



Breastfeeding Tips

- 1 Watch for HUNGER CUES:
 - opening and closing mouth
 - licking lips or sucking on lips, hands, etc.
 - rooting or moving his/her head side to side
 - squirming
 - fussing

- 2 Get in a COMFORTABLE position and ensure a GOOD LATCH. This means most of the darker part around the nipple (areola) should be in the baby's mouth. The baby's lips should flange outward (like fish lips) and the tip of nose and chin should touch the breast. Some mothers worry that their baby may have a hard time breathing in this position. Try not to worry as babies are obligate nose-breathers and will let go of the nipple if they can't breathe adequately. As your baby starts to feed, you should see and/or hear swallowing.

- 3 Let your baby decide how much and how often he/she needs to eat. As long as your newborn is having at least six wet or dirty diapers a day and gaining weight, you should be reassured that your baby is getting enough to eat.

- 4 If you are not having success, visit your health care provider or local lactation services for help. When frustration creeps in, stop and take a break.

- 5 ARTIFICIAL NIPPLES (bottle or pacifier) should be used with caution during the first few weeks of life to help establish breastfeeding. One of the primal needs of a newborn is to suck, but if you experience significant nipple tenderness, a pacifier is an appropriate replacement after your baby has nursed for 10 minutes on each side. If you are returning to work at six weeks, have your partner feed the baby a bottle of pumped breast milk once per day two weeks before you plan to return to work. (NOTE: If formula is used, avoid using multiple types of formula.)

Call the office if you experience extreme pain, cracking or blisters on your nipples or for a throbbing pain, redness or tenderness in your breast(s). A temperature greater than 100.4 ° F, chills, body aches or exceptional fatigue should also be reported. Contact your pediatrician for concerns regarding weight gain in your baby, a lack of wet or dirty diapers, feeding problems or white-gray patches in your newborn's mouth.

Fresh pumped breast milk can be stored:

At room temperature 4 hours

In the refrigerator 3 to 5 days

In a deep freeze 6 to 12 months

Try DIFFERENT POSITIONS (such as the cradle or cross-cradle hold, football hold or side-lying position) to avoid nipple soreness and ease breastfeeding difficulties. If your newborn is having trouble latching, try gently stroking the baby's lips with your nipple. When your baby opens his/her mouth wide, pull your baby close so that the chin and lower jaw moves into the breast.

Resources

IHC Lactation Consultants Warmline.....801-714-3349
 La Leche League.....800-264-LOVE
 National Breastfeeding Helpline.....800-994-9662
 Peer Counselor Help.....801-851-7312
 Utah Breastfeeding Coalition.....877-632-7975
 WIC (Women, Infants and Children).....801-851-7340 (Orem)
801-851-7300 (Provo)
801-851-7360 (Payson)

Breast Pump Rentals

Art City Pharmacy (Springville)
 For Every Mother (Orem)
 IHC Lactation Services (Orem)

Pregnancy Risk Hotline.....801-328-BABY
(for questions regarding medications and safety)

Search for breastfeeding tips at these online sites:

aap.org (American Academy of Pediatrics)
 bfmed.org (Academy of Breastfeeding Medicine)
 breastfeedingonline.com
 nlm.nih.gov/medlineplus (a service of National Library of
 Medicine & National Institutes of Health)

PAYSON

15 S 1000 E Suite 125
 Payson, Utah 84651
 Phone : 801-465-2559

SPANISH FORK

325 W Center
 Spanish Fork, Utah 84660
 Phone : 801-465-2559

Visit -

CanyonViewWomensCare.com
 for additional information on other
 interesting health topics.



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 Women's Care**

Breastfeeding, It's More Than Just Milk

Short-term benefits for BABY

- Ear infection (↓ risk by 23% in first year)
- Lower respiratory tract infection (72% reduction in hospitalization)
- Gastrointestinal illness (with exclusive breastfeeding, hospitalization because of diarrhea is ↓ by 53%)
- Sudden infant death syndrome (up to 50% reduction of SIDS)
- Urinary tract infection
- Atopic dermatitis (eczema) (if NO family history, ↓ by 16%; if positive family history, ↓ by 42%)
- Necrotizing enterocolitis (six-fold decrease in low-birth weight babies)



Long-term benefits for BABY

- Asthma (3 months of breastfeeding will ↓ risk by 27% if NO family history and with a positive family history, risk of asthma is ↓ by 40%)
- IQ (one study shows ↑ of 5 points with breastfeeding)
- Obesity (↓ risk of obesity anywhere from 4 to 24%)
- Cardiovascular disease (small ↓ in blood pressure and cholesterol as an adult when breastfed as an infant)
- Diabetes (25% reduction in Type I and 40% reduction in Type II)
- Acute lymphocytic leukemia (↓ by 12% if breastfeed for 6 months and ↓ by 23% if breastfeed longer)

Short-term benefits for MOTHER

- Weight loss (breastfeeding helps in returning to pre-pregnancy weight 6 months sooner than those who don't)
- Postpartum depression (increased risk for depression in women who stop breastfeeding early or don't nurse at all)

Short-term benefits for MOTHER

- Type II diabetes (decreased risk in women who breastfeed)
- Cardiovascular disease (↓ risk of heart attack by 22% if total breastfeeding time is at least 2 years)
- Breast cancer (↓ risk by 4.3% for each year of breastfeeding)
- Ovarian cancer (↓ risk by 21% for any time spent breastfeeding and ↓ by 28% if nursed for at least 12 months in a lifetime)