

My breastfeeding plan from hospital to home



This plan is for mothers who wish to give their baby only breastmilk. This is called exclusive breastfeeding.

Goals:

1. **Cue-based breastfeeding.** While in the hospital, work up to breastfeeding your baby at least 8 times a day.
2. Build and maintain a full milk supply.
3. Work towards exclusive breastfeeding.

Goal 1

Cue-based breastfeeding

If your baby is greater than 37 weeks and breastfeeding is progressing well, breastfeed whenever your baby shows signs of hunger. These signs are cues to breastfeed your baby.

If your baby is sleepy, you may need to wake them about every 3 hours to make sure they breastfeed at least 8 times a day. Ways of waking your baby are: changing your baby's diaper while talking to your baby, and taking your baby's temperature.

If your baby was born early, was sick or has other health problems, your baby may not be awake for every feed. If your baby is too sleepy to feed (no hunger cues), your nurse will feed your baby with the feeding tube. Try to be available at the hospital as much as possible to learn your baby's cues and begin breastfeeding.

Signs of hunger (cues to breastfeed):

- Waking up
- Moving mouth or licking
- Putting hands to mouth
- Rooting
- Crying (a late sign)

Tips for a sleepy baby

Use breast compression

- When breastfeeding, support your breast with your hand, with thumb and fingers in a “U” or “C” hold.
- Compress your breast when baby’s sucking is weak or baby has stopped sucking. Relax the hold every 5 to 10 seconds to relieve pressure on your skin.
- Rotate the position of your hand to drain milk from all areas of the breast.

Keep baby awake at the breast

- Try talking to your baby, massaging their body or under their jaw (while latched at the breast), sit them up to burp, or try the other breast.

Encourage your baby to suck using your breastmilk

- Use a syringe to put drops of warmed breast milk in the corner of your baby’s mouth, or use your hands to express a little milk at the tip of your nipple. This helps your baby to smell and taste your breastmilk.

Having trouble keeping baby latched?

Consider a nipple shield.

- Evidence shows that nipple shields can help preterm babies breastfeed more effectively. Try using one temporarily to help your baby get more milk (they are available for free while in hospital). Ask your nurse.
- Nipple shields are used most often until baby’s due date. When your baby is breastfeeding well for all feeds and gaining weight, you can start to wean off the shield.

Goal 2

Build and maintain a full milk supply

If your baby is unable to fully empty your breasts at least 8 times a day, you will need to **use a hospital-grade pump** about every 3 hours, ideally right after breastfeeding.

- Pump both breasts at the same time, for at least 20 minutes.
- Continue pumping until your milk supply is full. This usually takes about 2 weeks.

What is a full milk supply?

- ✓ By the end of the first week, getting at least 60 ml of breastmilk from both breasts, 8 times a day (a total about 500 ml a day).
- ✓ By week 2 or 3, getting a total of about 800 ml of breastmilk a day.
- ✓ Some mothers may take longer to achieve a full milk supply. Keep pumping!



Helpful tip!

Try pumping hands-free so you can rest your arms or use your hands to massage your breasts, text, drink or eat.

- Cut 2-inch slits or circles over the nipple areas of a sports bra or other bra.
- Slide each “horn” or flange of the pump kit through the slits, so that they fit over your nipples and are held on by the bra.

Another option is buying a specialty pumping bra.

Consider medication or herbs to increase your milk supply

- If your baby is getting a lot of formula after a week or any formula after 2 weeks, consider a medication or herbs to build up your milk supply.
- Talk with your family doctor about a medication called Domperidone to see if it is right for you. The starting dose of 30 mg a day may be all that you need. Some mothers may need to take more. Doctors who specialize in lactation may advise increasing to 80 to 90 mg a day. (For more information, search on-line for the “Consensus Statement on the Use of Domperidone and Lactation – Dr. Jack Newman”).
- Herbs have not been proven to increase breastmilk. However, some breastfeeding experts recommend herbs and some mothers find them helpful. Commonly used herbs are Fenugreek and Blessed Thistle. The lactation dose for these herbs is 3 capsules, 3 times a day. You can buy these herbs at health food stores or on Amazon.

Give supplements until you have a full milk supply

- Until your baby is breastfeeding well, at least 8 times a day and you have a full milk supply, your baby will be given supplements of breastmilk or formula. This will make sure your baby gets enough nutrition for healthy growth and development, until you are exclusively breastfeeding.
- Supplements can be given with a feeding tube, a tube at the breast or a bottle. Talk with the health care team about how you want to feed your baby. If you want to exclusively breastfeed let us know and we will guide and support you.

Goal 3 Work towards exclusive breastfeeding

If your baby is greater than 37 weeks and breastfeeding is progressing well:

- Gradually reduce pumping and increase breastfeeding until you are exclusively breastfeeding and baby is gaining weight well.
- Keep breastfeeding, following your baby's feeding cues, at least 8 times a day. This will keep your milk supply full and your baby growing well.
- If your baby is sleepy, see the tips on page 2.

If your baby was born early, was sick or has other health problems:

- Achieving full breastfeeding may take more time. If your baby is breathing well, exclusive breastfeeding will likely happen between 36 and 38 weeks. However, if you are combination feeding (breast/bottle feeding), it is likely to happen by your due date or shortly thereafter.
- If exclusive breastfeeding is your goal, tell the hospital staff. They will support you to achieve this goal.
- Even if you are fully breastfeeding on discharge, you may need to pump 2 to 3 times a day (if your baby is less than 10 lbs (4.5 kg)) to protect your milk supply.
- We recommend this because babies who were born preterm or sick can take what milk they need, but do not have the strength to completely empty your breasts. Pumping protects your full milk supply, while your baby grows.



**Please
note!**

Research shows that exclusive breastfeeding may not be achieved when babies are given bottles.

If bottles cannot be avoided:

- Try to breastfeed as much as possible at the hospital. This will increase your chance of future breastfeeding success.
- Chart and compare your progress each week, so you can see the improvements in breastfeeding.

Exclusive breastfeeding in the hospital may not be ideal for all families

- Exclusive breastfeeding may not be an option for you at the hospital if you have other children at home, or live far from the hospital.
- If you cannot be available for all feedings, you will need to combine breast and bottle feeding. Combination feeding at hospital means breastfeeding when you are available and then having the nurses bottle feed your baby when you are not.
- Many babies go home with a combination of breast and bottle feeding. Combination feeding at home is more challenging. It involves breastfeeding, followed by bottle feeding, followed by pumping, every 3 hours. This takes a lot of effort and patience.
- Breastfeeding should improve as long as you are working on breastfeeding before each bottle feed. Work with a lactation consultant in the community to help you with this transition. As you work towards your goal and breastfeeding improves, there will be less need for bottle feeding and pumping.

Combination feeding (breastfeeding plus bottle feeding) may be unavoidable at the hospital.

Make your plan manageable

- Try to limit breastfeeds and pumping to no more than 60 minutes every 3 hours (during the day and night).
- Consider putting your baby in a swing while you are pumping. Your baby will be content and your hands will be free to pump.
- Try to get 2 hours of sleep between feeds at night, and try to have a 2 hour nap during the day.
- To get more rest, consider limiting visitors at home for at least 2 weeks and ideally until your baby is fully breastfeeding.
- Let your partner, family and friends know your situation. Ask for help with meals, cleaning and laundry.
- Having a manageable plan is even more important with twins. Keep the same schedule (for feeding, pumping and rest) as a mother of one baby does, to make sure you don't get exhausted.

Bottle feeding breastmilk

- This may be an option if you have to go back to work early or if your baby gets so used to bottle feeding that they are unable to breastfeed.
- This is a better option than formula feeding, because your baby will get all the benefits of breastmilk.
- It isn't easy! You will need to bottle feed and pump 8 times a day (even at night). This takes a lot of effort and dedication.
- Because it is tiring to pump and bottle feed breastmilk as time goes on (especially at night), most mothers are only able to do this for a few months. If you stop pumping, then you will need to bottle feed formula.
- If you have a full milk supply, you may be able to pump less often. Discuss your options with a lactation consultant.

Tips to stay motivated

Remember the benefits of breastfeeding!

| Benefits for your baby | Benefits for you |
|--|---|
| <ul style="list-style-type: none"> • Breastfeeding helps keep your baby healthy. Breastmilk protects your baby from illness (colds, diarrhea, infections), allergies, health conditions (obesity, asthma, diabetes and heart disease) and Sudden Infant Death Syndrome (SIDS). • Breastfeeding helps your baby's development, in areas such as intelligence, behaviour and movement. Simply put, breastmilk builds a better brain and nervous system. • For babies who were in NICU, there is less chance of returning to hospital in the first year of life. • Your hungry baby never needs to wait. Breastmilk is always available at the perfect temperature. | <ul style="list-style-type: none"> • Nurturing hormones, released when breastmilk is made, help you to bond with your baby. • Breastmilk is FREE. Formula can cost \$140 to \$160 a month (up to \$2000 a year). • Breastfeeding can help with weight loss. • Breastfeeding protects you from health problems such as postpartum depression, cancer of the breast and ovaries, bone loss (osteoporosis), rheumatoid arthritis, high blood pressure and diabetes later in life. The longer you breastfeed, the lower your risk of developing these problems. • Breastfeeding is convenient. No need to clean, sterilize or cart around bottles. • Knowing breastfeeding is better for the environment. |

Keep your plan flexible!

Your breastfeeding plan may change based on:

- your baby's needs
- advice from your family doctor or lactation consultant
- your experience and preferences

Keep the big picture in mind!



Right now, your breastfeeding plan may take a lot of your time and seem difficult.

However, this will be a short time compared to the many months and years of breastfeeding ahead of you.

Keep an eye on the 'big picture' – easy breastfeeding for as long as you and baby wish!

Where to find help or more information

- Your family doctor, lactation consultant and hospital staff can provide help, support and refer you to resources.
- A lactation consultant can help you to protect breastfeeding and your milk supply, while ensuring your baby is growing well. To get help and support from a lactation consultant in your area, call your local Public Health Department.



Be proud of yourself for providing the best food for your baby.

All parts of this breastfeeding plan take a lot of dedication!

How will I know if my baby is growing well?

Gaining weight is an important sign that your baby is healthy and growing well.

Your baby's weight will be measured:

- at the hospital
- at 'well-baby' visits with your nurse practitioner, doctor or pediatrician
- at breastfeeding clinics

Other signs of good health are:

- ✓ Passing urine. Check how many wet diapers your baby has each day, and how wet they are.
- ✓ Passing bowel movements. Check how many dirty diapers your baby has each day, and what the bowel movements look like.

Use this chart from Best Start as your guide:

| GUIDELINES FOR NURSING MOTHERS | | | | | | | | | | |
|--|--|---|---|---|---|---|---|---|---------|--|
| Your Baby's Age | 1 WEEK | | | | | | | 2 WEEKS | 3 WEEKS | |
| | 1 DAY | 2 DAYS | 3 DAYS | 4 DAYS | 5 DAYS | 6 DAYS | 7 DAYS | | | |
| How Often Should You Breastfeed? Per day, on average over 24 hours |  | | | | | | |  | | |
| At least 8 feeds per day (every 1 to 3 hours). Your baby is sucking strongly, slowly, steadily and swallowing often. | | | | | | | | | | |
| Your Baby's Tummy Size |  | |  | |  | |  | | | |
| Size of a cherry Size of a walnut Size of an apricot Size of an egg | | | | | | | | | | |
| Wet Diapers: How Many, How Wet Per day, on average over 24 hours |  |  | |  | |  | |  | | |
| At least 1 WET At least 2 WET At least 3 WET At least 4 WET At least 6 HEAVY WET WITH PALE YELLOW OR CLEAR URINE | | | | | | | | | | |
| Soiled Diapers: Number and Colour of Stools Per day, on average over 24 hours |  | |  | | |  | | | | |
| At least 1 to 2 BLACK OR DARK GREEN At least 3 BROWN, GREEN, OR YELLOW At least 3 large, soft and seedy YELLOW | | | | | | | | | | |
| Your Baby's Weight | Babies lose an average of 7% of their birth weight in the first 3 days after birth. | | | | From Day 4 onward your baby should gain 20 to 35g per day (½ to 1½ oz) and regain his or her birth weight by 10 to 14 days. | | | | | |
| Other Signs | Your baby should have a strong cry, move actively and wake easily. Your breasts feel softer and less full after breastfeeding. | | | | | | | | | |
|  <p>Best milk is all the food a baby needs for the first six months – At six months of age begin introducing solid foods while continuing to breastfeed until age two or older. (WHO, UNICEF, Canadian Pediatric Society)</p> <p>If you need help ask your doctor, nurse, or midwife. To find the health department nearest you, call INFO line: 1-800-268-1154. For peer breastfeeding support call La Leche League Canada Referral Service 1-800-665-4324.</p> <p>03/2009</p> | | | | | | | | | | |

To download this chart, go to: www.beststart.org/resources/breastfeeding/pdf/magneng.pdf