. It's supply and demand. The more milk is removed the more milk is produced.

**When to start** - You can start expressing as soon as you feel ready.

How soon may depend on your future plans. If you are returning to work early or planning to be separated from your baby, expressing in the early days may make it easier. This is because mothers often have an over-supply in the early days so practising at this time can help you be more successful and confident at expressing.

However, try not to put pressure on yourself if the time is not right or you feel it's not what you really want to do.