JAUNDICE

If your baby is born prematurely, or with assistance from forceps or vacuum or you are from an East Asian heritage, your baby has a higher chance of becoming jaundice. Jaundice appears as temporary yellowing of the skin and the whites of the eyes and may make baby sleepy. Frequent effective breastfeeds may assist your baby and lessen the chances for your baby to require admission to our Special Care Nurseries for treatment. Wake your baby and offer both breasts at least every 3 hours if your baby is becoming jaundice. If both breasts are not taken, express some milk and feed it to your baby. Your midwife can teach you to do this.

SKIN TO SKIN CONTACT OR KANGAROO CARE

Extended periods of skin-to-skin contact with either parent can benefit baby, particularly if your baby is premature or unwell. It helps to keep baby warm and helps to stabilise blood sugars. It encourages optimal breastfeeding. It also lessens baby's initial weight loss and shortens your baby's hospital stay if your baby is premature. If you are going to hold your baby in skin to skin contact ask your midwife to show you how and ensure you are warm and comfortable. Greater benefits have been found if episodes of skin-to-skin contact are greater than one hour. Try to lessen the outside stimulation to your baby by keeping your room quiet, dim the lights and limit visitors. Your baby's transition to the outside world will be smoother.

MEDICATIONS AND BREASTFEEDING

Most prescription drugs and medicines are compatible with breastfeeding, but it is always best to check before your baby is born if you are taking regular medication. Talk to your doctor or midwife, or call NSW medications in pregnancy and lactation service 'MotherSafe' on 9382 6539.

AFTER HOSPITAL DISCHARGE

Our hospital Lactation Consultant can be contacted for information regarding support for breastfeeding on 9113 2053. We will encourage you to attend your Child and Family Health (C&FH) Centre within 2-4 days of discharge for ongoing support. If you are experiencing any breastfeeding challenges, the C&FH nurses can offer you a referral to the free Community Breastfeeding Clinic. There are also helpline numbers on the back of your baby's 'Blue Book' health record if you have questions after business hours.

Your baby may feed even more frequently on some days. This is not an indication you don't have enough milk, just that your baby is growing and maturing normally. Breastfeeding more frequently will ensure an increase in your milk supply to meet your baby's needs.

WOMEN WHO ARE EXPERIENCING A RAP (RISK ASSOCIATED PREGNANCY) AND/OR DIABETES IN PREGNANCY

Mothers who have certain medical conditions such as high blood pressure and diabetes, bowel disorders, immune disorders such as coeliac disease or Systemic Lupus Erythematous, or who are overweight, may decrease their health risks by breastfeeding their baby. Breastfeeding lessens the gestational diabetic mother's risk of developing late onset type II diabetes and will also decrease her baby's risk of becoming diabetic. Breastfeeding reduces the baby's risk of obesity in childhood and later in life and will assist the mother to lose weight. However, these infants are at an increased risk to situations that pose barriers to exclusive breastfeeding such as prematurity, respiratory distress, low blood sugars and being born by caesarean section. We therefore encourage you to learn as much about breastfeeding as you can prior to your baby's birth.

Colostrum (your first milk) is in your breasts several months prior to baby's birth. This comes in very small concentrated amounts and is very important for your baby. This can be expressed and stored for your baby to use in the event your baby has difficulty maintaining their blood sugar in the first few hours or days. If you are interested in preparing for your baby in this way, call our lactation consultant on 9113 2053 for a private consultation prior to 36 weeks gestation.

St George and Sutherland Hospitals Women's and Children's Health Services: Protocols Committee December 2014 review December 2019





St George and Sutherland Hospitals

BLISS

Breastfeeding/Lactation Information and Support

Service





Numerous studies show the importance of breastfeeding to mothers and babies health, as well as economic benefits to their families and the local communities. The World Health Organization (WHO) states that 'breastfeeding is an unequalled way of providing ideal food for the healthy growth and development of infants'

It is recommended that infants are exclusively breastfed (nothing other than breast milk to eat or drink) until around 6 months of age when solid foods are introduced, and that breastfeeding is continued until 12 months of age and beyond, for as long as the mother and child desire. Exclusive breastfeeding ensures that the baby receives the full nutritional, immunological developmental advantages of breast milk, giving protection against infection and some chronic diseases.

Not breastfeeding increases the risk or severity of a number of conditions in infancy and later life, including: obesity in childhood and in later life; gastrointestinal infections; respiratory illness; otitis media (ear infections);urinary tract infections; bacteraemia-meningitis; sudden infant death syndrome (SIDS) necrotising enterocolitis in preterm infants; atopic disease (allergies)asthma some childhood cancers; type 1 and type 2 diabetes; coeliac disease; inflammatory bowel disease cardiovascular disease risk factors including blood pressure pyloric stenosis physiological reflux

Reference - National Health and Medical Research Council, Department of Health and Aging, Infant Feeding Guidelines 2012

At St George and Sutherland Hospitals and Health Services, we support your decision to breastfeed through the policies, procedures and education sessions we offer during the antenatal and postnatal period. We are committed to offering this high standard of care and have been awarded the World Health Organisation and UNICEF's 'Baby Friendly' hospital accreditation.

LEARNING TO BREASTFEED

Learning to breastfeed can take time, patience and practice. It is important to learn the skill of breastfeeding so that you and your baby can begin to enjoy the unique relationship you will have when breastfeeding. If you are undecided about breastfeeding you could give it a try for a few weeks. We do know that any breastfeeding is better than no breastfeeding.

A FREE Antenatal consultation is available if you are concerned about your ability to breastfeed, please contact our hospitals Lactation Consultant on 9113-2053 to book a private appointment before your birth. Before 30 weeks pregnant is the optimal time.

An EVENING Breastfeeding Class is held monthly by a Lactation Consultant and Midwife - call 9522 1049 to book your place. The session includes:

- The first breastfeed after birth,
- Breast changes during the first few weeks;
- The role 'rooming in' and 'baby-led feeding' play in the early establishment of breastfeeding;
- How to position yourself and baby during the breastfeed to ensure baby attaches well to the breast so the feed is comfortable for you both
- How to tell if baby is getting enough milk
- Breastfeeding challenges and how to overcome them.

POSTNATAL Breastfeeding Discussion Groups are held for newly birthed women and their support person on the hospital maternity wards. Ask your midwife about them.

Partners and family members are encouraged to attend these sessions. Their support and encouragement are extremely important to the success of your breastfeeding experience. PEER SUPPORT is offered to all families through The Australian Breastfeeding Association. The 7 days a week phone number is: 1 800 mum 2 mum - or the website is <u>www.breastfeeeding.asn.au</u>. ABA also offers a 3 ½ hour education session on learning about breastfeeding in your local area. Check their website for details.

FIRST FEW DAYS WITH YOUR BABY

It is important your baby has frequent effective feeds, a minimum of 8 feeds in 24 hours (after the first day), and until your baby is growing and feeding well.

Watch your baby for early feeding cues of bringing hands to mouth, licking lips, moving head around and/or wriggling body. Opening their eyes or crying are often late signs of wanting to feed. Some babies who are premature, jaundiced or medicated (from the medications the mother may have taken for her labour) may not always give clear feeding cues, and would rather sleep than eat. Waking your baby and encouraging a feed may be necessary.

- Breastfeed a minimum of 8 effective feeds in 24 hours. Hold your unwrapped baby close to your body, supporting their body well at all times.
- If baby is not feeding well or causing you nipple or breast pain during the feed, remember to offer the breast when baby is showing early feeding cues. Try not to wait until the baby is crying. Let your midwife know if you need help.
- An effective breastfeed is when baby stays latched onto the breast and sucks, swallows and breathes rhythmically without detaching. Try to remember to offer both breasts in the first few days.