

# Breastfeeding

your ill or premature baby



# Breastfeeding your ill or premature baby

An ill or very tiny baby may not be able to breastfeed at first.

However, it is important that you try to feed your child breast milk at this time, so that your baby benefits from the antibodies, hormones, enzymes and growth factors contained in it. Breast milk is also easy to digest and breastfeeding will help you feel closer to your baby.

Breast milk is important because your baby can benefit from:

- **reduced risk of infections;**
- **fewer digestive problems or serious gut problems;**
- **better mental development;**
- **lower risk of developing diabetes;**
- **reduced risk of allergies where a family history exists.**

Photo 1: You can still bond with your baby even though he or she is ill



## GETTING STARTED

If your baby is not ready to feed directly from the breast, it is important that you begin to express milk as soon as possible after the birth. This will help your milk production and ensure it is established for when your baby is able to breastfeed.

## EXPRESSING MILK

To reduce the risk of infection, always wash your hands with soap and water and wash your breasts, with water only, before expressing. Dry with disposable paper towels, kitchen roll or a clean towel. Take a daily bath or shower too.

Photo 2: Massage your breast before you try to express

Relax and allow yourself enough time to express. It may help to have a picture or a piece of your baby's clothing nearby, to help you think about your baby.

Massage your breasts before you try to express, to help the milk flow (photos 2 and 3). At first you may only get a few drops of colostrum but if you persevere you will produce more. Remember the more often you express, the more milk you will produce.



## MAINTAINING A GOOD MILK SUPPLY

When expressing your milk, try to match your newborn baby's feeding pattern. This means expressing 6-8 times a day, including once at night. At first it may help to express from each breast for 3-5 minutes and gradually increase the time to 10 minutes for each breast or until the flow stops. Or try switching from breast to breast for up to a maximum of 20 minutes in total. At times your supply may lessen. Don't panic as this will be temporary. Your supply will return if you continue expressing regularly.



Photo 3: Massaging your breasts will improve your milk supply

## USING A BREASTPUMP

Some mothers find they like to express using a breastpump. It's important to wash and sterilise your breastpump collection kit each time it is used. Make sure you understand how to clean and sterilise your pump before going home from hospital. Ask your midwife or Public Health Nurse if you are unsure. It is advised to use a separate kit for each mother.



Photo 4: You may prefer to use an electric breastpump

## STERILISING THE EQUIPMENT

- After each use rinse in cold water then wash carefully in warm soapy water using a bottle brush.
- Rinse in cold water and dry with a disposable paper towel or kitchen roll.
- Before your next expression, steam sterilise or immerse in cold chemical sterilising solution for at least 30 minutes.

## EXPRESSING MILK BY HAND

Some mothers prefer to express their milk by hand. They feel it's more natural and they are more in control. No special equipment is needed and it can help to get baby latched on when you begin breastfeeding.

1. Wash your hands and breasts. Make yourself comfortable and begin by massaging your breast using gentle movements as shown in photos 2 and 3.
2. Hold a small sterilised container near the breast e.g. small bowl or plastic jug, or the containers provided by the unit.
3. Place your thumb and first finger opposite each other on the edge of the darkened area around the nipple (areola).
4. Gently press your thumb and finger back towards your chest wall as you press and release the breast tissue. Avoid rubbing or sliding along the nipple as this may cause damage to the skin.
5. At first only a few drops will appear, but continue pressing and releasing, as in a "rolling action" and your milk will start to flow. Rotate your fingers around the areola to release milk from all the segments of the breast.
6. After a few minutes of expressing the flow will stop. Change to the other breast and continue expressing. Express from alternate breasts until the flow drips very slowly or stops.



Photo 5: Position your finger and thumb at the edge of the areola

## STORING BREAST MILK

Collect your breast milk in a sterile plastic or glass container. Expressed milk should be placed in the main compartment of the refrigerator away from other foods and preferably not in the fridge door. Your fresh breast milk can be safely stored in a refrigerator at 2-4°C for 48 hours.

Each container must be carefully labelled with your baby's name and the date and time of expression. Appropriate labels will be provided by the hospital. Breast milk storage bags are not recommended for premature or ill babies.

## **FREEZING AND THAWING**

Fresh breast milk is best but if it is not going to be used within 48 hours, this expressed milk can be frozen in a freezer at  $-18^{\circ}\text{C}$  for 3 months. It is safest to thaw milk slowly in the refrigerator. If you need to defrost it quickly, stand the container in a jug of tepid water. Once defrosted keep refrigerated and use within 12 hours. NEVER defrost breast milk in a microwave and NEVER refreeze breast milk.

## **TRANSPORTING BREAST MILK**

When you are home from hospital, fresh breast milk should be brought to your baby soon after expressing it – ideally every day. If you cannot visit daily then freeze your milk if it will not be used within 48 hours. When bringing your milk to the hospital carry it in a small cool bag with ice packs.

## **ESTABLISHING BREASTFEEDING**

The neonatal unit staff will encourage you to have skin-to-skin contact (known as kangaroo care) and to try breastfeeding when your baby seems ready. At first some babies may only open their mouths to latch on but not suck. Expressing a few drops of milk by hand onto your baby's lips can help encourage your child to latch on. Keep trying once or twice every day and eventually, with help, your baby will learn.

## **CUP FEEDING**

Where possible it is best to avoid bottle feeding while your baby is learning to breastfeed. Cup feeding can be a good alternative at this time. Your baby should be held in an upright position while being fed using a special small plastic cup. Gradually fewer cup feeds will be required until the baby is able to breastfeed at every feed.

Photo 6: Skin-to-skin contact will benefit mum and baby



## LOOKING AFTER BABY AND YOURSELF

If you are taking any medication please check with your midwife, Dr./G.P. or Public Health Nurse that it is suitable to take while breastfeeding.

Caring for a baby who is still in hospital can be a stressful, tiring time, so try to get enough rest and remember to eat and drink regularly. Be conscious of the foods you eat, as some babies are more sensitive to certain foods than others.

## BRINGING BABY HOME

You will probably be both excited and nervous about taking your baby home. It is normal to worry about whether your baby is getting enough milk. The hospital staff will teach you how to recognise a good breastfeed by showing you how to correctly position and attach your baby. A baby who is feeding properly will have approximately 6 wet nappies daily and normal yellow-mustard coloured stools.

Once you're home, have your baby weighed regularly. Your Public Health Nurse will do this in your own home or at your local baby clinic / health centre.

## LOCAL CONTACT NUMBERS

**If you need support and information about breastfeeding after your baby is discharged from hospital, you can contact:**

- the unit from which your baby was discharged;
- your midwife;
- your Public Health Nurse;
- local General Practitioner (G.P) / Practice Nurse
- local breastfeeding support groups;
- La Lèche League (see local phone book);
- Cuidiu I.C.T. Breastfeeding Counsellors (see local phone book).
- local Certified Lactation Consultant. (I.B.C.L.C.)

Photo 7: Cup feeding is a useful alternative when breastfeeding is not possible





**“Breastfeeding - a gift for life”.**



Health Promotion Unit  
Department of Health and Children.  
Hawkins House, Dublin 2.  
Tel: 01-6354000 Fax: 01-6354001  
Website: [www.doh.ie](http://www.doh.ie)  
[www.healthpromotion.ie](http://www.healthpromotion.ie)

<b>Your Local Breastfeeding Support Contact Numbers</b>

Original resource prepared on behalf of the Northern Ireland Breastfeeding Strategy Group, and designed and produced by the Health Promotion Agency for Northern Ireland on behalf of the Department of Health, Social Services and Public Safety.