



## WOMEN'S HEALTH CENTER

# ALL ABOUT BREASTFEEDING

---

*Information for you and your baby*

*Please contact our lactation team at  
(570) 253-3005 with any questions.*

Breastfeeding Philosophy- Wayne Memorial Hospital and Wayne Memorial Community Health Centers staff will encourage women to make an informed decision to breastfeed their babies as it is the biological norm. We strive to provide women and their families the knowledge and support to breastfeed for at least the first year of her child's life, for both her own health and the health of her child. If a mother is unable to breastfeed or unable to provide breastmilk to her baby we will provide evidence based education on the proper techniques to handle, store, and administer formula.



## **Risks of Not Breastfeeding for Baby**

- **Baby misses out on the living ingredients of breastmilk that cannot be replicated in formula**
  - Breast milk is specific to your baby and changes as the baby grows
- **Increased risk of infections**
  - These include ear infections, lower lung infections, stomach infections, urinary infections and more
- **Increased risk of SIDS (Sudden Infant Death Syndrome)**
- **Increased risk of childhood obesity**
- **Less ability to control body temperature and breathing stability during feedings**
- **Increased risk for long term health issues**
  - These include skin allergies, childhood cancers, asthma, diabetes, and lower IQ scores

## **Risks of Not Breastfeeding for Mom**

### **➤ Increased risk of postpartum issues**

- Increased risk of postpartum depression
- Increased risk of postpartum bleeding
- Increased sleep disturbances
- Difficulty with postpartum weight loss

### **➤ Increased costs**

- 1 year of formula and supplies can cost well over \$2,000
- Breastfed babies are sick less often therefore lowering health care costs

### **➤ Health Risks**

- Increased lifetime risk of type 2 diabetes, breast cancer, ovarian cancer, and rheumatoid arthritis
- Increased risk for poor bone health
- Increased occurrence of high blood pressure, high cholesterol, and heart disease



## **Getting a Good Start**

- **Start with skin to skin contact immediately after birth**
  - Place baby with his/her chest in direct skin to skin contact with mom's chest
  - Remain skin to skin until baby crawls to breast and completes the first feeding
  - Placing baby skin to skin before feedings will help get a better latch
- **Room in with baby**
  - Keep baby in the room with you during your stay in the hospital
- **Avoid pacifiers and bottle nipples for the first four weeks**
  - Bottles can interfere with baby's latch until breastfeeding is going well
  - Pacifiers can interfere with weight gain if used to replace a feeding
- **Avoid formula supplementation unless medically necessary as the following risks can occur:**
  - Formula introduction will interfere with milk production/supply and is often unnecessary
  - Formula changes your baby's intestines making your baby more likely to get an infection. This also increases the risk of skin allergies, asthma, obesity, and type II diabetes.
  - Feel free to call a breastfeeding expert if someone is advising formula supplementation or a breastfeeding support device and you are uncomfortable with this-there may be other things to try first



## **Skin to Skin Contact**

- **Baby is used to being warm and cozy in your womb. Skin to skin contact is the best way to transition baby into the world.**
- **Positive effects of skin to skin immediately after birth and as often as possible are:**
  - Baby is more likely to latch on
  - Baby is more likely to latch on well
  - Baby maintains his normal body temperature better than in an incubator
  - Baby maintains his normal heart rate, respiratory rate, and blood pressure
  - Baby has higher blood sugar
  - Baby is less likely to cry
  - Baby is more likely to breastfeed exclusively and breastfeed longer
  - Milk supply will increase
  - Baby will indicate to his mother when he is ready to feed



## **Rooming-In**

**The American Academy of Pediatrics recommends that you keep your newborn baby in the room with you 24 hours a day. Rooming in is safe for healthy babies and their mothers.**



### **Benefits of Rooming-In**

- You get to know your baby by responding to his or her cues.
- Your baby will learn your smell, touch, and voice by holding and cuddling often.
- Your baby will sleep better in a quiet room and cry less often than babies that are separated from their mothers.
- You will sleep better knowing that you are not separated from your baby.
- Feeding on Cue- feed baby when he or she shows signs of hunger rather than waiting a specific length of time between feedings. Feed your baby as often and as long as he or she wants. This establishes your milk supply.
- You will have more interaction with your baby and this enhances the mother/baby bond.
- Sleep when your baby sleeps, even during the day.
- You will be better prepared to take care of baby when you go home because you have learned your babies' unique cues.



## **Milk for the First Few Days of Life**

- **Colostrum is the thick concentrated milk that you make for your newborn**
- **It is full of important nutrients and antibodies to protect baby that are unique to human milk**
- **Our bodies match baby's tiny tummy by making colostrum in very small amounts**
  - **This can sometimes make you believe you don't have enough milk but that is not true**
- **Babies often lose weight in the first few days and regain their birth weight by two weeks of age**
- **Baby takes small frequent feedings or "sips" of colostrum**
- **Normally colostrum is all that baby needs in the first few days of life until your milk comes in**



## **Signs of Hunger/Readiness to Feed**

- **Feed your baby "on demand" when you see any of the signs of hunger listed below**
- **Rooting**
  - Baby will turn the head to the side and open the mouth
- **Mouthing**
  - Licking lips
  - Sticking tongue out
- **Increased alertness**
  - Clenching and unclenching hands
  - Raising hands to mouth
  - Moving legs
- **Crying**
  - This is a late sign of hunger-ideally baby should be fed before this sign occurs







## Tips to Achieve a Deep Latch

- **Start with skin to skin time!!!!**
  - It may take up to 30 minutes for baby to show signs of readiness to feed
- **Allow your breast to hang naturally-bring baby to breast, not breast to baby**
- **Support baby's head with a hand behind the shoulders-not the back of the head**
- **Align baby with ears, shoulders, and hips in a straight line-pull baby in tight to your body**
- **Line baby's nose up with the nipple-baby's chin should touch the breast first and he should reach up to latch**
- **Tease nipple over baby's lips to get baby to open his or her mouth**
- **If needed express some breast milk on to nipple to give baby a taste**
- **Wait for wide open mouth then initiate latch with a gentle but fast push toward the breast**
- **Do not attempt to latch if baby is crying-soothe baby and try again**
- **If latch hurts, gently detach baby by inserting a clean finger into the side of the mouth and try again**

## Sandwich Hold

- Compress your areola slightly to make a "nipple sandwich" for the baby.
- Place thumb by baby's nose and fingers by baby's chin
- Make sure your fingers are well behind the edges of the areola (1 to 1  $\frac{1}{2}$  inches from the base of the nipple).
- Allow your baby's head to lean back slightly so his chin touches the breast first.
- This will allow the baby to get a deeper latch-on





## **Signs of a Good Latch**

- **The latch feels comfortable to you, without hurting or pinching-how it feels is more important than how it looks**
- **Baby's mouth will be filled with breast-you should not hear sucking or clicking**
- **You see little or no areola, depending on the size of your areola and the size of your baby's mouth. If areola is showing, you will see more above your baby's lip and less below**
- **Your baby's lips turn out like fish lips, not in. You may not be able to see the bottom lip**
- **Your baby's chin touches your breast. The nose should be touching or very close.**
- **Baby's chest is against your body and he or she does not have to turn his or her head while drinking- baby's ear, shoulder, and hip are in a line**
- **You hear or see your baby swallow**
- **You see the baby's ears "wiggle" slightly**
- **Your breasts feel softer (less full) after a feeding (after milk "comes in")**



## **Establishing Breast Milk Supply**

- **Milk production is based on supply and demand**
  - The more often and completely your baby breastfeeds the more milk you will make
- **Baby must nurse at least 10 times daily for the first 2 weeks**
  - This includes at least 1 overnight feeding
- **Also, the more completely you empty your breasts the more milk you will make**
- **Hand expression or pumping after some daytime feedings will help make ample supply**
  - This is most important in the first few weeks after delivery

## Hand Expression

- This technique is done by using your hands to massage and compress your breast to remove milk
- Helps to make sure breasts are completely drained thus increasing milk supply
- Doing this after some daytime feedings in the first two weeks can dramatically increase milk supply for later on
- How to do it:
  - Position thumb and first two fingers 1 to 1  $\frac{1}{2}$  inches from the nipple above and below it (not touching the darkened area around nipple)
  - Push straight back into the chest wall
  - Squeeze fingers together and roll thumb forward while compressing the breast tissue
  - Repeat-rotating thumb and fingers around breast to milk other reservoirs
  - Collect milk on spoon or in medicine cup and give to baby if feeding attempts are unsuccessful



## Is Baby Getting Enough?

### ➤ **Baby is gaining weight**

- Babies will lose 7-10% of their body weight in the first 3-4 days after birth-this is normal
- Most babies regain their birth weight within 2 weeks

### ➤ **Baby is making enough clear or pale yellow urine and making enough bowel movements every day**

Baby's age	Number of Wet Diapers	Number of Bowel Movements	Color and Texture of Bowel Movements
Day 1 (first 24 hours after birth)	1	The first one usually occurs within 8 hours	Thick, tarry and black
Day 2	2	2	Thick, tarry and black
Day 3	3	3	Looser, greenish to yellow (color may vary)
Day 4	4	3	Looser, greenish to yellow (color may vary)
Day 5	5	3	Looser, greenish to yellow (color may vary)
Day 6	6	3	Loose and seedy, yellow
Day 7	6	3	Larger amounts of loose and seedy, yellow



## **Do you truly have a low milk supply?**

**Many mothers think they have a low milk supply when in fact they are making plenty of milk to feed their baby**

➤ **The following things are NOT good indicators of milk supply:**

- **The feel of your breast (soft or hard)**

- As time goes on, breasts no longer feel full as the body regulates your supply to baby's needs

- **The behavior of your baby (in most cases)**

- Babies can be fussy for other reasons than hunger. Being at the breast allows baby to be close to you for comfort and security

- **The frequency and length of nursing**

- Newborn babies need to nurse frequently because their stomachs are so tiny and breastmilk digests very quickly
- Babies often cluster feed for long periods of time usually in the evening hours. This is normal and will become less over time
- Babies go through growth spurts where they will nurse very frequently for several days.
- Older babies can drain the breast quicker-they are becoming pros!!

- **The sensation of let-down or lack of leaking**

- Some moms do not feel anything during a let down
- Some moms never leak

- **The amount you pump**

- Babies remove much more milk from the breast than a pump can
- Pumping becomes more effective with practice but some moms are unable to get any milk with a pump

## **Size and Length of Feedings**

- **On day 1 baby's stomach cannot stretch like it can in older babies**
  - Baby will only take in drops to a teaspoon at each feeding-this is normal and all baby needs in the first few days of life
- **Baby will let you know when he or she has had enough**
  - Baby will self detach or fall asleep (pauses last more the 10 seconds)
- **Don't watch the clock**
  - Listen for swallowing so you know baby is getting the milk-sucking with no swallowing will lead to poor weight gain and low milk supply
  - Amount of time on the breast is different based on mom's anatomy and baby's suck
  - Always allow baby to finish on first breast before switching breasts because the milk that comes at the end of a feeding is high in fat content and will help baby gain weight
- **Frequency of feeding is timed from the beginning of one feeding to the beginning of the next**





## **Engorgement**

- **As your milk “comes in” your breasts will feel full and heavy-this can lead to engorgement-which can be uncomfortable**
- **If milk builds up in the breast, engorgement will worsen and this can lead to plugged milk ducts that can become infected (mastitis)**
- **Tips to deal with engorgement:**
  - Nurse your baby frequently and allow baby to decide when he/she is finished (8-12 times daily)
    - Remember to allow baby to finish the first breast before offering the second
  - Use ice packs on breasts in between feedings to reduce swelling
  - If baby is having trouble latching because of fullness then hand express or pump for a few minutes before latching. This will allow baby to get a deeper latch
  - Applying gentle pressure around the nipple for a few minutes before latch can help to shape the nipple and make it easier for baby to latch

## **Growth Spurts And Cluster Feedings**

### **➤ Growth Spurts**

- 24-48 hours in which baby requires more calories
- Baby will nurse more frequently and not seem as satisfied
- Mothers may be tempted to supplement with formula but this is not necessary
- Simply allowing baby to nurse unrestricted will get them through this time
- Usually occurs at 3 days, 2 weeks, 6 weeks, and 3 months but this can vary

### **➤ Cluster Feedings**

- Baby will feed frequently in a short period of time which often happens in the evening hours (especially on the 2<sup>nd</sup> night)
- This is completely normal!!
- Baby is getting enough milk if the latch is good and you can hear swallowing



## **Nutrition for Breastfeeding Moms**

- **You need extra calories to make breastmilk and have energy too. Choose healthy foods like:**
  - Whole grain bread with peanut butter
  - A piece of fruit with a slice of cheese
  - 8 oz. of yogurt or milk
- **No special diet is needed just make healthy food items a priority**
- **Wash fruits and vegetables well to get rid of pesticides**
- **Eat a variety of foods. Different foods change the flavor of breast milk and help baby to get used to family foods.**
- **Stay hydrated to keep urine a pale yellow color.**
  - Limit caffeine to no more than 2-3 cups daily depending on how your baby reacts. Excess caffeine can affect some infant's sleep.
  - Limit sugary drinks such as juice or soda as they add calories and are not as hydrating.
  - Keep water handy when you are breastfeeding baby.



## **Pumping**

- **If all is going well begin pumping after breastfeeding is well established (about 4 weeks)**
  - You may want to do this for many reasons such as if you are going back to work or if dad wants to give baby a bottle
  - Avoiding bottles for the first 4-6 weeks gives baby a chance to become very good at latching and decreases the chance of nipple confusion
- **When pumping:**
  - Wash hands and pump in clean quiet area
  - Try to relax and think about baby. Don't look at the amount in the bottles during pumping.
  - Pump through at least 2 let downs (milk will squirt into pump flange during a let down). After that when milk stops coming, pump for 2 more minutes then stop-average time is 10-20 minutes
  - Limit pumping sessions to no more than 30 minutes
- **If pumping hurts get help!!!**

## **Breast Milk Storage Guide**

- Refrigerate or freeze immediately
- Store in back and not in the door
- Use containers specifically designed for breast milk storage
- Label with date and time
- Use oldest of the fresh or refrigerated milk first then use the oldest frozen breast milk

<b><u>Place</u></b>	<b><u>Full Term Baby</u></b>	<b><u>Preterm Baby</u></b>
<b>Countertop (68°F)</b>	<b>4-6 hours</b>	<b>&lt;1 hour</b>
<b>Defrosted</b>	<b>24 hours</b>	<b>24 hours</b>
<b>Refrigerator (&lt;39°F)</b>	<b>4-8 days</b>	<b>48 hours</b>
<b>Freezer (14°F)</b>	<b>6 months</b>	<b>3 months</b>



## **Pumping Output**

- **Many things affect how much milk you can pump during a session, such as:**
  - **Your baby's age**
    - From birth to about one month your baby increases the amount of milk needed each day
    - After one month of age and until solids are introduced the amount of milk baby takes is 25-30oz daily
  - **Whether or not you're exclusively breastfeeding**
    - Production will be lower if you are giving formula supplements or solid foods
  - **Time elapsed since your last breastfeeding or pumping**
    - If pumping in between feedings expect less than 1-3 ounces total between both breasts
    - If pumping to replace a missed feeding 2-4 ounces is considered ample
  - **Time of day**
    - Most moms make more milk in the morning hours
  - **Your emotional state**
    - Stress can affect milk flow and supply
    - Put your feet up and drink something with Hops like Mother's Milk Tea or Near Beer
  - **Your breast storage capacity**
    - This can vary from mom to mom and explains why some babies feed more frequently than others
  - **Your pump quality and fit**
- **Remember pumping output is NOT an indicator of milk supply. Babies remove much more milk from the breast than a pump can. The more you pump the more milk you may get.**

## **Tips to Increase Pumping Output**

- **Pump both breasts at the same time**
- **Relax and think about baby**
- **Apply warm compresses before pumping**
- **Massage breasts prior to and while pumping**
  - Use a hands free nursing bra or check out this website for a less expensive alternative:  
<http://kellymom.com/bf/pumpingmoms/pumping/hands-free-pumping/>
  - Begin with gentle massage in a circular motion to stimulate milk flow before applying pump
  - During pumping continue gentle massage until milk flow begins
  - Gentle compression with your hand in a C shape during a let-down can help breasts drain better
  - When the milk stops flowing return to gentle massage and pay special attention to areas that still feel full or hard
- **After finishing with the pump some moms can get more milk out by hand expressing**



## **How to Get a Breast Pump**

- **Breast pumps can be acquired locally at Stephens Pharmacy. Stephens Pharmacy only carries the Medela Pump in Style or Spectra S2 Plus breast pumps. If you prefer a different brand you can reach out to your insurance company to find out what other medical equipment supplies are covered (usually this is a mail order company).**
- **Simply ask your doctor or midwife for an order to be faxed there and they will contact you within a few days regarding your insurance coverage.**
- **Stephens Pharmacy phone number is 570-253-7700**





## **Introducing a Bottle**

- **Wait until baby is 4-6 weeks old to prevent latching difficulties**
- **Used Paced Bottle Feeding to prevent over feeding**
  - Hold the baby almost upright
  - Hold the bottle horizontal
  - Only keep fluid in nipple if baby is sucking
  - The feeding should take 15-20 minutes
  - Give lots of cuddles and attention
  - Switch sides during feeding





## **When to Wean**

- **The American Academy of Pediatrics recommends ONLY breast milk for 6 months**
- **After 6 months of age other appropriate foods can be given with breast milk as the main source of nutrition until 12 months**
- **After 12 months weaning can occur whenever you and baby are ready although many of the benefits continue long after one year of life**
- **World wide average weaning age is 4  $\frac{1}{2}$**
- **Post-pone weaning if:**
  - Baby or mother is sick or hospitalized
  - Family is traveling, during holiday periods or other period of unusual stress
  - Baby is teething
  - Mother has mastitis
  - Baby is in a growth spurt



## **Benefits of breastfeeding past 6 months**

- **Along with healthy complimentary foods, breastmilk provides the best source of nutrition for baby.**
- **Can help protect your baby from short- and long-term illnesses such as Asthma, Type 2 Diabetes, Eczema, Obesity and SIDS.**
- **Your milk adjusts to provide your baby with more infection-fighting antibodies and white blood cells when baby is ill - something formula simply can't do.**
- **Breastfeeding not only provides nutrition but also helps nurture and calm infants and toddlers.**
- **Lowers risk of mother developing heart disease, type 2 diabetes and even some forms of cancer.**

## When to Call a Breastfeeding Expert

➤ **If your baby:**

- Is jaundiced
- Refuses to latch
- Is not gaining weight well ( $\frac{1}{2}$  to 1 oz daily)
- Feeds "all the time"
- Spits up "a lot"

➤ **If you:**

- Have flat or inverted nipples
- Have sore nipples
- Are engorged
- Have a low milk supply
- Are returning to work
- Are ill or need to have surgery
- Have mastitis or plugged milk ducts
- Have any questions about conflicting advice or discouragement you may have received about breastfeeding



WOMEN'S HEALTH  
CENTER

## **Breastfeeding Resource Information**

**Wayne Memorial Hospital and Women's Health Center** - Offer both inpatient and outpatient breastfeeding support services to breastfeeding families 570-253-3005

**Honesdale Pediatrics Office**- Outpatient lactation consultations available at this location to patients of this pediatric office 570-253-5838

**Latch Lounge**- Private, online community support group for Breastfeeding Moms  
[facebook.com/groups/WMCHCLatchLounge](https://facebook.com/groups/WMCHCLatchLounge)

### **WIC**

All **WIC** agencies offer Breastfeeding support to WIC eligible participants. WIC offers free breast pump rentals as well as consultations with Nutritionists to give basic breastfeeding advice and knowledge

A **Breastfeeding Peer Counselor** is a mother who participates in the WIC Nutrition Program and has successfully breastfed her baby for at least six months. She knows what it's like and is willing to help you with any questions or concerns you may have about breastfeeding\*

#### **Wayne County/Pike County**

MFHS Circle of Care Hawley – 570-390-5000

#### **Lackawanna County**

Jermyn WIC Center 570-876-2041

MFHS Circle of Care Scranton 570-961-5550

Scranton WIC Center 570-346-8493 BF Peer Counselors available at this location

#### **Susquehanna County**

NEPA Community Health Care- 570-278-2982

# **Breastfeeding Resource Information**

## **Sprout Dental**

If you are concerned about a possible tongue or lip tie that is affecting breastfeeding,  
Call Dr. Kady at Sprout Dental. Frenotomy Consultations can be scheduled the same day. 554 Hamlin  
Highway Lake Ariel PA 18436 570-253-0358

## **Dr. Lawrence Kotlow**

Dr Kotlow is a internationally known expert on the diagnosis and treatment of ankyloglossia also known  
as tongue tie. Dr Kotlow is located in Albany NY which is approximately 2hr and 40 minutes from  
Honesdale. He has wonderful resources on his website that include videos to describe the frenectomy  
procedure and aftercare exercises. 340 Fuller Road Abany NY 12203 Phone: 518-489-2571

## **Book Resources**

Breastfeeding Made Simple: Seven Natural Laws for Nursing Mothers by Nancy Mohrbacher IBCLC FILCA  
and Kathleen Kendall-Tackett IBCLC

Making More Milk by Diana West IBCLC and Lisa Marasco IBCLC

Working and Breastfeeding Made Simple by Nancy Mohrbacher IBCLC FILCA

Womanly Art of Breastfeeding by Diane Wiessinger Diana West

SOS 4 Tots by Dr Kotlow DDS

Relactation A Guide to Rebuilding Your Milk Supply by Lucy Ruddle IBCLC

## **Online Resources**

<https://kellymom.com>

<https://firstdroplets.com>

<https://med.stanford.edu>

<https://www.womenshealth.gov/breastfeeding>

<http://www.llli.org>

# **Breastfeeding Resource Information**

## **Craniosacral Therapy for Infants and Children**

Cranial Sacral Therapy (CST) is a gentle and very effective hand on body treatment that is helpful for infants and children as well as adults. It is used as an assessment tool and a way to help correct any tension or discomfort a newborn may have from birth and help ensure good health for well babies.

Cranial Sacral Therapy can help babies who are experiencing latch problems that contribute to sore nipples for mothers, fussy babies, reflux, colic, babies who favor one breast, and many other reasons.

To learn more about CST and what a session may look like visit [www.cstdoula.com](http://www.cstdoula.com). The above information was provided with permission from Carol Gray who is a Cranial Sacral Therapist who resides in Oregon. Look below for local chiropractors who provide Cranial Sacral Therapy services.

### **Yusavage Family Chiropractic**

514 Burke Bypass Olyphant PA 18447

570-489-9300

Pure Rejuv Wellness Center

952 Bethany Turnpike Honesdale PA 18431

570-647-1500

### **Lingua Speech, Swallow, and Voice Services**

[www.linguallc.com](http://www.linguallc.com)

[Chelsea@linguaLLC.com](mailto:Chelsea@linguaLLC.com)

+1 (570) 413-0851

Lingua provides families support on their feeding journey from breastfeeding to starting solids. As a licensed speech therapist with years of experience in wellborn and NICU nurseries, owner of Lingua, Chelsea Zimmerman, holds pride in helping enhance the breastfeeding journey anyway she can with special attention to tethered oral tissue (tongue tie). Specific instruction is provided on massage therapy for your infant and how to best touch to grow a happy and healthy baby. Therapeutic intervention is also available for those needing improvement of latching and sucking, introduction of bottles, and starting the journey of table food.