

WHAT TO EXPECT

Your breast milk is always changing to meet the needs of your baby

COLOSTRUM

Late pregnancy till 3-4 days.

- Appears thick, thin, creamy, yellowish or clear in appearance.
- Designed to boost baby's immune system & line baby's gut.



TRANSITIONAL MILK

3-4 days till 11-12 days.

- Milk comes in.
- A mixture of colostrum & mature milk.



MATURE MILK

11-12 days onwards.

- Thinner, white appearance.
- Has a perfect blend of nutrients & protective antibodies that are needed for optimal brain development.



MILK SUPPLY / SKIN TO SKIN

SUPPLY & DEMAND

USE IT OR LOSE IT

- The more baby drinks from your breast, the more milk you will make.
- Ensure baby has a deep latch, is swallowing lots, & feeding frequently.

FULL BREAST=SLOWER MILK PRODUCTION
DRAINED BREAST=FASTER MILK PRODUCTION

TRY TO DRAIN THE FIRST BREAST FIRST, THEN OFFER THE SECOND BREAST IF BABY IS STILL HUNGRY.

SKIN TO SKIN - Improves bonding | Calms baby | Stabilises heart rate & temperature
Encourages feeding behaviour | Promotes better brain development | Releases Oxytocin



PROBLEMS	WHAT TO DO
ENGORGED	<p>Breasts may feel swollen, full & painful, usually in the first 2-5 days after birth.</p> <ul style="list-style-type: none"> • MOVE THE MILK! Feed baby frequently. • Express before feeding to soften nipple for a deeper latch. • Massage before & during feeds. • Put cold packs on after feeds (e.g. chilled cabbage leaves) • Take pain relief if severe.
SORE NIPPLES	<p>The nipple may appear grazed, blistered, cracked, pinched, ridged, discoloured.</p> <ul style="list-style-type: none"> • There should be no more than mild discomfort at beginning of feeds that should not cause nipple damage. If pain persists during or between feeds SEEK HELP & SUPPORT EARLY.
THRUSH	<p>Burning, itchy, shooting pains on nipples. Nipples may appear shiny, red, flaky, rashy. White spots in baby's mouth</p> <ul style="list-style-type: none"> • Hygiene: Vigilant hand washing, keep nipples dry, dispose of breast pads after use. Wash/sterilize everything – clothes, towels, toys, etc. • Consider yogurt or supplements, cut down sugar. • Stored expressed milk can reinfect baby. • Treatment: Contact midwife or doctor. • Breastfeeding can & should continue, treat both mum & baby.
PLUGGED DUCT	<p>If milk becomes blocked, a tender, painful, hard lump may appear in the breast.</p> <ul style="list-style-type: none"> • DO NOT STOP FEEDING BABY! Breastfeed baby frequently from the affected side first. • Apply heat before feeding. • Check the latch is correct & try different positions • Massage lump in the shower & during feeds (e.g warm face cloth). Express afterwards if necessary to drain breast well. • Get plenty of rest, eat well and drink lots of fluids. • If not feeling better within 12 hrs. Contact midwife or doctor.
MASTITIS	<p>Breast may have a red 'hot' area & you may feel flu like symptoms.</p>
LOW MILK SUPPLY	<p>Supply can decrease for many reasons. Be mindful babies often have growth spurts around 3wks, 6 wks, 3 mths, 6 mths so they may feed more which can feel like your supply has decreased.</p> <ul style="list-style-type: none"> • Have lots of skin to skin. • Check for good positioning & latching. • Listen for swallowing, if this slows try breast compressions. • Once breast is drained, switch to the other side. • Consult a health professional for supplement options. • If topping up, use expressed milk before formula. Always start & finish at the breast. • Express: 1 hr after feeding or immediately if not drained. • Get lots of rest & don't forget to eat some healthy food.

TROUBLESHOOTING QUICK GUIDE

SMOKING



BABY SHOULD BE KEPT SMOKEFREE AT ALL TIMES

IT IS IMPORTANT THAT YOU CONTINUE TO BREASTFEED WHILE YOU WORK TOWARDS BEING SMOKEFREE.

HOW DOES SMOKING CIGARETTES AFFECT BABY?

Babies & children have a much higher incidence of:

- SUDI
- Bronchitis
- Asthma
- Pneumonia
- Sinus infections
- Croup
- Ear infections
- Lung cancer

THE BEST THING YOU CAN DO IS STOP SMOKING FOR YOU & FOR BABY'S HEALTH

HOW DOES SMOKING AFFECT BREASTFEEDING?

SMOKING IS LINKED TO:

- Earlier weaning
- Lower milk production (less milk making hormones)
- Inhibited let downs (slow milk flow)

HOW TO MINIMISE THE RISK TO BABY:

- Ideally STOP smoking. BE SMOKEFREE. Ask your LMC & local services, or go to Quitline (www.quit.org.nz) or phone 0800 778 778.
- Don't smoke immediately before or during breastfeeding, wait till after you have breastfed to minimise the amount of nicotine in your milk.
- Smoke outside, away from baby.
- Wash hands after smoking & prior to breastfeeding.
- If you smoked during pregnancy & you or your partner smoke it is not safe to sleep with your baby.

ALCOHOL

HOW TO MINIMISE RISK TO BABY IF YOU'RE PLANNING TO DRINK

- Arrange for a sober babysitter.
- Breastfeed **BEFORE** you drink.
- Eat before & while drinking.
- Alternate alcoholic with non-alcoholic drinks.
- Choose low alcoholic drinks.
- If your breasts get full & uncomfortable while intoxicated, express & discard it.

- Express ahead of your night out, that way you have back up if the alcohol takes longer to clear, & then there is no need to use formula.
- Your milk flow may slow while there is alcohol in the blood-this will return to normal.



TO CALCULATE WHEN YOUR MILK IS ALCOHOL FREE, DOWNLOAD THE FREE FEEDSAFE APP

Handy information on breastfeeding & alcohol, right in your pocket.



MAKE EVERY SLEEP A SAFE SLEEP

YOU CAN HELP BY KEEPING BABY:

FACE UP

'On the back' protects baby's breathing, if they spill they have a strong gag & swallow reflex to protect their airway.

FACE CLEAR

Baby needs to breathe freely -That means no pillows, no toys, no loose covers, just baby in the sleep space.

SMOKEFREE

Smoking, especially during pregnancy, takes oxygen from babies. It weakens their breathing when they sleep. Keep baby smokefree at all times.

CLOSE BY OWN SPACE

Sleep baby in the same room as you but in baby's own safe sleep space.

BREASTFED

A breastfed baby is a strong baby.

SAFE SLEEP IS ABOUT PROTECTING BABY'S AIRWAY SO BABY CAN BREATHE EASILY

Permission given by Change for our Children. For more information visit www.whakawhetu.co.nz or www.changefourourchildren.co.nz



REFERENCE CARD

BREASTFEEDING

SMOKEFREE

ALCOHOL FREE

SAFE SLEEP





HAWKE'S BAY
District Health Board
Whakawāteatia

Breastfeeding is the normal & natural way to provide nutrition for a baby

EXCLUSIVE BREASTFEEDING...

- PROTECTS YOUR BABY FROM:**
 - Chest, ear & urinary infections
 - Meningitis
 - Chronic tummy problems
 - Some Childhood cancers
 - Allergies
 - Asthma
 - Eczema
- DECREASES THE RISK OF:**
 - SUDI
 - Diabetes
 - obesity
- PROMOTES:**
 - Good mental, emotional & physical health
 - Sense of trust & security
 - Strong bond with mum
 - Healthy immune system
 - optimal brain development



YOU CAN FEED ANY TIME... ANY WHERE!
BREASTFEEDING CAN ALSO IMPROVE MUM'S HEALTH.
The longer you breastfeed the better.

EARLY

- Wriggling: Moving arms/legs
- Rooting: Hands to mouth, licking, poking tongue out, any mouth movement, sucking sounds, soft cooing or nuzzling towards breast

MID

- Fussing: Making noises & arching back
- Restless
- Crying now & then

LATE

- Full cry
- Cannot settle
- Tense body
- Turns red
- More difficult to get crying baby to latch. Energy has gone into crying instead of feeding, they may be too tired to feed

COMMON POSITIONS

CRADLE

FOOTBALL

TRANSITIONAL

SIDE LAYING

PRONE / LAID BACK

SLANTED / UPRIGHT

ANGLES

Baby's head, neck and spine are aligned & supported

Angle of baby to angle of breast lines up

No twists in spine, arms on both sides of breast

TRANSITIONAL HOLD - 5 EASY STEPS

LATCHING

Support baby behind shoulders, allow head to tilt back

1. Bottom & chest in
2. Line nipple to nose
3. Chin in & well below the nipple
4. Wait for WIDE mouth. Keep bottom lip planted
5. Roll & go (bring baby to breast)

Head is extended, chin is buried in breast

LATCHING

SIGNS OF A GOOD LATCH

- Wide open mouth
- Mouth full of breast
- Nose free to breathe
- Chin indenting breast
- Nipple shape is the same after feed

NOT SO GOOD LATCH

- May experience pain.
- Baby comes off easily
- Nose is blocked
- Baby is nipple feeding, not deep enough
- Cheeks are dimpled
- Clicking noises
- Lips are turned inward
- Baby is twisted away, not close enough

You know baby is getting enough when there is lots of swallowing heard, baby is satisfied after feeds & there are good outputs with appropriate weight gains.

HAND EXPRESSING

1. Stimulate a letdown – massage, stroke, shake. Position your thumb & forefinger approx 2.5cm away from the nipple base.
2. PUSH back towards chest.
3. Roll forward – like your taking a thumbprint. Repeat rhythmically, rotate fingers around the breast.
4. Switch breasts when milk flow slows down.

MILK STORAGE

Room Temperature (<26°C) 4 hrs

Fridge 2 days

Compartment Freezer 3-6 months

Deep Freeze / Chest Freezer 6-12 months

Place pump equipment into a separate container, rinse with cold water, wash with hot soapy water, then dry on a clean surface. If using formula, sterilise equipment.

Express the milk & pour into a suitable container/bag

Remember to label with dates, use oldest milk first

Thaw in fridge & heat in a cup of hot water, test the temperature before giving to baby

WHANAU SUPPORT

Breastfeeding mums need support
YOUR WHANAU & FRIENDS CAN ...

- Let you sleep while baby sleeps
- Play, sing, rock, carry, bath & change baby
- Help with housework
- Give encouragement & awhi
- Prepare the kai
- Look after the other children
- Run pick ups & errands
- Show lots of aroha

Now you can have energy to focus on breastfeeding & enjoy your new baby.

LOCAL SUPPORT

WHERE CAN I GET HELP

IF YOU ARE HAVING ANY DIFFICULTIES BREASTFEEDING, SEEK HELP & SUPPORT EARLY. A FEW SIMPLE CHANGES ARE USUALLY ALL IT TAKES TO GET BACK ON TRACK.