



Breastfeeding

Nutrition

Breastfeeding is a natural way to feed your baby and has short and long term benefits for you both.

All new mothers need support to learn to breastfeed and to establish a happy, breastfeeding partnership.

Preparation and early days

No special preparation is needed to breastfeed, but learning about breastfeeding can help with your confidence. Almost all women are able to produce breastmilk, but breastfeeding is not always easy and needs patience and time to learn. Involve your partner and other family members in breastfeeding decisions. The support of family members and particularly fathers is important and can make a big difference in helping you to breastfeed your baby. Remember that any breastmilk is better than none.

Breast milk is the best food and drink for your newborn baby and all your baby needs for around the first six months.

Breast milk is made in mothers' breasts after your baby is born. Only when the breast milk is removed from the breast does the mothers' body get the signal to make more. In other words, the more breast milk your baby drinks, the more breast milk is made.

Nutrition and breastfeeding

Breast milk is a living fluid containing antibodies to protect your baby from infection and disease, factors to help with gut and brain development and is easy to digest and absorb. Your own breastmilk is uniquely matched to your baby's needs so your baby doesn't need any other foods or drinks for the first 6 months. At around 6 months, your baby needs extra nutrition provided by foods, but breast milk continues to be an important part of your baby's life until 12 months and into the second year of life if you both desire.

How often should my baby breastfeed?

Breastfeed whenever your baby seems hungry, not according to the clock. As a guide, young babies usually feed between 8-12 times each day (every 2-4 hours). Initially feeds can take up to an hour, but both the number and length of feeds reduce as your baby grows and the milk volume at each feed increases.

Encourage your baby to finish one side, before offering the second side. There is no need to time your baby's feeds; your baby will self regulate and take the amount they need.

You can be reassured your baby is getting enough breastmilk when they:

- have several wet nappies (5 disposable/6-8 cloth) each day
- are growing well; weight and length are generally tracking along a curve on the growth chart
- are generally alert and content

Giving formula interferes with your breast milk supply. Offering bottles or a dummy can also interfere with a baby's desire to feed at the breast, especially in the early days.

Sponsored by:



Department of Education and
Early Childhood Development

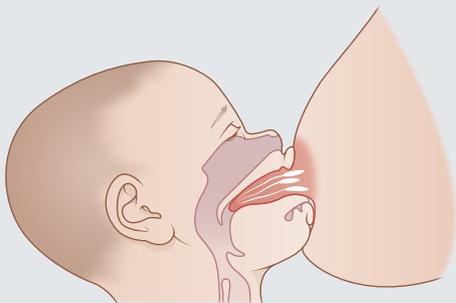
Breastfeeding

Attachment and Positioning

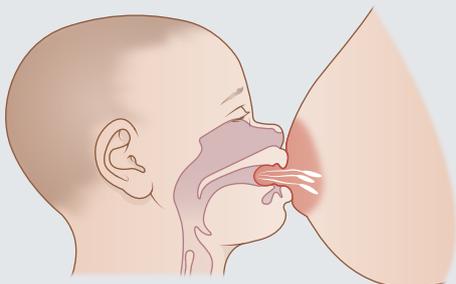
Good position and attachment are important for breastfeeding. Check that your baby has a wide open mouth and a large amount of breast tissue in the mouth, (not just the nipple). If your baby isn't attached well, and just sucks the nipple, feeding will be painful, your nipples can get damaged, and your breasts may not make enough milk.

In the early days, support baby behind the shoulders and under the bottom, let them move towards your nipple. Once baby is just below your nipple, they will rest their chin on the lower part of your breast, reach up with an open mouth and attach. Support baby behind the shoulders and bring their bottom closer to your body. If you attach the baby yourself, hold baby behind their back and shoulders, so their chest touches your chest. Baby's nose should be in line with your nipple. Brush your nipple from their nose to lips to encourage them to open their mouth wide. When baby's mouth is wide open, bring baby to your breast. Aim the nipple at the roof of their mouth.

After attaching your baby, they will start to suck quickly with shallow jaw movements until the milk is 'let down'. After this there will be deep and regular movements of their jaw; you will hear swallowing of milk. It's normal to feel a 'stretching sensation' when baby starts sucking. If it hurts, it could mean that baby isn't correctly attached.



Correct attachment The baby has a large mouthful of breast tissue. The mother supports the baby across the shoulders and neck, allowing some head movement (not shown).



Incorrect attachment Predominately the nipple is in the mouth, this can result in sore nipples.

Maintaining breastfeeding

Breastfeed whenever your baby seems hungry. This makes sure that your body continues to make enough milk to meet your baby's needs. Babies may also breastfeed for comfort, when tired, or upset.

Night feeds are important for many months to make sure your supply is maintained.

If your baby seems more hungry than usual, increase the number of breastfeeds you offer, or the length of each feed. Make sure the baby 'drains' the breast to get the fatty 'hind' milk which is more satisfying. Some women may believe that giving infant formula may help their baby sleep better. This is rarely true; introducing infant formula or solid foods before 6 months will reduce the amount of breastmilk you produce. If you are concerned about your baby's growth or feeding, always seek professional advice.

You can breastfeed anywhere in Australia, you don't need to ask. If you prefer, many shops have baby care rooms with safe, quiet and private places for you and baby. Once you are more confident you can continue breastfeeding anywhere that you feel comfortable, anytime. Try dressing in clothing that makes it easier to breastfeed and don't let baby get too hungry in-between for a relaxed feed.

At around 6 months

To meet baby's increased nutrition needs, start to introduce solids in addition to breastfeeding at around 6 months. By this age, most babies are also showing signs that they are developmentally ready for solid food. These signs include being able to sit with support, good head control, showing interest in others eating nearby, reaching out to grab food or spoons, and responding with an open mouth when food is offered. Many babies eat very little to begin with and are just learning to eat food. There is no point in forcing or coaxing. Watch and respond to your babies cues. Food that is initially rejected can be offered again a few days later.

This is also the same time to reduce overnight feeds if you wish. Babies are all different; some are ready to have solids earlier than others. Regardless of the age that solid foods are commenced breastmilk remains the main source of nutrition in the first year of life.

Breastfeeding for twelve months and beyond

In Australia, mothers are encouraged to continue breastfeeding baby until at least 12 months of age and beyond as you both desire. Benefits for your baby and you will continue for as long as breastfeeding is maintained.

Benefits of breastfeeding

Breastfeeding is the most natural way to feed, and baby will receive many benefits, including:

- breast milk has an ever changing blend of the right nutrients, in the right amounts, each feed and every day
- breast milk contains antibodies that fight infections and other factors that promote brain and gut development
- breast fed infants are less likely to develop ear infections, respiratory infections, allergies, asthma, type 1 diabetes and obesity
- the sucking action helps to develop your baby's mouth, teeth and jaw, aiding long term physical development
- helping your baby to recognise when they are hungry or full

Breastfeeding also has benefits for mother's health, saves money and time and protects the environment, without the need for tins, packaging, fuel or energy resources.

Important considerations while breastfeeding

- limit alcohol as this passes through the breast milk to baby. If you drink alcohol wait up to two hours before breastfeeding your baby
- drinks with caffeine such as tea, coffee, cola, and energy drinks can cause your baby to become irritable if you have large amounts
- smoking is harmful to your baby's health
- a small number of medications can pass to your baby via breast milk. If you need to take medication, ask your doctor to prescribe medication you can take while breastfeeding. Avoid illicit drugs.
- If taking non prescribed medication such as vitamins, minerals and herbal preparations check with a health professional before breastfeeding your baby
- breastfed babies whose mothers have dark skin, or are exposed to little direct sunlight including cultures where mothers are veiled, may need a vitamin D supplement to prevent rickets. Iodine supplements may also be recommended for breastfeeding mothers

Breastfeeding in specific situations

In Australia, there are very few situations in which breastfeeding is not recommended. Babies with rare metabolic conditions and women who are HIV positive are advised not to breastfeed.

Low birth weight babies have higher needs for nutrition such as protein and minerals and may need supplements to breast milk.

Dealing with problems

Too much milk

This can be more common in the early days because the breasts have the potential to feed more than one baby. As your baby settles into a feeding pattern, the supply will match their needs.

Expressing a small amount of milk at the beginning or end of a feed may help to ease the discomfort.

Not enough milk

Many mothers are concerned they are not making enough breast milk. Low supply is usually temporary, but can become an ongoing problem unless addressed. Strategies to increase breastmilk supply include:

- re-check positioning and attachment
- feed more frequently – offer the breast between usual feeds
- offer the breast for comfort
- allow the baby to finish the first breast before offering the second
- alternate which breast is offered first at a feed, feed from each breast more than once each feed, express between feeds

Mastitis

Mastitis is an inflammation of the breast and causes pain, swelling, redness and sometimes fever. It is caused by a combination of nipple damage and poor draining of the breast causing a blocked milk duct. Treatment includes frequent and effective milk removal (i.e. more frequent feeds or expressing). Check the baby's positioning and attachment and feed more frequently. A warm cloth applied to the breast before and during a feed can be helpful.

Other practicalities

Expressing breastmilk can help with some breastfeeding problems and allows continued supply of breastmilk if the mother cannot be present to breastfeed. Other reasons to express breast milk include:

- your baby is sick or preterm
- you are, or will be temporarily separated from your baby
- you are returning to work or study
- your milk supply needs to be increased
- your breasts are uncomfortably full

Expressed breast milk can be stored in the refrigerator for up to 3-4 days, and in a freezer for 3 months. Milk should not be stored on the shelf in the door of the refrigerator or freezer due to fluctuating temperatures.

Getting help with breastfeeding problems

- **The Maternal and Child Health Line** is available 24 hours a day, on 13baby or 132229. Parents can talk to a maternal and child health nurse about breastfeeding or other concerns when the local maternal and child health nurse is not available
- **Mum to Mum** – a 24 hour breastfeeding helpline, available on 1800 mum 2 mum or 1800 686 2 686, where parents can talk to an Australian Association Breastfeeding counsellor who can help encourage and support breastfeeding
- your **General Practitioner**
- the after hours **GP helpline** is available nationally by calling healthdirect Australia on 1800 022 222
- you can also access the after hours GP helpline through **13HEALTH** and **NURSE-ON-CALL** respectively
- **The Royal Women's Hospital Medicines Information Centre:**
Phone (03) 8345 3190
www.thewomens.org.au/AskaPharmacist
- **Monash Medical Centre Drug information Centre:**
Phone (03) 9594 2361

Helpful websites

- www.rch.org.au
- www.raisingchildren.net.au
- www.breastfeeding.asn.au
- www.eatforhealth.gov.au

Nutrition

The Royal Children's Hospital Melbourne
50 Flemington Road Parkville, Victoria 3052 Australia
TELEPHONE +61 3 9345 9300
www.rch.org.au/nutrition

2013 Breastfeeding tip sheet
Previously funded by The Department of Health, Victoria

ERC130885

The Children's

Excellence in
clinical care,
research and
education

