

مدينه الملك فهد الطبيه King Fahad Medical City



Brestfeeding

Mother's Diet:

No special food or diets are needed for breastfeeding, but these are some helpful tips:

- Choose a variety of healthy foods for your meals and snacks each day. Eating healthy will help you and your baby feel well.
- Eat 4 to 5 servings of dairy products each day.
 A calcium supplement can help you get enough calcium.
- Drink water or fruit juices when you are thirsty.
- Take your prenatal vitamins as directed by your doctor.
- Limit caffeine and artificial sweeteners in your diet.



It takes about 4 to 6 hours for the food you eat to show up in your breast milk.

- If you have a family history of an allergy or your baby seems fussy after you eat a certain food, avoid that food and see if your baby feels better.
- Some babies have a hard time when a mother eats dairy products or vegetables such as broccoli, beans, onions or peppers. If the problem persists, talk to your doctor.
- Avoid weight loss diets. To lose weight, walk more, limit high calorie foods and continued breastfeeding.

Colostrum:

The first milk your body makes, is very good for your baby. Over the next few days, your breasts will feel fuller, and you will have more milk. Your milk supply will depend on how much milk and how often your baby takes from the breast. The more milk your baby takes; the more milk your breasts will make.

The nurses will help you and your baby learn how to breastfeed. Relax and give yourself time to learn.



- Your baby may be very sleepy at the first few days.
- Your baby's stomach is small so your baby will need to feed often.
- You may feel increased thirst while nursing, drowsiness during breastfeeding and mild uterine contractions while breastfeeding the first few days.
- Sucking from a bottle is a different mouth action. Bottle sucking may interfere with the baby's nursing at the breast. You can pump your breast milk, feed your baby the breast milk through the cup or freeze the breast milk in a closed container for later use.

Feeding Cues:

Your baby will give you signs of hunger called feeding cues. Your baby's feeding cues may include:

- Hands to mouth
- Licking of lips
- Moving of arms and legs
- Turning the head towards your body
- Sounds
- Crying
- Clenched fists

Try to begin feeding your baby before he or she becomes too upset.



How is my baby doing with breastfeeding?

Watch for signs that your baby is latched on to your breast well and getting milk and signs may include:

- A fast, shallow motion in the cheeks as your baby first latches on that changes to a deep, slow, rhythmic motion.
- Motion near your baby's ear and temple as your baby's lower jaw moves up and down.
- Seeing, hearing, or feeling your baby swallowing.
- Feeling a tingling sensation in the breast.

Is my baby getting enough milk?

If your baby is getting enough milk, your breasts will be full with milk and soft after feedings and refill between feedings, your baby will:

- Have 6 or more wet diapers in a 24-hour period
- Sleep between feedings
- Have more than 2 bowel movements each day
- Gain weight

A healthy, full term baby who is nursing well does not need extra water or formula. Talk to your baby's doctor, nurse or your lactation specialist if you do not think that your baby is getting enough milk.

How often will my baby feed?

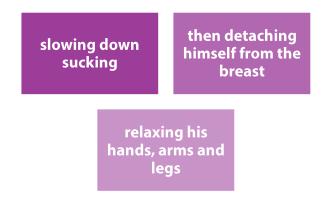
Feedings are timed from the start of one feeding to the start of the next. At first, try to feed your baby on demand every 2 to 3 hours during the day and evening. If your baby gives feeding cues, feed your baby. Your baby may want several feedings very close together.

Babies sleep are sometimes disturbed by dreams, hunger or a busy day. Expect that your baby will wake at the night and may need to be fed.

Babies have growth spurts in their first 6 months and will nurse more often during them. By feeding more often, your body will make more milk to get through the growth spurts. These spurts often last 3 to 5 days.

How long will my baby feed?

Feed your baby until he shows signs that he is full such as:



If you stop before your baby is done, your baby may not get the high fat milk. This is the milk that is best for growth. Allow your baby to completely finish feeding on the first breast. This may take 10 to 25 minutes. Alternate the breast you begin with at each feeding.

Waking the Sleeping baby:

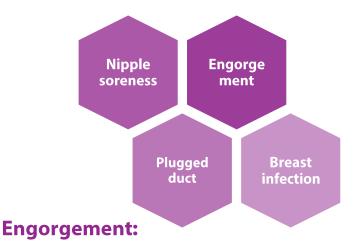
If your baby is in a deep sleep, do not wake your baby for a feeding. If your baby is asleep but has some body motions such as eye motion under the lid, active mouth and tongue motion, or sucking in sleep, this is the best time to wake your baby for a feeding.

Avoid startling movements. Wake the baby gently by moving your baby or you can change your baby's diaper.

After 15 minutes if your baby still did not show interest in breastfeeding, try an hour later.

BREAST FEEDING PROBLEMS

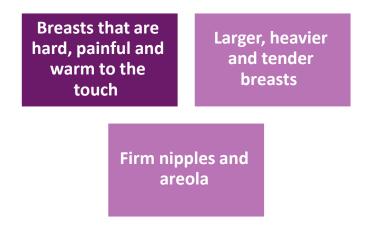
Breastfeeding problems are common, but they last a short time. These tips may help. If you find that the problems persist, call your doctor, nurse or lactation specialist, such as:



Is when the breasts become full, firm, tender and sometimes painful as your breast starts to produce milk. This often occurs 3 to 5 days after delivery.

Signs of engorgement often last 24 to 48 hours.

Signs include:



Ways to Prevent Engorgement:

• Feed your baby at least 8 to 12 times each day on demand at anytime.

• Wear a support bra 24 hours a day while your breasts are heavy. Use a sport or comfort style bra without under wires. Some mothers find more comfort without a bra.

If your breasts become engorged:

- Place a clean, hot, damp cloth over each breast for 3 to 5 minutes before nursing or get into a warm shower and let very warm water flow over your shoulders. Heating the breasts will help your milk flow easily to your baby.
- After heating the breasts, massage them in a circular motion towards the areola and the nipple, to soften the areola so that baby can easily attach.
- Breastfeed right away. Gently massage your breasts while nursing. If the breasts are still painful, full and swollen after a breastfeeding, or refill within a half hour after feeding, you may pump to soften the breasts.

Nipple Soreness:

Nipple soreness often occurs when the baby is not attached well to the breast or positioned correctly. Make sure your baby's jaws are deeply over your areola and about 1/2 inch behind the base of your nipple. Your nipple should be rounded and erect after the baby detaches.

Ways to Prevent Nipple Soreness:

- If you feel pinching, rubbing or biting pain during the feeding, check the baby's position and attachment.
- Air-dry your nipples by leaving your bra flaps down for a couple of minutes after a feeding.
- Express a small amount of colostrum or milk and spread it around the nipple and areola after air-drying.

- Avoid the use of soap and extra water on the breast.
- Clean your breasts by allowing water to flow over them when showering.

If You Have Nipple Soreness:

- Feed your baby more often for shorter periods of time.
- Do not allow your baby to become too hungry.
- Do not use an artificial nipple shield over the breast for feeding. They can cause damage to your nipple and interfere with milk flow.
- Use a product to heal cracked or open areas.
- Begin feeding on the least sore nipple. Be sure to break suction carefully by sliding your finger inside your baby's mouth.
- If it remains painful when your baby first latches on, remove your baby and try again.

Plugged Duct:

Is a tender or painful lump in the breast. If left untreated, it may lead to an infection. Plugs often occur from changes in the baby's feeding pattern or pressure on the breast.

Check your breast for pressure points that occur from a bra that is too tight or from bunched clothing on the breast.

If you have Plugged Duct:

- Apply heated and moist towel to the breast 15 to 20 minutes before each feeding.
- Massage the breast from the area behind the discomfort toward the nipple.
- Change positions lining-up the baby's chin and jaw toward the plug.

• Let the baby nurse first on the affected breast. The stronger suck will help relieve the plug.

Breast Infection:

A breast infection occurs from a blocked duct or from bacteria that has entered the breast, often through a cracked nipple. Even though the breast tissue is inflamed, the baby will not become ill from feeding on the infected breast.

Signs of breast infection may include:

- A headache, aching joints, fever or chills
- A hard, red and painful breast
- A fussy or unwilling to nurse baby when using the infected breast

Call your doctor right away if you think you may have a breast infection.

• Your doctor may order medicine to treat the infection. Do not stop taking your medicine, even if you feel better, without first talking to your doctor.

Mother-friendly care:

To support, protect and promote mother friendly care we:

- Offer all birthing mothers:
- Access to a labor/birth support person of her choice, including her husband or a female relative.

- The labor/birth support person is made welcome and encouraged to provide the support the mother wants.
- Access to professional midwifery care.
- Provide culturally competent care.
- Provide the birthing woman with the freedom to walk, move about, and assume the positions of her choice during labor and birth (unless restriction is specifically required to correct a complication).
- Allow the birthing woman to drink and eat light foods during labor, if desired.
- Discourage clinical intervention where labor is progressing normally and the woman and baby are well.
- Encourage women to consider the use of nondrug methods of pain relief unless pain

medication is necessary because of complications, respecting the personal preferences of the women.

- Encourage all mothers, families to touch, hold, breastfeed, and care for their babies.

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