
Breastfeeding

Summary

- Human breastmilk has the perfect nutrients for a baby's needs.
 - Breastmilk gives your baby protection against infection.
 - Breastfeeding, like any other learned skill, takes time, patience and practice.
 - You can still fall pregnant even if you are fully breastfeeding.
 - If you think you have mastitis, see your doctor.
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Breastfeeding is the best way of feeding your baby. Breastmilk provides the perfect nutrition to match your baby's needs for growth and development. Colostrum, the fluid your breasts produce in the first few days after birth, helps to protect your baby from infection.

The benefits of breastfeeding

Breastfeeding provides:

- Enhancement of your bond with your baby
- Protection for your baby against many common health problems, such as:
 - Middle-ear infections
 - Gastrointestinal infections
 - Urinary infections
 - Respiratory infections and asthma
 - Some childhood cancers
 - Diarrhoeal diseases
 - Juvenile diabetes
 - Childhood obesity
 - Allergies
 - Eczema
 - Sudden unexplained death in infants (SUDI) which includes sudden unexpected death in infants (SIDS)
- Health benefits for you, such as reducing the risk of breast cancer, ovarian cancer and osteoporosis, and a quicker return of your uterus to its pre-pregnancy size
- Cost benefits
- Convenience and accessibility.

Deciding to breastfeed

During the course of your pregnancy, it is useful to consider how you will feed your baby and to discuss this with your pregnancy carers.

If you decide to breastfeed, you will be encouraged to do so soon after the birth of your baby. It is important that the first breastfeed occurs within one hour of the birth, if possible, when you and your baby are ready and comfortable and a midwife is available to assist. You may prefer your partner or support person to be present.

Early skin to skin contact between you and your baby following birth can help to successfully initiate breastfeeding.

Being unable to breastfeed

If you are unable to breastfeed at all, or for as long as you would have liked, try not to see this outcome as a failure, or feel guilty about it. If you have tried, then you have failed neither yourself nor your baby. Support is available if you need someone to talk to about your feelings.

If you formula feed it is important that you obtain a formula suitable for your baby's age. Be sure to sterilise all equipment used for preparing the formula and feeding your baby. It is essential the formula is made up and stored exactly as stated on the packaging.

Help and advice for women who formula feed is available from midwives involved in your care, your maternal and child health nurse, local doctor and/or pharmacist.

Remember, even if you do not plan to breastfeed, skin-to-skin contact soon after the birth will be a valuable experience for you and your baby.

Breastfeeding tips to help you get started

Positioning and attachment come naturally to many babies and mothers, but many need time and practice to get it right.

Some tips that may help include:

Initiate skin-to-skin contact with your baby.

- Feed your baby soon after birth, preferably within the first hour.
- Before your milk 'comes in' your baby may feed up to 12 times in 24 hours.
- Hold your baby fully facing you and close to your body.
- Touch the area between your baby's nose and mouth with your nipple. This will encourage a wide mouth ready to take in the nipple and surrounding areola.
- Breastfeeding doesn't hurt if your baby is well attached. If you feel pain, break the suction by gently inserting a clean finger in the corner of the baby's mouth, and try again.
- If your baby is having difficulty attaching to the breast, hand express colostrum.
- Remember, for most women breastfeeding is a skill to be learned. Don't be afraid to ask for help.
- While feeding, support your back with pillows and, once the baby is well attached, place a pillow underneath your baby for comfort.
- Young babies tire easily, so delay changing their nappy until after a feed.
- Babies in the first three months often want to feed more often late in the day and may be unsettled in the evening – this is very common
- Crying is a late hunger cue – try to respond to your baby before they become distressed.

How many breastfeeds your baby will need

Each child is different, but a young baby can feed eight to twelve times in 24 hours. Your milk supply adjusts to your baby's needs, so it helps to feed whenever your child is hungry.

You will know that you're providing enough milk if your baby:

- Has six to eight really wet cloth nappies or four to five heavy disposable nappies in 24 hours
- Has soft bowel motions (usually at least one a day in the first three months)
- Generally settles after most feeds
- Has bright eyes and good skin tone
- Is gaining weight appropriate to their age.

Weaning from breastfeeding

The World Health Organization and health professionals recommend exclusive breastfeeding for six months, with a gradual introduction of appropriate solids in the second six months, and ongoing breastfeeding for two years or beyond. However, when to wean is a decision that mothers and babies need to make for themselves.

The weaning process begins once you start to supplement your baby's diet with anything other than breastmilk, whether this is water, juice, solid foods or other milks. It is completed once your baby no longer feeds from the breast. This process may be mutual, baby-led (when your baby decides that they no longer wish to breast feed) or mother-led (when you decide it is time to stop).

Baby-led weaning

Sometimes your baby will decide that they no longer wish to breast feed. This may be permanent or temporary, and can lead to a mixture of feelings, including rejection, disappointment and sadness. Contact a breastfeeding counsellor if you need help dealing with these emotions.

Mother-led weaning

You may decide to stop breastfeeding for a number of reasons:

- You want to return to work
- You want to become pregnant again
- You need to/have been advised to wean for medical reasons
- You are ready to stop.

It is ideal, both for mother and baby, to wean gradually. As you reduce the number of breastfeeds (dropping one feed every few days), your milk supply will slowly decrease. This will reduce the risk of blocked ducts and mastitis. Weaning slowly will also give your baby time to adjust.

If your breasts are painfully full as a result of dropping a feed, try expressing some milk to relieve the pressure but do not drain your breast as this will encourage an increase in milk supply.

Support for breastfeeding women

Breastfeeding does not always come easily, and it is important for you, your baby and your family that you seek the support and assistance that you need. This may be to help you establish breastfeeding or to address any difficulties that you may be having.

Support for women who breastfeed can be provided by:

- your partner and family
- your maternal and child health nurse
- your doctor or midwife
- hospitals (including hospital breastfeeding day stay units)
- lactation consultants
- Early Parenting Centres
- The **[Australian Breastfeeding Association](#)**.

Breastfeeding classes

It can be helpful to attend breastfeeding classes while you are pregnant, ideally with your partner. These may cover breastfeeding techniques, myths and feelings about breastfeeding. These classes are great for building your confidence, setting your expectations, and providing you with an opportunity to discuss any breastfeeding questions you may have before your baby is born.

Support from partners for breastfeeding mothers

Partners can do a lot to help mothers feed and care for their baby. They can provide support and encouragement to assist them through the difficult patches.

Partners can help by:

- Finding out about breastfeeding
- Believing in their partner's ability to breastfeed
- Taking an active role in the day-to-day care of the baby. Taking the baby for a walk, cuddling, changing

nappies or bathing the baby gives partners an opportunity to get to know their baby and to give you a rest and some time for yourself.

Breastfeeding and mastitis

Mastitis is an inflammation or infection in the breast. It is commonly caused by:

- Blocked milk ducts
- Nipple damage
- Poor attachment to the breast when feeding
- Breasts being too full (possibly due to going too long between feeds)
- Wearing a bra that is too tight
- Weaning too quickly.

The symptoms of mastitis include:

- A sore, hard area of the breast
- A patch of red skin on the breast
- Feeling feverish and ill (hot and cold with aching joints).

If you notice these symptoms:

- Continue to breastfeed or express as normal from the affected breast
- Use heat packs or a warm shower to help with milk flow
- Gently massage any breast lumps towards the nipple (for example when feeding or expressing, or in the shower)
- Use a cool pack on the breast after feeding to reduce discomfort
- Drink plenty of water
- Take paracetamol or ibuprofen for pain relief
- Rest as much as you can.

If the symptoms continue for more than a few hours, see your doctor. Mastitis is easy to treat, but can become serious if left untreated.

When making your appointment, tell the receptionist that you think you have mastitis. Your doctor may prescribe antibiotics that are safe to take while breastfeeding.

Breastfeeding and fertility

For most women who breastfeed, the return to fertility is delayed. Some women ovulate during breastfeeding, some women don't. If it's important for you not to fall pregnant again, seek family planning advice.

Breastfeeding and your sex life

Having a baby almost always changes your sex life, no matter how the baby is fed. Recovery from childbirth takes time and being a new mother can be exhausting.

While many women combine breastfeeding with an active and enjoyable sex life, some women find that their interest in sex is less while they're feeding. Be patient.

Breastfeeding and your social life

Breastfed babies are very portable. You can take your breastfed baby along to many of your usual activities, or store expressed milk in the fridge or freezer for a babysitter to feed your baby.

Where to get help

- Maternal and child health nurse
- Your doctor
- Australian Breastfeeding Association Breastfeeding Helpline Tel. 1800 686 268
- Community health centre

- Lactation Consultants of Australia and New Zealand (LCANZ) Tel. (02) 9431 8621
- Maternal and Child Health Line (24 hours) Tel. 13 22 29

Things to remember

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This page has been produced in consultation with and approved by:

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