

# **Breastfeeding your baby**

## **Information for women with diabetes**

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### **The benefits of breastfeeding**

Your breastmilk is the perfect food for your baby. Breastmilk helps your baby grow and develop in the best possible way. Breastmilk can protect your baby from health problems such as allergies and infections. Breastfeeding for at least 4 to 6 months may reduce your baby's risk of developing diabetes later in life.

### **Planning to breastfeed**

#### **During your pregnancy**

- Discuss your plans to breastfeed with your doctor or midwife, and your diabetes care team.
- Try to keep your blood glucose levels within a normal range during pregnancy and birth as this can help with breastfeeding.
- Find out what breastfeeding support services are available in your community.

#### **When your baby is born**

If your baby is born after 38 weeks of pregnancy and is well, you can start breastfeeding right away. Your baby can stay with you in the Birthing Suite and on Ward 4C.

Your baby will need care in one of our Neonatal Nurseries if you needed insulin during your pregnancy and:

- your baby is born before 38 weeks of pregnancy,
- your baby weighs more than 4000 gm, or
- your baby is not well.

Depending on your baby's health, he or she may be able to breastfeed soon after arriving in the Neonatal Nursery. If you cannot start breastfeeding right away, you can learn how to express your breastmilk for your baby.

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## Getting breastfeeding started

**If your baby stays with you in the Birthing Suite**, hold your baby against your skin to keep him or her warm. If your baby gets cold, his or her body will use blood glucose to create heat, causing the blood glucose level to drop. If you feel cold you may cover both of you with one blanket.

Try to breastfeed your baby within the first hour after birth. This time is important to:

- stimulate your breasts to start making milk
- get your baby to practice latching on to your breast
- help you bond with your baby

**If you have difficulty getting your baby to latch on, ask your nurse for help.**

Having diabetes may make your breastmilk take a little longer to “come in”. Your baby may need extra time to get breastfeeding going. If your baby does not latch on at first, try expressing a few drops of milk for him or her to lick from your breast. This first milk is called colostrum. It is thick and rich in nutrients, including glucose.

**If your baby comes to the ward with you**, keep your baby with you day and night. Being together helps you recognize the signs that your baby is ready to eat. Do not wait until he or she is crying. Feed your baby often. This means about every 2 to 3 hours around the clock. This may prevent your baby from having low blood sugar, which is common in babies of mothers with diabetes.

**If your baby needs care in the Neonatal Nursery**, we encourage you to come to the nursery as soon as you feel well enough. If you cannot start breastfeeding right away, ask your nurse to teach you how to use the hospital’s breast pump to express your breastmilk for your baby.

**Breastfeeding or pumping early and often during the first few days will help your milk come in and build up your supply of milk.**

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## Your baby's care

Even if your diabetes was well-controlled in pregnancy, your baby may have been exposed to higher than normal levels of blood glucose. Your baby's body responds by making more insulin. At birth, this extra insulin can cause a drop in your baby's blood glucose. Your baby's greatest risk for low blood glucose is during the first 12 hours after birth.

The nurses will check your baby's blood glucose levels often. When your baby is feeding well and has normal blood glucose levels, this testing may be stopped.

Most newborn babies adjust quickly. Blood glucose levels usually return to normal within 12 to 72 hours. However, some babies may need extra glucose. If your baby does need extra glucose, he or she may be given expressed breastmilk or formula by an alternate feeding method. Your nurse can give you more information and help you with this.

If your baby needs to go to one of the Neonatal Nurseries for closer observation, visit him or her as often as you can. **Come to the nursery at least every 2 to 3 hours to try breastfeeding and to hold your baby "skin-to-skin"**. If you are unable to visit your baby, continue to pump your breasts regularly during the day and night. Your nurse will show you how to collect and store your breastmilk for your baby.

If feedings do not keep your baby's blood glucose in the normal range, your baby may need an intravenous (IV) for extra glucose. You can continue to breastfeed when your baby has an IV. The IV will be removed when his or her blood glucose levels are in the normal range.

## Your care

After your baby is born, your blood glucose levels will be affected by the changes in your eating and sleeping patterns and the extra energy required for breastfeeding.

Test your blood glucose often and record the results. During breastfeeding you may find that you need less insulin. The insulin you take will not harm your baby. Try to keep your blood glucose levels within a normal range so that you can feel well during this important time of your life. It will help to get some rest in between feedings.

Your diabetes care team can review Eating Well with Canada's Food Guide and give you specific advice about your diet. Some breastfeeding mothers find it helpful to have healthy snacks before or during each breastfeeding. Remember to drink extra fluids if you are thirsty. It is best to have drinks without caffeine or alcohol.

## Questions?

If you have questions or would like more information about breastfeeding, you can speak with:

- your nurse, doctor or midwife
- your lactation consultant
- your diabetes care team