

STOCKPORT INFANT FEEDING TEAM GUIDE TO BREASTFEEDING



CONGRATULATIONS ON THE BIRTH OF YOUR BABY

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Start well Stockport

Skin to skin Care You And Your Baby After Birth

However you plan to feed your baby, skin to skin after birth is a really good way for you to start to get to know each other.

It's not just for the first few hours though – whether you choose to breast or bottle feed, skin to skin has important functions for parent and baby throughout baby's first year and beyond.

Important for Mother

- Regulates a mother's heartbeat and breathing
- Develops the relationship between mother and baby and increases a mother's resilience to cope with the challenges the early days can bring.
- Encourages the release of hormones related to breastmilk supply and breastfeeding.
- It has also been found to have some pain-relieving properties for mother too, as she focuses on her baby held close to her face.



Important for Dad and other family members

- Skin to skin is good for other family members and baby too – calming them both, promoting bonding and giving other family members a really good way of comforting and soothing baby whilst mother rests.
- Amazingly, skin to skin with people other than mother can still stimulate a baby's natural urge to feed, whether breast or bottle fed.

Important for baby

Skin to skin – i.e. baby stripped down to nappy and held against mum or dad's bare chest, has been found to be very important for baby in:

- Regulating their heartbeat - calming them down and soothing them.
- Regulating their temperature – skin to skin is an excellent way of keeping a baby nice and warm.
- Regulating their breathing - again calming and settling them.
- Encouraging feeding – skin to skin stimulates a baby's natural urge to feed, whether breast or bottle fed
- Feeling safe, secure and close to their parent – with the smells, sounds and sensations they're familiar with.
- Reducing stress – releasing calming hormones and comforting them when they're upset.
- Being contented – a baby held and cuddled often tends to be more settled and less "clingy", rather than becoming "spoilt" as some people fear.

Infant Feeding and Relationships Helping Your Baby Grow and Develop



Responding to your baby's need for food and comfort will not only support their brain development, but will also help them feel secure.

This can help them to settle and reduce their crying too.

- New babies have a strong need to be close to their parents, as this helps them to feel secure and loved
- When babies feel secure they release a hormone called **oxytocin**, which helps them to be happy babies, and also helps their brain to grow and develop.
- Babies don't become spoilt or demanding if they are given too much attention.
- Holding, smiling and talking to your baby also releases **oxytocin** in you, which helps you to feel calm and happy.
- Breastfeeding provides everything your baby needs in terms of nutrition, protection and comfort. The hormones that make your milk are also the hormones that help you form a loving bond with your baby.
- **Breastfeeding:** **Oxytocin** levels are high during breastfeeding, helping your baby's brain to grow
- **Bottle Feeding:** If you are bottle feeding you can help raise **oxytocin** levels by doing things such as holding baby close, looking into their eyes, talking to them and spending time in skin to skin contact.



BREASTFEEDING YOUR BABY

The infant feeding team are available to help support you to breastfeed your baby. We are available for advice and feeding assessment appointments in the community.

You can contact us on the Stockport Breastfeeding Helpline
Mobile: 07767 870506

You can also find our short video clips on the Startwell Stockport website or our facebook page
www.startwellstockport.co.uk



Stockport Infant Feeding Team

We will always use whatever language, name, pronouns or terminology a family feel most comfortable with, as we recognise the importance of providing inclusive, respectful information, care and support to all pregnant women, pregnant people, mothers, parents and families.

The terms 'mother' 'woman' and 'breastfeeding' are used within this leaflet. Individual parents and families may use different words and we respect their chosen terminology.

Breastfeeding Peer Support

Breastfeeding peer supporters are special mums who have decided to give up their spare time to volunteer for us. Peer supporters are local mums who have breastfed their own babies. They have completed an extensive breastfeeding course to become volunteers.

While you are in hospital we have breastfeeding peer supporters available on the wards to help support you with breastfeeding your baby and hand expressing. If you would like a peer supporter to spend some with you time, just ask a member of staff on the ward.

Once you are home peer supporters can also support you at the drop-in session at John Lewis Cheadle.



Breastfeeding Peer support session

Tuesdays
9.30am - 11.00am
Term time only

John Lewis Cheadle
Sk8 3BZ

Drop-in session
No need to book

Come and meet members of the breastfeeding peer support team.

- Friendly, informal session.
- Meet other families and swap tips and ideas.
- Have your questions or queries answered.
- Gain confidence in feeding out and about.

For more information – or to book a 1-1 appointment with the Infant Feeding team if you have specific feeding concerns – please call the infant feeding team on **07767870506**

Breastfeeding Directory

There are a number of organisations and support groups that provide excellent support for breastfeeding. Evidence suggests that providing good support networks for breastfeeding has a positive impact on a mother's ability to overcome challenges and continue to breastfeed.

Other useful links:

NHS Choices: www.nhs.uk/aboutNHSchoices

The Breastfeeding Network: www.breastfeedingnetwork.org.uk

National Breastfeeding Helpline: www.nationalbreastfeedinghelpline.org.uk

Association of Breastfeeding Mothers: www.abm.me.uk

La Leche League: www.laleche.org.uk

Baby Friendly: www.unicef.org.uk/babyfriendly

Twins Trust: www.twinstrust.org

Birth to Five: www.birthtofive.org.uk

First steps nutrition trust: www.firststepsnutrition.org

Start 4 life: www.nhs.uk/start4life

GP Infant Feeding Network: www.gpifn.org.uk

Birth and Skin to Skin Contact

Immediately after the birth your baby may be placed in skin to skin contact with you, this immediately stimulates powerful surges of milk producing and mothering hormones, and encourages instinctive mothering behaviour. The warmth of your body and the familiar sound of your heartbeat and voice help them feel calm and safe after their birth. This special time after birth lays the foundation for strong mother-baby relationships.



How a baby breastfeeds

Healthy full term babies are usually ready to breastfeed within an hour or two of birth. Instinctive reflexes (rooting, seeking, suckling and swallowing) are present at birth and it is important to support your baby to use these reflexes to enable effective feeding. If your baby can get the milk they need they will grow and develop and you will grow in confidence, knowing that you are able to provide everything your baby needs.

Breastfeeding is a dynamic interaction between you and your baby. When it is going well it provides food, comfort, closeness and pleasure for both of you. However, when breastfeeding does not go well it can result in a baby not getting enough milk. This can cause them to be unsettled and may fail to gain weight. Mothers can go on to develop sore nipples, making feeding a painful and distressing experience. If milk is not effectively removed from your breasts they will become engorged and failure to rectify this can result in mastitis.

Understanding how breastfeeding works and how a baby breastfeeds is very important for you to have a happy and successful breastfeeding experience.

Attachment

Attachment is the term used to describe how your baby takes the breast into their mouth to feed. To effectively attach, the baby takes a big mouthful of breast tissue in their mouth and milk is released due to a combination of tongue compression and negative pressure within your baby's mouth.



Remember – when attaching your baby it is important to concentrate on the area below the nipple. Babies attach by tilting their heads back and bringing their chin into the breast, with their top lip slipping over the top of the nipple.

Positioning

'**Positioning**' is the term used to describe how you hold your baby to enable to attach effectively. There are many different positions that you can adopt and it is important you feel comfortable when feeding.

There are some key principles in relation to how you hold your baby that should be considered regardless of whether you are sitting, lying or feeding in a laid back position.

These principles ensure that your baby is allowed to act on their instinct and have ease of access to your breast. The **CHINS** acronym is an easy way to remember the principles.

Close – baby needs to be close to you so that he can scoop enough breast into their mouth.

Head Free- when attaching your baby to the breast they will tilt their head back to allow their chin to lead as they come to the breast.

In line- your baby's head and body should be in alignment so that they do not have to twist their neck, which would make feeding and swallowing difficult.

Nose to nipple – your nipple should rest below his nose, your baby will begin to root and they will tilt their head backwards to enable them to feed effectively.

Sustainable – Although it is ok to change position slightly during a feed it is best to get comfortable before, as your baby could be feeding for a while.



Different Breastfeeding Positions

Which breastfeeding positions should I use?

The answer to what position you should use depends on your baby's age and size, your breast size and shape, the type of birth you've had and how you're recovering. You need to find a position that is comfortable for you and baby.



Cross Cradle Hold

When latching your baby with the cross cradle hold you can help steady the head and bring the baby gently and quickly to your breast. Sometimes mums can be nervous about holding baby correctly and this position can help you feel more confident and in control.



Cradle Hold

When you get more confident you might like to try latching with baby's head cradled in your forearm. Baby's body is turned toward mother's body so baby doesn't have to turn his head too far to reach the mother's breast.



Different Breastfeeding Positions



Rugby hold

The rugby hold is a good position for twins as you can feed them at the same time, as well as if you have had a caesarean delivery as there's no pressure on the tummy and scar area. In this hold, baby is held with his legs under mother's arm and the rest of the body supported by her forearm and baby will be facing the breast. This position is also helpful for mothers with chapped or sore nipples. Pillows can be used under baby in order to prevent mother from leaning forward.



Side Lying

This can be a good position if you've had a difficult birth and it's uncomfortable for you to sit for long periods. Some mums find this position comes naturally, but others may need a little help figuring out where to put their arms, breast and baby.



The baby and mother lie side-by-side, facing each other with baby's head next to the mother's breast. Pillows can be used to support the mother's back. The baby should be fed from both breasts and that can be easily done by slightly adjusting the position of mother. Extra care should be taken to make sure that the baby's nose is not blocked and he is able to breathe.

Different Breastfeeding Positions



Laid back / Biological Nurturing

This is a great position for mum to relax and some babies are more comfortable in this close body position when feeding. Baby takes the lead with this position which can feel strange for mum at first.

Being laid back can be great for mums with over supply or forceful let down because gravity helps to slow down the milk flow for baby. Babies who get frustrated by choking on the milk in other positions often like this one.






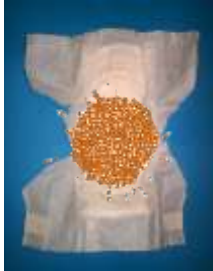


This position can be used with any age or size of baby. Using this reclining position can be more comfortable and prevent painful hunching over baby.



As baby gets older and more acrobatic in his nursing, you may notice that you experience some very creative and non-traditional breastfeeding positions! In general, any position is just fine as long as mum is comfortable and baby is able to get all the milk he needs. Remember the CHINS principles – Close, Head Free, and In-line, Nose opposite nipple and Sustainable for mum.

Reference: Written permission granted to use photographs courtesy of Kristin Gourley BS IBCLC
www.lactationlink.com

Baby's Nappies

Baby's Age	Wet Nappies	Dirty Nappies
1-2 days old	 <p>*Urates are dark pink/red substance that many babies pass in the first couple of days. At this age they are not a problem, however, if they go beyond the first couple of days you should tell your midwife as they may be a sign that your baby is not getting enough milk.</p>	 <p>At least 1 dark black sticky 'tar like' stool (meconium)</p>
3-4 days old		 <p>Stools should be changing in colour from brown to green to yellow and will be looser in consistency. At least 2 stools in 24 hours</p>
5 days onwards		 <p>Yellow in colour and maybe quite watery in consistency. At least 2 stools in 24 hours Stools should be at least the size of a £2 coin</p>
Up to 6 – 8 weeks old		 <p>Yellow in colour, soft and runny in consistency. At least 2 stools in 24 hours. Stools may become less frequent after 6-8 weeks, but should still be yellow and soft.</p>

Ways To Support Effective Feeding

Hold and cuddle your baby as much as possible (skin to skin contact is preferable in the early weeks).

Try to be comfortable and relaxed, try and find a position that suits you best.

Ensure **CHINS** principles are in place and that your baby has free access to the breast.

It is important to keep your baby calm through talking, stroking, rocking or letting your baby suck on a clean finger.

Look out for your baby's instinctive feeding cues (rooting, searching, head bobbing, gaping) and learn to recognise your baby's individual cues and movements.

Learn how to hand express a little of milk to tempt your baby to feed.

Tease your baby to open their mouth by gently rubbing your nipple above their top lip.

As your baby attaches, look out for their wide open mouth, how their head tilts back (your partner may be able to help you look out for these signs).



Ensure you feel comfortable throughout the feed and look out for your baby's full cheeks and suck/swallow pattern.

Be patient and don't rush the process.

Remember – avoiding teats and dummies during the establishment of breastfeeding will help the baby imprint on breastfeeding and reduce the possibility of them developing nipple/teat confusion.

Further reading:

Baby lead breastfeeding: www.baby-led.com

Biological nurturing: www.biologicalnurturing.com

From bump to breastfeeding: www.bestbeginnings.org.uk

How Do I Know My Baby Is Getting Enough Milk?

An accurate method of assessing your baby is getting enough milk is to watch your baby feed, paying particular attention to the changes in the pattern of sucking and swallowing throughout the feed. This pattern is more evident when the milk comes in rather than during the colostrum phase.

You may like to ask your midwife or health visitor to observe you feeding and watch how your baby attaches to your breast, listen and observe for changes in the suckling pattern and listen for sounds of swallowing.

The number of nappies you are changing (see page 13) and steady weight gain can also reassure you that your baby is drinking lots of milk.

Your baby's behaviour before, during and after feeds, showing lots of feeding cues, being active on the breast and relaxed and settled afterwards are all good signs of effective feeding.

Your breasts and nipples should also be comfortable during and after feeds.

Responsive Feeding

Responsive feeding will meet your baby's needs and also help to build your milk supply.

Keeping your baby close will allow you to recognise the early signs that your baby is hungry – which may include opening their mouth, licking their lips, hands to the mouth and rooting – or suggest that they need a cuddle or comfort from you. Let them feed from one breast and then offer the other side.

Breastfed babies cannot be overfed, so you can use breastfeeding as a way of settling or soothing your baby, as well as enjoying time together to cuddle or relax.

It is just as important to respond to your own body as well as your baby's cues, and offer a breastfeed if you feel firmness or engorgement to your breasts. This will avoid having long gaps between feeds.

How often will my baby need to feed?

All babies are unique, but a good guide is for your baby to feed between 8 – 12 times in 24 hours. The amount of milk your baby needs will vary – so the length of feeds may differ from 10 mins up to 45 mins. The length of time between feeds will also vary throughout the day and night but in the early days and weeks this is likely to be 1-3 hours (from the start of your last feed).

It is also a really good habit to offer both breasts at every feed. Your baby may benefit from a nappy change to wake them up before you offer the second side.

Early Breastfeeding Challenges

The slow starter – healthy term babies may feed infrequently in the first few days after birth. However, it is important for your milk supply that your baby nuzzles and suckles frequently at this time in order to ‘switch on’ milk producing cells. Frequent feeds of colostrum are also needed to help clear the meconium from their gut in order to prevent problems such as jaundice.

Babies may be slow starters for a number of reasons, including sedation in labour, undiagnosed illness, traumatic birth, missed opportunity for skin contact but gentle handling and patience will help overcome these challenges.

What can you do?

- Have lots of skin to skin contact for as much and long as possible.
- Hand express your colostrum and feed it to your baby as this may help wake your baby.
- If you are concerned ask your midwife/health visitor or breastfeeding peer supporter for help.



Hand Expressing



This is a useful skill for all breastfeeding mothers to learn. Ask your midwife/health visitor to show you how to hand express.

Hand expression is useful because:

It can tempt your baby to feed and/or provide colostrum if they are a little sleepy during the first few days.

If your baby is on the neonatal unit it will stimulate milk production and provide valuable colostrum for your baby.

It may help soften your breast by removing a little milk if you've become full or engorged.

It will help you self-manage blocked ducts and prevent and reduce the symptoms of mastitis.



You can view a video of hand expressing here: www.unicef.org.uk/hand-expression.

Expressing

When expressing at home it is very important to give expressed breastmilk via a bottle ONLY. Once you have left the hospital the use of syringes and cup feeding is not advisable at home. There could be a risk of aspiration into the babies' lungs or choking.

There are three options for expressing - by hand, with a manual breast pump, or with an electric pump. Just use whichever method you're most comfortable with.

During breastfeeding, most mothers have several milk releases without even knowing it. When your baby is at the breast, all the familiar physical cues (softness, warmth) and your loving emotions release the hormones that trigger milk release.

This does not always happen when a mother puts a pump to her breast, as these normal baby cues are missing. For this reason, some mothers need a little extra help at first in triggering milk releases.

Here are some suggestions, see which works best for you.

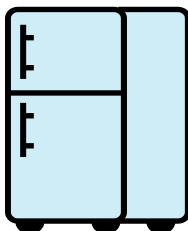
Feelings: Make yourself comfortable, relax and close your eyes. Imagine your baby is breastfeeding. Sometimes breathing slowly and deeply while thinking how much you love your baby can really help.

Sight: Having your baby (or a photo of them) nearby may also help to get things started.

Touch: The heat from a warm compress will stimulate the blood vessels in your breasts to open up. This makes it easier for the milk to flow from the tissues down to your nipples. You could try the following things and see which works best for you.

- A warm towel off the radiator
- Face cloth under hot water
- Warm wheat bag or a warm shower will also have the same affect.
- Massage your breast in small circular movements, until you reach your nipple. Finish the massage by stroking your breasts with the palm of your hand or fingers, in a downward motion.

Expressed Breastmilk



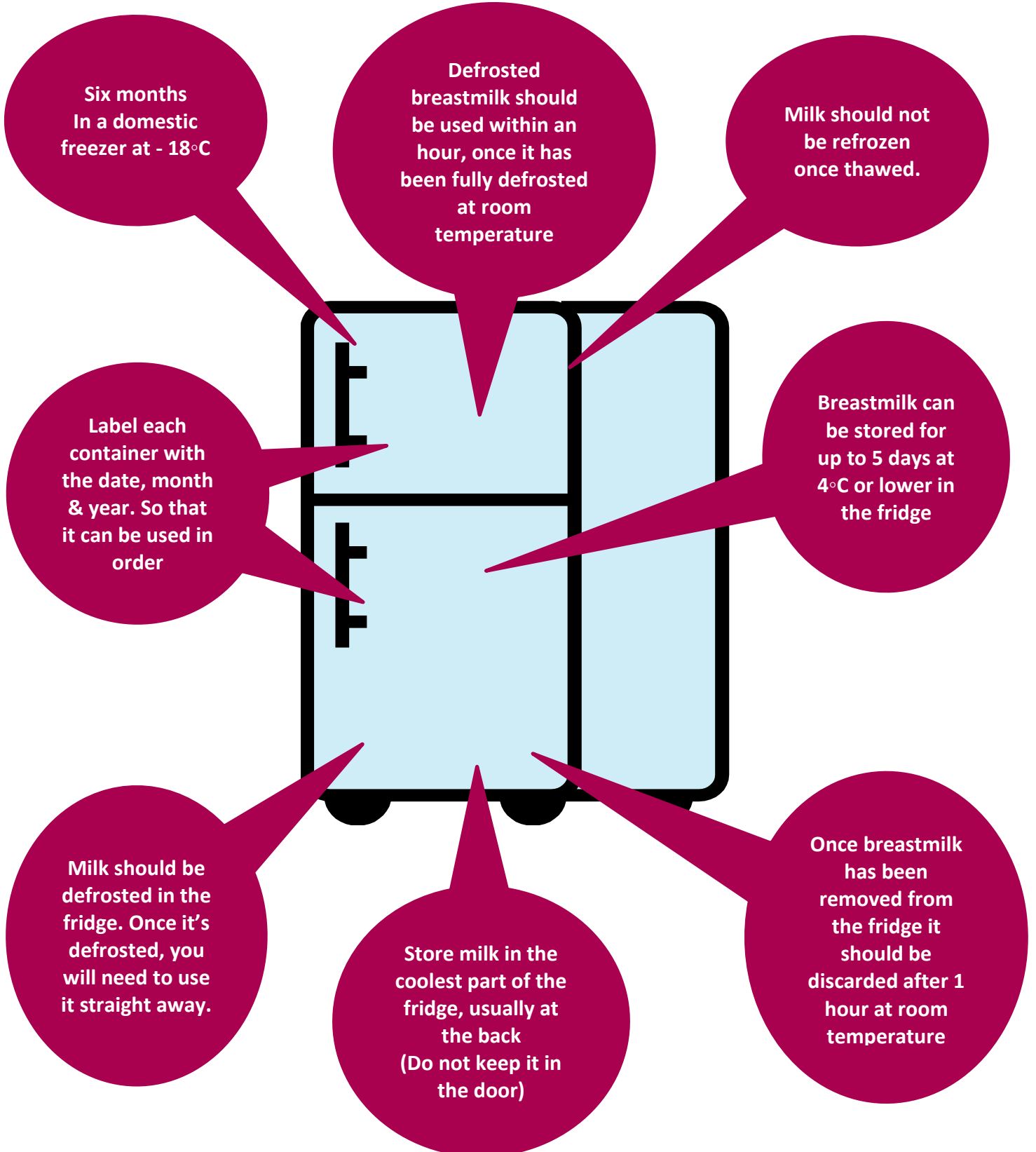
Things to remember:

- **Wash your hands** before expressing and handling breast milk.
- **Always** use a sterile container with a lid.
- It is better to use a different storage container each time you collect milk. Newly collected milk maybe cooled and added to previously stored milk **only on the same day**.
- **Remember** to label your storage containers / bags with the time and date before storing.
- Store your breast milk in the fridge or freezer as soon as possible.
- Use the back of the fridge to store your breast milk, **not the door**.
- When your milk has been stored in the fridge or freezer, the cream and milk may separate out. Gently swirl the milk to mix the layers when you are ready to use it.

When are the best times to express?

- About 30 minutes after your baby has fed. Express both breasts once or twice if required.
- In the morning after your baby's 1st feed.
- In between feeds or when your breasts feel particularly full.
- Try expressing from one breast when your baby is feeding from the other. This takes advantage of the natural milk ejection
- Remember, your baby is the most efficient pump of all! Don't use your pumping output as a reliable judge for what is going on with your milk supply. Pumping is a skill and, even when mastered, it is not the same process as a baby feeding.
- Express as often as your baby would normally feed, if possible. If you are separated from your baby while expressing, thinking about or looking at a picture of the baby may help.

Storing Expressed Breastmilk



Paced and Responsive Bottle Feeding

There may be times when doing some short term or intermittent bottle feeding may be a stepping stone to successful breastfeeding. Of course, the feeding of choice is the mother's pumped breastmilk, but formula may be necessary in selected situations.

Responsive Bottle Feeding

If you have decided to bottle feed your baby, the following information will help you do so as safely as possible and will help you and your baby have a close and loving feeding experience.

It is best for you and your partner to feed baby in the early weeks. This will help baby to feel safe and secure, get used to your way of feeding, and enable you to form a close loving bond with her.

Paced Bottle Feeding

- Offer feeds when baby shows early signals of being hungry
- Hold the baby close to you almost **upright**
- Look into baby's eyes and talk gently to her
- Gently rub the teat above baby's top lip to encourage her to open her mouth and poke her tongue out
- Place the teat into the front of baby's mouth allowing her to draw it further in
- Hold the bottle **horizontal** allowing just enough milk to cover the teat. Pace the feed to meet baby's needs, gently removing it if baby appears to want a break
- Offer frequent breaks throughout the feed sitting baby upright to help bring up the wind
- Never force baby to take a whole feed as she will know when she has had enough
- Discard any leftover milk
- The feeding should take 15-30 minutes. If the baby drinks too fast, tip the bottle down or remove it to slow the pace of the feeding.

To see photographs of a baby being fed in the paced feeding position please follow the link below.

<https://www.lactationtraining.com/resources/educational-materials/handouts-parents/handouts-lactation>

Breastfeeding Support Start 4 Life




NHS

Here to help with breastfeeding, 24/7



Breastfeeding is great for you and your baby. But when you're starting out, it's perfectly normal to experience the odd setback. That's why we're here for you, day and night. Look for the Breastfeeding Friend from Start4Life in the Alexa Skills Store or on Facebook Messenger.

To find out more, search Start4Life.



NHS

Alexa, ask the Breastfeeding Friend how I get my baby to latch on?



Here to answer your breastfeeding questions, 24/7

Breastfeeding is great for you and your baby. But when you're starting out, it's perfectly normal to experience the odd setback. That's why we're here to support you, day and night.

Look for the Breastfeeding Friend in the Alexa Skills Store.



Startwell Stockport



You can find lots of helpful information and resources on the Startwell Stockport website – including infant feeding, play and development, and keeping safe and healthy.

www.startwellstockport.co.uk

Give your child the best start in life

You make all the difference!

The first few years are the most important in your child's life and as a parent or carer you have the biggest influence of all on their development. Startwell is here to help and support you with your child's school readiness journey from pre-birth to 5 years, offering the most up to date advice and guidance from **Health Visitors, Early Years Workers, Start Well Co-ordinators**, and **Midwives**, who work together in Start Well teams.

Specialist support and early help may also be provided by other services including; the **infant parenting service**, the **parenting team**, child therapy services such as **speech and language** and the **portage team**.

For all aspects of child health, development, wellbeing and parenting you can call the Health Visiting and School Nursing advice line on 0161 835 6789

A free interpreting service is available, if you need help with this booklet/ leaflet. Please telephone Stockport Interpreting Unit on 0161 477 9000. Email: eds.admin@stockport.gov.uk

如果你需要他人為你解釋這小冊子/單張的內容，我們可以提供免費的傳譯服務，請致電 0161 477 9000 史托波特傳譯部。

W przypadku gdybyś potrzebował pomocy odnośnie tej broszurki/ulotki, dostępne są usługi tłumaczeniowe. Prosimy dzwonić do Interpreting Unit pod numer 0161 477 9000.

যদি এই পুস্তিকা/প্রচার পত্রটি সম্পর্কে আপনার কোন সাহায্য দরকার হয় তবে বিনা খরচে আপনার জন্য দোতায়ী ব্যবস্থা করা হতে পারে। মেহেরবানী করে স্টকপোর্ট ইন্টারপ্রিটিং ইউনিটে ফোন করুন টেলিফোন নম্বর, 0161 477 9000.

اگر آپ کو اس کتابچے/الفلٹ کے بارے میں مدد کی ضرورت ہے تو مفت ترجمانی کی سروس دستیاب ہے۔ براہ مہربانی انٹرپرائٹنگ یونٹ کو 0161 477 9000 پر فون کریں۔

شما میتوانید از خدمات ترجمہ رایگان استفاده کنید و در صورت احتیاج به ترجمہ ی این نشریہ به طور حظوری یا شماره تلفن 0161 4779000 اداره ترجمہ تماس بگیرید

تنوفر خدمة ترجمة شفوية اذا تطلبت مساعدة في فهم هذا الكتيب/النشرة. نرجو الاتصال اربن رينيول على رقم الهاتف: 0161 477 9000

Our smoke free policy

Smoking is not allowed anywhere on our sites. Please read our leaflet 'Policy on Smoke Free NHS Premises' to find out more.

Leaflet number

Publication date

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Maternity

Stepping Hill Hospital