

Feeding Your Baby in Newborn Care

Royal Hospital for Women

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Milk Feeds

Mothers' breast milk provides the best nutrition and protection for your baby. For a preterm baby, breast milk is especially important to prevent damage to the baby's immature digestive system. Breast milk is easy for them to digest and changes as they grow. Because human milk is considered so important, for high risk infants (born less than 32 weeks gestation and/or less than 1500 grams) whose mothers' milk supply is insufficient in volume or unavailable, the NCC Lactation Service is able to provide pasteurised donor human milk from the Australian Red Cross Lifeblood Milk Bank. Formula is difficult for preterm babies to digest and is deficient in the unique antibodies and nutrients human breast milk contains.

Most of the preterm babies in the NCC will receive their initial feeds via a nasogastric (NG) tube. The volume of milk given via the NG tube will be calculated as part of your baby's care plan and will increase as they grow. As part of FiCare, you are encouraged to take part in the process of drawing up and administering these feeds. Ask your baby's bedside nurse to help you learn how to do this.



A mother administering a nasogastric tube feed whilst enjoying kangaroo care

Expressing

When a mother and baby are separated at birth, it is important for a mother to commence expressing her breasts as soon as possible and regularly thereafter, 7-8 times per 24 hours (day and night). Your midwife is able to help you with this and there are first expression kits available for you to use.

The NCC has a dedicated Lactation Consultant to provide ongoing education and support. If you need additional support, you can ask a member of the nursing team to page the Lactation Consultant to visit you in NCC or postnatal ward (if still an inpatient).

As a post-natal in-patient, mothers have access to hospital grade breast pumps on their ward. The NCC also has a dedicated 'Expressing Room', where you can express, or from which you can bring a hospital pump to your baby's bedside. In the Expressing Room you will also find disposable expressing kits to use with the hospital breast pumps, and single use bottles in which to store the expressed milk. Please ask a nurse if there aren't any expressing kits or bottles in the room.

You will require a pump for use at home, including for overnight expressing. Please ask the NCC Lactation Consultant for advice on hiring and/or purchasing a breast pump. It is recommended to source a pump in advance of your discharge from the post-natal ward, to ensure your milk supply can be maintained.

For your breast milk to be used it is essential that it is labelled with the time and date it is expressed. Within the NCC your expressed breast milk (EBM) is stored in a dedicated milk fridge. Your nurse will show you how to check your milk in and where to find your baby's section of the fridge – there will be a labelled basket for you to use.

There is a freezer in the NCC for the storage of extra EBM. Many mothers will need to store some EBM in the freezer – ask a nurse for a freezer spot and basket for your EBM bottles.

Thank you for understanding that there is limited space in the fridges and freezer. Because of this you may be asked to take some of your EBM home. Expressed milk can be stored in a home freezer and used when your baby is discharged. If you are asked to take some milk home, please ask a member of the nursing team for guidance on which bottles to remove and how to best transport these. Expressed breast milk can be stored in a home freezer for 3 months and a deep freezer for 6 months.

Breastfeeding

Breastfeeding may be challenging if your baby is born preterm and is very small, but with patience, knowledge and assistance you and your baby will master the skills required. Breastfeeding is baby-led and early feeding cues often start while you are having skin to skin cuddles. When your baby is ready, you will be supported to initiate breastfeeding. Having yourself and your baby in a good position is important. This will make it easy for them to latch to your breast. Your nurses can guide you in how to position your baby.

Generally, babies commence with one breastfeeding attempt each day. After your baby does this well for a couple of days and has extra energy, breastfeeds are increased to twice a day. It often helps if your baby has a NG tube feed between breastfeeds so they can have a rest. When your baby is doing two good breastfeeds per day for a couple of days and has extra energy, suck feeds will be increased to three times a day.

Generally, when a baby is doing three breastfeeds per day well and is looking to feed overnight, the team will talk with you about introducing a bottle feed overnight. For most babies in the NCC they are not doing all suck feeds until just before they go home.

The NCC Lactation Consultant is also on hand to provide additional support and resources.

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