

In the first six months, any feeds given in place of or in addition to breastfeeds are called supplementary feeds.

The World Health Organization recommend exclusive breastfeeding until around six months of age, the slow introduction of family foods from around six months, and continued breastfeeding until the age of two years and beyond. However, some mothers choose to give their baby formula during this time

Breastmilk is a complete food and provides all your baby's nutritional needs for the first 6 months. Breastmilk satisfies both hunger and thirst; extra water is not needed. Supplementary feeds of water or formula can interfere with breastfeeding and are not recommended for well babies.

If your baby is unable to take a feed directly from the breast, expressed breastmilk is the best option.

Exclusive breastfeeding is important because

- Breastmilk is vital to the development of a healthy microbiome. Babies who are given formula have significant differences in their microbiome from babies who are exclusively breastfed. An unhealthy microbiome interferes with the development of the immune system and increases the risk your child later developing conditions including obesity, diabetes, metabolic syndrome, and allergies.
- Breastmilk increases baby's resistance to infection and disease. Any infant formula interferes with the protection against infection that colostrum and breastmilk provide. Giving formula increases the risk of baby experiencing respiratory infections, asthma, and gastrointestinal infections.
- Infant formula is more slowly digested than breastmilk. A baby might need to feed less often which can affect a mother's milk supply.
- Allergies and food reactions in infants can happen and may be associated with a variety of foods including cow's milk formula. Goat and soy infant formula are not recommended.

Your breasts make milk in response to your baby's sucking and removing milk from your breasts. The more milk the baby takes, the more milk you will make.

Giving formula feeds to a baby who breastfeeding (partial breastfeeding)

- If you would like to give formula to your baby that is also breastfeeding it is important to ensure baby takes as much milk at the breast as possible.
- Discuss this with your lactation consultant, midwife, or nurse.
- There may be a way to protect your milk supply while giving formula.
- They may advise you to offer both breasts at every feed and putting baby back to the breast after giving formula.
- Cup feeding your baby or supplementing with a supply line on the breast would help to minimize the risks of using a bottle and teat

To establish a good supply of milk

- Breastfeed frequently, whenever your baby seems hungry. Most young babies feed 8 - 12 times in 24 hours.

- Let baby finish the first breast (baby will stop sucking and swallowing and will let go of the breast), then offer the second breast. If baby still seems hungry you can offer one or both breasts again.
- Breastfeed your baby at night. Breastfeeding at night also helps prevent your breasts becoming too full and uncomfortable.
- Avoid giving supplementary feeds unless they are medically necessary. Supplementary feeds will reduce your baby's needs to suck at the breast and reduce your milk supply.
- Most women have enough milk in the breast 30 minutes after a feed to give a 'top up' breastfeed.
- Use of a dummy or bottle can stop a baby sucking well in the early days of breastfeeding. If your baby needs extra milk, try using a cup instead of a bottle.

Studies have shown that breastfeeding a healthy baby according to baby's need:

- Encourages early milk production.
- Decreases the likelihood of jaundice.
- Helps baby gain weight.
- Helps you breastfeed for longer.

If you are concerned about not having enough milk for your baby

- Ask your midwife, nurse, or lactation consultant to watch you feed your baby and check your baby's attachment to the breast and milk transfer.
- Offer both breasts twice at each feed.
- Express after feeds and give breastmilk as a top up.
- Offer a feed instead of a dummy.
- Increase skin-to-skin contact before, during, and after feeds.
- Read the brochure: Increasing your breastmilk supply.

Did you know?

Babies need to feel secure and cared for. Babies like to be held and may cry when they are put down. This does not mean they are not getting enough milk. Ask your midwife or child and family health nurse about techniques you, your partner and support people can use to help settle your baby after a feed, for example cuddling your baby, gently rocking your baby, carrying your baby (it can help to use a baby carrier or sling), singing to your baby, or taking your baby for a walk.

Breastfeeding is a new experience for you and your baby. Allow some time for you and your baby to learn to breastfeed and seek support if you are having any difficulties.

Resources

Your Midwife, Child and Family Health Nurse, or Lactation Consultant
 Australian Breastfeeding Association www.breastfeeding.asn.au Helpline: 1800 686 268.
 Raising Children Network www.Raisingchildren.net.au
 Global Health Media Videos: www.globalhealthmedia.org
 Australian Infant Feeding Guidelines (2012) www.eatforhealth.gov.au
 If you need an interpreter, please call Translating and Interpreting Service (TIS) on 131 450

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