## Nevada Baby Steps to Breastfeeding Success: For Parents

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#### Step 1: Initiate breastfeeding within the first hour after birth.

- ♦ Breastfeeding is the start to a healthy life. Healthcare professionals should encourage mothers to hold their babies skin-to-skin, and to breastfeed immediately after delivery.
- Skin-to-skin contact refers to the holding of an infant directly on one's skin. The infant is naked (or baby may wear a diaper or hat or both) and is placed upright against a parent's bare chest. The infant should be dried, which can be done while on the mother's chest, and be covered across the back.
- Putting baby skin-to-skin in the first hour of life helps to regulate baby's temperature and heart rate, stabilizes oxygenation and blood sugar levels, stimulates feeding behaviors and calms and soothes a crying baby.
- ♦ Benefits of skin-to-skin for the mother include enhanced uterine contractions, colostrum letdown and enhanced bonding with baby.
- The American Academy of Pediatrics (AAP) recommends regular procedures such as administration of eye ointment, injections, baths, measurements and weights be done after breastfeeding has been initiated. A delay in these tasks does not compromise the health of the newborn. More crucial tasks, such as physical assessments and time-sensitive APGAR scores, can be done while the baby is on the mother's chest or while breastfeeding.



#### Step 2: Avoid giving infants fluids or solids other than breast milk unless medically necessary.

- ♦ Without early supplementation, mothers are more likely to breastfeed their infants exclusively and for a longer duration.
- ♦ Supplementation refers to feedings provided in place of breastfeeding. This may include expressed or banked breast milk, formula or sugar water. Any foods given prior to the recommended 6 months of exclusive breastfeeding are defined as supplementary.
- ♦ Babies should only receive supplementation if medically indicated by a health professional. If supplementation is indicated, the mother should provide her own breast milk if possible.
- Breast milk reduces the incidence and/or severity of diseases and illnesses such as diarrhea, lower respiratory infections, ear infections, bacterial meningitis and urinary tract infections in the baby.
- ♦ It is very normal to wonder if baby is receiving enough through breastfeeding. The infant's stomach capacity is small, averaging 7 ml on the first day (the size of a marble), growing to 13 ml on day two. It is normal to have small frequent feeds.



#### Step 3: Request 24-hour rooming-in.

- ♦ There are many benefits to rooming-in for the baby. Babies have been shown to gain more weight per day and are less likely to develop jaundice. Babies who are kept with their mother will cry less and have more quiet sleep.
- ♦ Benefits to the mother can include longer breastfeeding duration, faster transition from colostrum to mature milk and increased breastfeeding exclusivity.
- ♦ When babies have early physical contact and maternal responsiveness, stress hormones are lowered.
- ♦ When babies room-in, the family has the opportunity to learn, recognize and respond to infants' feeding cues.



#### Step 4: Avoid using a pacifier or artificial nipple with infants during the hospital stay.

- ♦ The AAP recommends delaying pacifier introduction until 1 month of age to ensure that breastfeeding is firmly established.
- ♦ Babies are more likely to breastfeed exclusively and for a longer duration when pacifiers and artificial nipples are not used during their hospital stay.
- ♦ Bottles and artificial nipples are not the only alternative feeding method; alternatives include supplementing at the breast, spoon feeding, cup feeding, finger feeding and syringe feeding.
- ♦ Try using alternative methods to soothe the baby such as skin-to-skin, swaddling and rocking.
- Early pacifier use may cause problems for the mother as well, including decreased milk supply, painful latch, increased engorgement and plugged ducts.



# Step 5: Request a list of resources to call for help with breastfeeding after discharge, and review this list with your care provider.

- ♦ Mothers should be provided a list of resources by hospital staff, including a telephone number to call for breastfeeding assistance.
- ♦ Make sure you have your resource guide and a plan for follow up if needed before leaving the hospital.

FOR BREASTFEEDING HELP, CALL THE NATIONAL BREASTFEEDING HELPLINE AT

1-800-994-9662 or visit www.womenshealth.gov/breastfeeding/