

# Things To Consider When Establishing Breastfeeding

STRAIGHT TALK ON BREASTFEEDING YOUR NEWBORN IN THE IMMEDIATE POSTPARTUM



**Breastfeeding is a learned skill for both mom and baby** and getting started can feel overwhelming, to say the least. The time immediately following your birth can be very busy as you're juggling medical care, trying to catch your breath and welcome your baby all at the same time. We want to help ensure you have the tools you need so you can experience a healthy and supportive start to your breastfeeding relationship.

**Understanding the needs of your newborn in the first few hours after the birth is a great way to reduce stress.** This allows you to better support your new baby as they adjust to life outside the womb. Things to consider during the first 24 hours:

- Skin to skin contact helps to regulate blood sugar, stabilizes temperature, encourages milk production and creates more opportunities to feed.
- Colostrum (aka "Liquid Gold") is the perfect food for your newborn and is expressed in drops.
- Your newborn's appetite is about the size of a shooter marble (5-7ml) requiring very little milk to fill it up.
- Newborns are hardwired to breastfeed. Our job is to support their built-in reflexes as they learn.
- WHO recommends "initiating" breastfeeding in the first hour. This includes uninterrupted skin to skin contact and baby is free to explore and use their senses (taste, touch, smell) to familiarize themselves and suckle at the breast.

## Emergency Feeding Plan

Where milk at the breast is not available, WHO recommends expressed milk from mother, then donor milk from a healthy donor, then formula as the last option. If you are separated from your baby, or if your baby has a medical condition that requires immediate feeding, here are steps you can take to support your baby:

### Start Expressing Milk as Soon as Possible

- Using one hand, place four fingers beneath your breast, well back from the areola. Gently but firmly roll your thumb forward towards the areola while applying downward pressure. Use a spoon or sterile container to collect the colostrum that is expressed.
- Rotate your hand around your breast every few compressions to try and express milk from many different glands.
- You may only express a teaspoon or so of colostrum per session on day one. That is well and expected. Your baby only needs to consume 5-7 mL of breast milk on day 1 of life.
- Give your expressed colostrum to your nurse and ask them to ensure your baby gets it.
- Once you get to Mother/Baby Unit, ask for immediate access to a pump and a lactation consultant.

**This checklist was created in partnership with Martha Neovard CBE**

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## BREASTFEEDING CHECKLIST



It's all about the LATCH! We want to help you focus on the basics so you can support the built-in reflexes your newborn already has. That's why we've created this simple, step-by-step checklist to use as you get started in the immediate postpartum.

## 6 Steps to a Successful Latch

- 1** Skin to Skin. Get skin to skin with your baby. Make sure baby's tummy is flush with yours, with baby's head lined up squarely to their shoulders and hips. Place baby so his cheek is resting slightly above your nipple.
- 2** Support your baby's trunk and body with your arms. Place the heel of your hand gently between baby's shoulder blades. Baby's head should be free to move and bob around as baby seeks the breast. Do NOT press on the back of baby's head.
- 3** Make sure your nipple is readily available. If you are large chested, drop baby down to where your nipple is. If your nipple turns downwards, place a rolled up washcloth under your breast to keep it propped up. If your nipples are flat or inverted, gently roll them out with your fingers.
- 4** As your baby bobs to find the breast, support his body and keep him tummy to tummy with you. Keep your fingers clear of baby's mouth and make sure no one else's fingers are there as well. Do not hold baby's hands. Babies use a combination of hands, scent, and sight to locate the breast. Too many hands and scents will confuse your baby. **Do NOT press on the back of baby's head.** This hurts baby, can create poor latch, and interferes with baby's natural reflexes.
- 5** Gently guide baby to bring their chin first to the breast, with your nipple pointed to the underside of baby's nose. As baby opens wide, press gently but firmly between baby's shoulder blades to guide them onto the breast.
- 6** Now the baby is latched. If baby releases the latch, help baby to find the breast chin first again. You can hold your breast in a C shape to create an easier surface for baby to latch onto. Once baby is latched, give them a few minutes to process what is happening. Some babies may latch and pause as their body integrates the new information. This is expected and okay. If baby does not start to suckle, gently stimulate baby's feet to encourage their suckling reflex to kick in. You may also express colostrum to encourage baby to start suckling, using breast compressions.