

Can I Still Breastfeed My Premature Baby?

Giving birth to a baby prematurely can be an especially stressful time for new parents. You are undoubtedly experiencing some worry and uncertainty. While extra medical care is necessary, and the physicians and nurses are essential to your baby's recovery, you have a very important role also. Choosing to provide breast milk to your premature baby is one of the most important things that you can do.

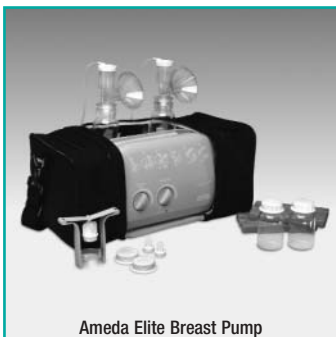
Your Breast Milk is Very Special

Your milk is higher in protein, sodium, chloride, calcium, iron and nitrogen than any infant formula available. Your premature baby needs all these nutrients. Your milk is also easier for your baby to digest and is more readily absorbed by the baby's digestive system. It also contains the enzymes that help digestion. Your breast milk helps your baby's digestive and nervous systems mature because it contains special hormones and growth factors.

Your breast milk contains several types of immunity factors, not found in infant formula. These immunity factors help protect your baby against many germs. Although this is important for any baby, it is especially important for your premature baby because he is particularly vulnerable to infections at this time. It has been found that premature babies who receive breast milk have shorter hospital stays, less infections, better bone development, better brain growth and intellectual development and better vision than those babies fed infant formula.

Rent a Hospital Grade Breast Pump

How premature your baby is will determine if you will be able to breastfeed or if you will need to establish your milk supply with a hospital grade breast pump.



Ameda Elite Breast Pump

If you need to establish your milk supply with a breast pump, rent a hospital grade breast pump such as the Ameda Elite or Ameda Lact-e breast pump from your hospital or a local breast pump rental station. A non-hospital grade pump that you are able to purchase may not provide the efficient stimulation that you need to

establish your breast milk supply while your baby is unable to breastfeed. The type of pump that you use is critical to establishing a good milk supply, so it is important to use a hospital grade breast pump with a double milk collection kit (pumps both breasts at the same time). Double pumping not only saves time, but will better stimulate the hormones that make your milk.

Your insurance company may cover the cost of renting a hospital grade breast pump, especially if you obtain a prescription from your baby's health care provider stating it is a medical necessity to provide breast milk to your premature baby.

Using the Pump and Milk Collection Kit

Wash your hands carefully before touching your milk collection kit. This seems to be one of the best preventions for contamination of the milk. Cleaning your breasts and nipples before pumping is not necessary. Your daily bath or shower is sufficient.

- ♥ Start pumping soon after delivery - within 6 hours if possible, and certainly within 24 hours. Use your breast pump 8-10 times throughout each day and night (about every 2-3 hours) for 10-15 minutes, for a total of at least 100 minutes per 24 hour period. Once your milk supply increases (usually within 3-4 days) continue to pump for about two minutes after you see the milk has stopped flowing.
- ♥ At first you will get only a few drops of milk. This is normal. Give any amount of milk you express to your baby's nurse. She can feed it to your baby by spoon, syringe or small cup.
- ♥ As you start pumping more milk than your baby will consume, freeze the extra milk for a later date. See details on "Storing Your Breast Milk" for premature babies below.
- ♥ Once you are producing 30-33 ounces of milk each day (24 hours) you will likely be able to maintain your supply by pumping eight times each day and night (about every 3 hours). Do not skip any pumping sessions as this can affect your milk supply.

Storing Your Breast Milk

Store your breast milk in either glass or plastic containers approved for breast milk or food storage. Use a tight fitting lid, as opposed to a bottle nipple unit since feeding nipples have holes in them. Your hospital may supply you with the containers they prefer you to use.

Storage recommendations for breast milk for premature babies are generally more conservative than breast milk storage for healthy, full term babies. Ask for your hospital's policy on breast milk storage for premature babies.

At Room Temperature: 1 or 2 hours

In a Refrigerator: 24 to 48 hours

In a Freezer: 3 to 6 months

Clearly label each container with your baby's name and the date and time the milk was pumped. Your hospital may supply you with pre-printed labels for this purpose.

Transporting Your Breast Milk

After you are discharged from the hospital you will bring your baby's milk from home to the hospital nursery. Keep it chilled on ice for each car trip to the hospital in a small cooler, such as the Ameda Cool 'N Carry insulated tote. Make sure the milk is placed directly in the refrigerator or freezer once you have arrived at the hospital.

Feeding Your Baby Your Expressed Breast Milk

The nurses can feed your baby your breast milk as soon as she begins feedings of any type, feeding tubes or oral feedings. Your baby should be fed your refrigerated breast milk first; then frozen milk, if necessary. Frozen milk retains more nutrients if thawed over night in the refrigerator, but it can also be placed in a container of warm water where it will thaw in 10-15 minutes. The milk may appear to separate, and the cream may rise to the top. Gentle swirling will mix it back into the milk.

TIP! Place a few drops of your breast milk on your baby's upper lip during tube and oral feedings. Smelling breast milk while she is being fed helps her to later associate the smell of breast milk with a breastfeeding.

Be aware that certain babies may need more calories or nutrients than breast milk can provide while they are growing rapidly. Human Milk Fortifier may be added to your milk, or your baby may be temporarily supplemented with special infant formulas. Some nurseries may also ask you to save hind milk separately. Hind milk is the milk you produce after several minutes of pumping and is higher in fat content. This can be useful in your baby's weight gain, if needed.

Increasing Your Supply of Breast Milk

If your breast milk supply has dropped below the baby's needs, you can increase your supply by:

- ♥ Pumping more frequently
- ♥ Increasing your rest, fluids and nutrition
- ♥ Applying heat and massaging your breasts during pumping sessions
- ♥ Using herbs or prescription medications that may increase milk supply. Speak with your health care provider.

Beginning to Breastfeed Your Baby

Generally, babies who are 1200-1500 grams (3 -3 1/2 lbs.) and 32-34 weeks gestation are good candidates for breastfeeding.

Your baby will exhibit several cues to let you know she is ready to begin breastfeeding:

- ♥ Sucking around a gavage feeding tube
- ♥ Hand to mouth activity
- ♥ Nuzzling, turning head inward with mouth open
- ♥ Ability to maintain body temperature
- ♥ Can manage his own saliva (does not require suctioning)
- ♥ Seems to need more sucking satisfaction

Babies do not need to learn to bottle feed before beginning to breastfeed. In fact, it usually interferes with successful breastfeeding. Research has shown that breastfeeding is actually easier than bottle feeding and the baby's heart rate and breathing rate remain more stable while breastfeeding.

Remember, the first few feedings may be more like "getting acquainted" sessions. The baby may lick and nuzzle your breast. Sometimes expressing drops of milk from your nipple helps entice the baby. Be patient as your baby learns this new skill! Hold your baby in whatever position is most comfortable for you. Generally the cross-cradle or football holds work best for premature babies because you will be better able to guide your baby's head towards your breast. See the Ameda Answer Sheet "How Do I Hold My Baby While Breastfeeding?" for details of positioning and latch-on.

You will need to continue the use of a breast pump for a while after you begin to feed your baby at the breast. Pumping right at the end of the feeding is most beneficial. Bring your milk collection kit to the hospital with you and use the breast pump right after a breastfeeding session. As you increase the frequency of breastfeeding and your baby is better able to empty your breasts, you may slowly cut back on the use of a breast pump.

Bringing Your Baby Home

Check to see if your hospital allows an overnight stay with your baby just before discharge. This will help you gain more confidence and become accustomed to both the care routines and more frequent breastfeeding that will be required when you bring your baby home.

Remember to closely follow your health care provider's instructions for feeding your baby. Gradually increase breastfeeding sessions and decrease pumping supplements (if any).

Frequent weight checks are important to make sure your baby is gaining weight. Your health care provider will want to help you keep a close eye on the baby during the transition from hospital to home. Keep in touch with a Board Certified Lactation Consultant or other knowledgeable health care provider to give you additional advice and encouragement during this important transition.

Please remember that this is general breastfeeding information only and does not replace the advice of your healthcare provider. If you have a problem that you are unable to resolve quickly, seek help immediately.

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References on File.

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