# **Breast Feeding**

### How to ensure good milk supply?

- More you feed the more milk you make so feed more often.
- More relaxed a mother is the more milk she will make so smile a lot.
- There are no magic foods which make breast milk. Follow a healthy balanced diet and include all the food groups.
- Avoid Top Feed. Less time at the breast means lower milk supply. Baby may develop preference for bottle and refuse the breast.
- Keep a count of the number of times your baby urinates. If baby urinates a minimum of seven times in 24 hours it means that baby has fed well in the last 24 hours.
- If the urine count is less, then please ask for help from a lactation specialist who can assess the situation and give you the right advice.

## How to prevent breast engorgement?

- + Wear a good supportive bra at all times.
- + Do not use underwire.
- + Feed often.
- + Feed on demand.

If engorgement happens apply a warm compress and do a gentle massage to relieve thee breast and then latch the baby for a feed.

For more information and help during pregnancy and thereafter, you can take an online breast feeding class. Visit: www.baby360degrees.com

#### Good websites to visit:

www.llli.org | www.bpni.org | www.cdc.gov www.nhs.uk |

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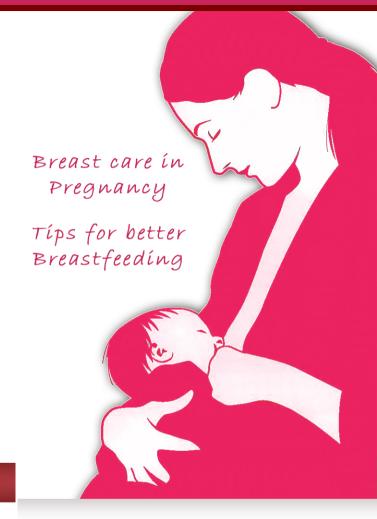






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## Nature's Gift for both Mother and Child



### Why is breast feeding so important?

Breast milk is the best food for the Human baby in the first six months of life. It helps provide immunity, prevent allergies, is easily digestible, helps the mother lose weight, helps the uterus to shrink, reduces post partum bleeding, gives protection against hormone related cancers especially breast cancer, it is convenient, economical and helps create a strong bond between mother and child.

## What breast changes should one expect in pregnancy?

- Breast changes are the first to be experienced
   during pregnancy. The areola appears darker and larger and the breast also feels more sensitive.
- Towards the end of the second trimester moms may even notice some fluid discharge which is colostrum and this is normal. It is also equally normal to not experience this discharge.

- Remember nipple stimulation can lead to pre term contractions and hence should be avoided.
- As the breast becomes heavy it is recommended that you choose the right supportive and well fitting under garment. You may need to change these often as your size changes over the months

## What to do in the first 15 minutes after the baby is born?

If possible latch the baby on as soon as the baby is born. Even before the cord is clamped. The baby is in a brand new world and is naturally scared. Being with the mother helps to make the baby feel calm. The gentle suckling of the baby at the breast will help the placenta to separate and complete the second stage of labor much more rapidly.

## What to do in the first 2 days after the baby is born?

Remember the golden rule of breast feeding - The more you feed the more milk you make.

Latch the baby on to the breast every 2 to 3 hours for minimum ten minutes on each side. This can be safely done even if you have had a surgical birth. Focus on your position and the baby's position as this will mean that you both are comfortable. Also pay special attention to the baby's latch. The mouth should be wide open and a major portion of the areola should be in the baby's mouth for an effective milk transfer. Remember breast feeding is not painful so if you are experiencing any kind of discomfort then please consult your doctor or a lactation counselor.

### How to deal with cracked nipples?

If the latch and position are correct you will not have sore and cracked nipples. Hence work hard on getting this right. Else you can discuss breast creams with the doctor. Applying your own breast milk also is an effective home remedy.

## I have Inverted nipples, what do I do?

A breast examination will help you understand if your nipples are ready for breast feeding. Your baby may find it difficult to latch if the nipple if flat or inverted and a little check during pregnancy can help in minimizing issues post-delivery. Splash some cold water or rub some ice on the nipple and areola. If the nipple appears to stand out erect that is the first test. Next using your fingers compress on the areola as if the baby was latching on and make a note that the nipple stays erect. If you feel that the nipple appears flat or retracts in any of the above situations discuss the same with your doctor or a lactation counselor. You can do some exercises in the last few weeks of pregnancy to help form the nipples.

## You can still breatfeed with flat/inverted niples. Ask a Lactation consultant for help.



Position your thumb and forefinger on the areola, about 2-3cm behind the nipple. Pinch your fingers together and see what the nipple looks like:

Do the Pinch test to identify if you have Inverted Niples.

# 1. The nipple stands out This is a "normal" nipple; it should be easy for baby to latch and breastfeed

2. The nipple
stays flat
This is a flat
nipple; most
babies can
breastfeed
easily but some
may need help
with latching

3. The nipple pulls inward
This is an inverted nipple; baby will likely need some help to latch and breastfeed in the beginning