

Feeding my baby

Reading this information sheet can help you learn about the ways a premature or sick baby can be fed. During the time your baby is in the neonatal nurseries he or she may be fed in different ways. How your baby is being fed depends on your baby's age and health.

When your baby is not being fed by mouth

Some babies are not able to eat because they:

- are premature
- are very sick
- are not digesting feedings well
- have a distended tummy
- have a blocked or immature bowel

If your baby is not able to eat, he or she will still be fed with special solutions through an intravenous line. These solutions are called **total parental nutrition**, or T.P.N. With T.P.N. your baby will get everything he or she needs to grow, such as protein, sugars, fats, vitamins and minerals.

When your baby is ready to eat

Signs that your baby is ready to eat are:

- your baby is having bowel movements
- your baby's tummy is soft
- your baby's health is stable

Your baby's first feeding can be breastmilk or formula. Sometimes a special powder called fortifier or Human Milk Fortifier with more protein, calories and minerals is added to your breastmilk, or a formula with extra calories may be fed to help your baby grow.

Tube feeding: when your baby cannot breast or bottle feed

Babies may not be able to breastfeed or bottle feed if they:

- need help breathing with a ventilator
- need oxygen by nasal prongs
- are very sick
- are unable to suck

When babies cannot breastfeed or bottle feed they are fed through a feeding tube. This may be called tube feeding or gavage feeding.

A feeding tube is a thin, plastic tube that is gently passed through your baby's mouth or nose and into the stomach. This tube does not pass through your baby's vocal cords, or voice box. A syringe containing breastmilk or formula is placed on the end of the feeding tube. The breastmilk or formula flows with gravity from the syringe into the baby's stomach. After the feeding, the tube is clamped shut.

At times, a baby may have pauses in his or her breathing called apnea, or a low heart rate when the feeding tube is put in. To prevent these problems from happening with each feeding, the feeding tube is left in place. This is called an indwelling feeding tube. To keep the tube in the right place it is taped to the baby's face.

The nurse will check that your baby is digesting feedings well. This is done right before the next feeding by checking how much and what type of fluid is left in your baby's stomach. A syringe is used to draw out any remaining fluid. Sometimes a small amount of milk or greenish fluid is found. This is called a residual. This may mean your baby is not digesting the feedings properly. Your baby may need to stop feedings for a short time, or be fed less breastmilk or formula at each feeding.

Helping your baby during tube feedings

During tube feedings offer your baby a soother to suck on. This helps your baby's sucking get stronger.

If your baby's health is stable and he or she does not need help breathing, you may by able to hold your baby during tube feedings. Plan to hold your baby for 10 to 15 minutes after the feeding. This helps your baby to settle after feeding and helps with less spitting up.

When your baby can breastfeed or bottle feed

Your premature baby may be able to start breastfeeding or bottle feeding at about 34 to 35 weeks gestation. By this time, your baby has grown and should be able to breathe, suck and swallow at the same time. At 32 weeks, it is possible that your premature baby may try breastfeeding once a day, **if his or her health is stable**.

At first, your baby may not be able to breastfeed or bottle feed at every feeding. Your baby is learning how to feed this way and may get tired easily. After 15 to 20 minutes of nursing or bottle feeding, the nurse will give your baby the rest of his or her feeding with a feeding tube.

Your baby's nurse and the Neonatal Lactation Consultants (LC's) or Occupational Therapists (OT) can help you and your baby learn to breastfeed or bottle feed. You can also get help from the doctors, the Neonatal Dietitian and the Nurse Practitioner.

There are several information sheets about breastfeeding and pumping breastmilk. Please ask your baby's nurse or LC for some of these sheets.

If you have any questions about your baby's feedings, please talk to your baby's nurse, doctor or dietitian.