



Breastfeeding tips & techniques:

Breastfeeding Your Baby with Special Needs



Giving birth to a child with special needs can bring many different emotions—joy and excitement, as well as a concern for the unknown. What is known is that breastfeeding or providing breast milk is one important way you can help meet your baby's needs. When it comes to feeding your baby, it is hard to beat the benefits of breast milk. Breast milk contains the perfect balance of nutrients to help your baby grow and develop, as well as fight infection and common childhood illnesses.

BREASTFEEDING BENEFITS

The benefits of human milk are extremely important to your baby with special needs. Special needs might include, but are not limited to, babies born with Down syndrome, cleft lip or palate, heart problems, cystic fibrosis, or a neurological impairment.

The nutrition and immunological benefits of human milk can help your baby stay, grow, and develop as healthy as possible. Breast milk helps babies gain weight and get stronger for any treatments or surgeries that might be required. Also, breastfeeding can have a positive effect on your baby's oral development and coordination.

Your baby will benefit from any amount of breast milk you provide, whether received at your breast, pumped and fed by bottle, or another method. Keep in mind that some modifications such as pumping breast milk or using a special nipple can be helpful.

Specific benefits for babies with special needs

- ... **DOWN SYNDROME:** Breast milk has a positive effect on baby's overall health and development, including potentially fewer colds and seasonal illnesses, more regular bowel functions, and better mouth and tongue coordination.
- ... **CLEFT PALATE:** Some experts believe that breast milk might be less irritating to your baby's exposed nasal passages and might help reduce the number and severity of respiratory illnesses. Because it can be difficult to get a good latch, many babies with cleft lip or palate will need a special nipple, and possibly a special nursing system. Many insurance companies will provide you with a breast pump if your baby has a cleft palate.
- ... **HEART PROBLEMS:** Breast milk helps babies grow and develop important protective immunities. Many babies with cardiac challenges have difficulty breastfeeding because they get too tired, so you might use a supplemental nursing system or pumped breast milk in a bottle.



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- ... **CYSTIC FIBROSIS:** Breast milk can help babies with cystic fibrosis develop protective immunities that they need for better respiratory health. Some babies can have difficulty digesting and metabolizing fats and will need specialized infant formulas in addition to breast milk.
- ... **NEUROLOGICALLY IMPAIRED:** Breast milk has many nutrients that optimize brain and eye development.

OVERCOMING CHALLENGES

First, know that any amount of breast milk you can give your baby is helpful! And lactation consultants can help make breastfeeding successful in many cases.

Lactation consultants

- ... If you know ahead of time that your baby will be born with special needs, meet with a lactation consultant prior to your baby's birth to discuss the extra help you might need.
- ... They can help you with concerns or questions about your breastfeeding progress and certain circumstances that might make it difficult to breastfeed your baby.
- ... They can help you develop an effective feeding plan and offer future support as you establish a breastfeeding pattern.

Additional help

Some circumstances, including hospitalizations and treatments, might make it difficult for mothers to breastfeed or fully breastfeed. But remember, any amount of breast milk your baby gets is helpful!

These additional suggestions might help:

- ... **KEEP A POSITIVE ATTITUDE:** It might take a few weeks for you and your baby to learn how to latch on properly. Keep trying to breastfeed. The benefits are worth the effort!
- ... **SEEK SUPPORT:** Your lactation consultant can provide the advice that you need. Ask for help when you need it.
- ... **START BREASTFEEDING AS SOON AS YOU CAN:** Try to breastfeed as soon after birth as possible.
- ... **PUMP IF YOU NEED TO:** If breastfeeding is not possible or is not working, pump as soon as possible after birth and as often as your baby would normally feed. Typically you'll pump for 15 – 20 minutes every 2 – 3 hours.
- ... **IF YOUR BABY IS GAINING WEIGHT SLOWLY, ASK ABOUT USING YOUR OWN BREAST MILK AS A SUPPLEMENT:** If your health care professional recommends that you give your baby a supplement, ask if you can express your hindmilk (the milk at the end of a feeding), which has a higher content of fat and calories, and offer it by another feeding method if your baby is not sucking effectively.





Breastfeeding tips & techniques:

Breastfeeding with Large Breasts & Extra Weight



Most women are able to breastfeed. If minor problems arise, many of these problems can be easily overcome. For some women, extra body weight can make breastfeeding more challenging. Extra weight may interfere with the hormones of lactation. Extra weight and large breasts can make it more difficult for babies to latch on to the breast. Sometimes there are other health complications, too.

Breastfeeding benefits

It is hard to beat the benefits of breast milk. The benefits to you and your baby increase the longer you breastfeed. Breast milk can offer your baby protection from illnesses and infections. Breastfeeding lowers mom's risk of breast and ovarian cancer. It also helps you return to your pre-pregnancy weight.

Cesarean births

Pregnancy and birth complications, including cesarean births, may be more common for women with extra weight. Having a cesarean birth may cause a delay in when you can start to breastfeed your baby. To shorten the delay, ask to breastfeed your baby right after you give birth or as soon as medically possible. Breastfeeding also helps you and your baby to bond. This is important if you and your baby were separated right after the birth. Your baby's sucking helps your uterus return to its pre-pregnancy size. It also speeds your healing by decreasing postpartum bleeding.

Large breasts

One concern that large women have is how to latch their baby if they have large-sized breasts. Women with large breasts may need to experiment with different breastfeeding positions and learn what works best with their body. Most women with large breasts find it easier to feed in the football hold (refer to handout on positioning). If your breasts are very large, you may need to place your baby on a pillow to bring your baby up to the level of your breast. It is important to make sure you are not leaning down to the baby but instead bringing the baby to the level of the nipple to help get a good latch. Ask for help in finding a position that works best for you.

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Breast care

Having a well-fitting bra is important for all women, but especially for those with large breasts. You should not use an underwire nursing bra as the wires can press up against sensitive breast tissue and cause plugged ducts and mastitis.

Large women are more at risk to develop skin infections and irritations underneath the breasts. After bathing it is important to completely dry under the breast with a towel, to be sure all excess moisture is gone. (Excess moisture can cause or irritate topical yeast infections.) Wash your bra frequently as well to prevent yeast infections.

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Breastfeeding tips & techniques:

Breastfeeding and Postpartum Depression



Moms may not be aware that their emotional health can affect their success with breastfeeding. As a new mother, you might be feeling a range of emotions. It is very normal to feel tired and unhappy when you first get home with your new baby. These feelings can last up to two weeks and will go away on their own. If your feelings continue or get worse, and don't go away, you may need help. Some women feel sad or unhappy even weeks or months after they give birth.

About 10% – 15% of moms are affected by postpartum depression. They no longer enjoy normal activities. They find it hard to experience pleasure. Moms who are affected with postpartum depression may not enjoy caring for their babies, or any activities they may have liked before the baby was born. They may be crying a lot, feeling panic, or having disturbing thoughts. If you think you have any symptoms of postpartum depression, you are not alone and this can be treated. The first thing to do is to contact your doctor. It is best to seek help early rather than later.

Signs of postpartum depression

Mothers with postpartum depression may have some or all of these symptoms:

- ... History of depression or anxiety
- ... Feeling sad, anxious, afraid, or helpless
- ... Major life changes (such as abuse, divorce, or death)
- ... Unsupportive spouse or partner
- ... Financial concerns
- ... Inability to sleep (insomnia)
- ... Mood swings or irritability
- ... Chronic pain or headaches
- ... Unexpected event during the pregnancy or birth
- ... Short maternity leave or returning to work
- ... Concerns with baby's health
- ... Inability to breastfeed
- ... Fussy or colicky baby
- ... Loss of appetite

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- ... Loss of interest in or heightened worry about taking care of your baby
- ... Feeling like you are not the kind of mom you want to be
- ... Disturbing thoughts about hurting yourself or your baby

Treatment

Treatment of postpartum depression usually involves counseling and taking an anti-depressant medication. Most medications taken for postpartum depression can be taken while breastfeeding. Be sure to let your doctor know that you are breastfeeding.

Sometimes help with physical symptoms and finding ways to get more sleep will help with postpartum depression. Your doctor will determine what treatment, if any, is needed. Remember that postpartum depression is a real condition and help is available.

Try these self-help suggestions while being treated by your doctor:

- ... Get more sleep
- ... Share the baby's care with family, the baby's father, friends, and other care providers
- ... Get help with other children, meal preparation and chores
- ... Exercise every day (take walks with baby)
- ... Eat nutritious meals and snacks
- ... Sleep while baby is resting
- ... Consider joining a support group
- ... Call friends and family for moral support

Postpartum psychosis

These symptoms do not occur often. If you experience any of the following, contact your doctor right away.

- ... Not sure about what is real and what is not
- ... Seeing and hearing things that are not there
- ... Thoughts about hurting yourself or your baby
- ... Thoughts about suicide or homicide





Breastfeeding tips & techniques:

Breastfeeding and Surgery



If you need surgery or need to go to the hospital while breastfeeding, relax! You will still be able to maintain your milk supply and continue breastfeeding your baby.

Talk to your doctor

Talk to your doctor before the surgery/hospitalization and let him or her know that you are breastfeeding. Ask what types of medications he or she will be using so you can use one that is safe for use while breastfeeding. Also, most of the pain medications used in hospitals after surgery are safe.

Medications and breastfeeding

If you are worried about your baby receiving medications through your breast milk, then pump your breasts approximately 4 to 6 hours after the surgery and discard this milk.

There are some types of medications that may require you to pump and discard your milk for 24 hours. Your doctor will let you know when you can start breastfeeding again.

Feeding the baby

Find out whether hospital policy allows a family member to bring the baby into your room so that you can breastfeed when you feel up to it. Most of the time a family member will need to stay in the room with you to help you feed the baby. While you are away, keep the feeding schedule the same. Make sure that someone feeds the baby from your stored milk supply or with infant formula while you are in the hospital.

Pumping in advance

If you cannot have the baby in the hospital room with you, then you will need to pump your breasts every 3 to 4 hours to maintain your milk supply. You can either bring a pump from home or ask to use one of the hospital's pumps. Not all hospitals have maternity units so find out ahead of time whether or not a breast pump will be available.

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It is also recommended to begin pumping and storing milk as soon as you know that you will be having surgery. This can help build up a supply for while you are in the hospital. If you have a few days' notice, begin to pump and store your milk in the refrigerator or freezer.

Getting enough rest

Arrange for friends and family members to help you once you are discharged from the hospital. If you are tired, they can bring the baby to you and help you get set up for breastfeeding. Getting enough rest is very important so your body has a chance to heal.

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Breastfeeding tips & techniques:

Providing Breast Milk for Your Premature Baby



Most babies, even premature babies (born prior to 37 weeks), can learn to breastfeed successfully. Even the smallest premature babies benefit from their mother's milk—even if only small amounts are fed for short periods of time. Providing breast milk helps develop a special connection or closeness between mom and baby when separated in the NICU.

Mothers who deliver a premature baby produce milk that is slightly different from the milk of mothers who carry their pregnancies to full term. This “premature milk” is especially beneficial for premature babies and provides extra protection against some of the problems that premature babies may develop. However, breastfeeding a premature baby who is in the NICU can be challenging.

Gavage feeding

If your premature baby was born at least 32 – 33 weeks' gestation, he or she may be able to breastfeed at least some of the time. Babies born sooner than this are usually fed expressed breast milk and/or special formula through a gavage tube. The breast milk may be fortified with a special human milk fortifier.

Once you give birth, you will need to remove milk from your breasts early, often, and completely, so that your body gets the sign to produce an adequate supply. The first 2 – 4 weeks are especially important. During this period your milk-producing hormones and breast tissues undergo changes that help ensure your ability to produce enough milk for your baby in the weeks and months to come.

Producing enough milk

You may worry that you are not producing enough milk, even though you are breastfeeding on demand or pumping regularly. If you regularly plan on breastfeeding exclusively, you should try to pump every 2 – 3 hours or as often as possible. The more you pump, the more likely you are to make milk. Any milk that you make is valuable.

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It is OK to **ASK** for help:

REFER to the Pumping & Storage handout » **CALL** your doctor or pediatrician » **CONTACT** your NICU nurse or a lactation consultant » **REFER** to the numerous resources listed at www.abbottnutrition.com/breastfeeding

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Pumping & storage

Ask about the NICU's policies on handling breast milk for premature babies, including:

- ... Pumping instructions
- ... Proper breast milk containers
- ... Method for labeling, storing, and transporting your breast milk
- ... Whether you should refrigerate or freeze the milk you collect at home
- ... How much milk you should put into each container

When you are ready to go home

Moms who want to provide breast milk to their newborn when they are ready to go home will need to produce at least 20 – 25 fluid ounces (~590-740mL) of milk each day. Even though this is more milk than your baby will take during the time in the NICU, it is the amount you will need at the time of hospital discharge.

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