

CARING FOR THE BREASTFED BABY

A GUIDE FOR CHILD CARE PROVIDERS

WHO BENEFITS FROM BREASTFEEDING?

BENEFITS TO BABY

- Fewer respiratory infections (colds, pneumonia, RSV, etc.)
- Reduced incidence of asthma
- Fewer upset stomachs and diarrhea
- Fewer ear infections
- Fewer allergies (eczema, foods, etc.)
- Decrease in Sudden Infant Death Syndrome (SIDS)
- Better response to infant vaccinations
- Life-long benefits such as decrease in childhood cancers, diabetes, obesity, hypertension, intestinal disorders (i.e. Crohn's, Celiac Disease)
- Optimal brain development and increased IQ scores
- Fewer doctor visits and hospitalizations, fewer prescriptions

BENEFITS TO MOTHER

- Conserves a family's financial resources, saves over \$1,000/yr alone in formula costs
- Decreased risk of breast, ovarian and uterine cancer
- Provides a unique bonding experience
- Burn up to 500 calories/day, promotes postpartum weight loss, which helps decrease adult obesity, Type 2 diabetes and hypertension
- Exclusive breastfeeding promotes optimal child spacing
- Reduced stress (reduced levels of stress hormone found in blood-stream of women who breastfeed) and improved responses to stressful situations

BENEFITS TO DAY CARE PROVIDERS

- Fewer sick children in your day care
- Less exposure to illness for employees
- Dirty diapers are less smelly
- Recognition as a breastfeeding-supportive daycare
- Satisfaction from providing the best for your babies/children
- Job security (if the children in your daycare are always sick, parents are going to look for a new daycare)

WHAT DO I NEED TO KNOW ABOUT BREASTMILK?

Breastmilk is the perfect food for babies. Recognizing the benefits, the American Academy of Pediatrics has said all children should be breastfed for the first year of life, and longer if desired. Human milk is perfectly suited for human babies. Babies cannot be allergic to their mother's milk. What a breastfeeding mother needs most when she returns to work is a daycare environment that is family-friendly and supportive of her desire to continue providing the best for her baby.

ADVANTAGES OF BREASTMILK

- Easier for baby to digest, less spit-ups
- Contains antibodies to protect baby against illness
- Less constipation
- Human milk changes to meet baby's growing needs

STORAGE OF BREASTMILK

There has been much discussion over what type of container is best for storing breastmilk. Each type of container has its advantages and disadvantages. Although some breastmilk components are lost during storage and/or freezing, it's important to keep in mind that the formula substitutes may have none of these components. Baby generally will get plenty of these components if s/he nurses directly from the breast when with mom. Therefore, when choosing a container, it's generally okay to go with whatever works best for the mother. Mom can store breastmilk in any clean container (bottles, jars, milk storage bags). Storing human milk in two to four-ounce quantities minimizes waste and speeds thawing of frozen milk.

GUIDELINES BREASTMILK STORAGE

	Room Temp (< 79° F or 26° C)	Refrigerator (32-39° F or 0-4° C)	Refrigerator/ Freezer Unit (in freezer side) (-4° F or -20° C)	Chest Freezer (-94° F or -70° C)
Freshly Expressed Breastmilk	4-6 hours	Up to 8 days	3-6 months, up to 12 months	Up to 12 months Storage > 12 months has been found to have minimal effect on milk
Thawed Breastmilk	< 4 hours (if thawed in refrigerator but not warmed)	< 24 hours	Do not refreeze	Do not refreeze

• In freezers, store milk near back of freezer, not in shelves on door.
• Storage containers should be placed on a rack above the floor of the freezer to avoid warming during the automatic defrost cycles.

Source: "Best Practice for Expressing, Storing and Handling Human Milk in Hospital, Homes and Child Care Settings (2006);" Human Milk Banking Association of North America.

A FEW REMINDERS

- Use fresh, refrigerated milk whenever possible, as this contains the most antibodies for your child and protects her/him against the “germs of the day”
- Breastmilk should be labeled with the baby’s first and last name and date it was pumped.
- The US Center for Disease Control (CDC) and the Occupational Safety and Health Administration (OSHA) state breastmilk is considered food and may be kept in any refrigerator. No special arrangements or handling is needed

APPEARANCE OF BREASTMILK

Breastmilk looks different from regular milk or formula. Don’t be fooled into thinking something is wrong with it. Here’s what you can expect in the breastmilk you see:

- It may appear watery
- The hindmilk (or cream) separates from the milk after pumping and rises to the top
- Frozen breast milk tends to be a yellowish color
- It may have a bluish tint, but may also be tinted with other colors (brownish, greenish, orange)
- Frozen breastmilk may have a “soapy” odor after thawing. This change in smell is attributed to changes in the milk fats and is related to storage in self-defrosting freezers. It has not been found to be harmful to the baby

THAWING OR WARMING BREASTMILK

- The oldest milk should be used first
- Breastmilk can be fed to the baby cool, at room temp or warmed
- If refrigerated, place in pan of warm water or in bottle warmer. Do not let the level of water in the bowl of water from the faucet touch the mouth of the container
- If frozen, remove and place in refrigerator for 24 hours to thaw. Milk may be kept in the refrigerator for 24 hours after it is thawed. Or, thaw frozen breastmilk by holding container of frozen milk under cool running water and gradually add warmer water until milk is thawed and warmed
- May also warm breastmilk container in pan of warm water on the stove. Never heat container of breastmilk directly on the stove
- Do not microwave as “hot spots” in the milk can burn baby and microwaving will also destroy the antibodies in the breastmilk
- Gently swirl thawed breastmilk before feeding to mix the hindmilk (cream) and other components and distribute the heat evenly. Do not stir or shake
- Do not refreeze breastmilk once it is thawed or partially thawed

WHAT DO I NEED TO KNOW ABOUT FEEDING THE BREASTFED BABY?

HOW DO I KNOW HOW MUCH TO FEED?

Because breastfeeding is a “baby driven” process, the amount may be different each feeding. Breastfeeding babies also tend to eat less at each feeding, but eat more often. This is normal and may help prevent obesity later in life. Imagine if someone made you eat the same amount every meal!

INTAKE GUIDELINES

(Remember, these are guidelines only - every baby is different.) If mom is unsure what baby is eating, she can arrange for a pre and post feeding weigh-in at the lactation office.

Average intake by age:

0-2 months . . . 2-5 oz. per feeding

3-6 months . . . 3-5 oz. per feeding

Breastfed babies might act hungry after their bottle. This is because feeding is more than nutrition for the breastfed baby. After a bottle, they wonder, "gee, is this all there is?" They miss the closeness and comfort they receive from breastfeeding. Before giving more breastmilk, see if comfort measures will calm/quiet the baby. Over-feeding breastfed babies frequently happens when comfort needs are misinterpreted as hunger.

Try not to give a full feed if mom is expected within one to two hours. Pour one to two oz. of breastmilk from an existing bottle and save the rest for a future feed. Mothers go to a great deal of work to pump and provide the best nutrition for their baby, so it is important not to waste it. Most mothers need to feed their baby shortly after getting off work due to full breasts, so they appreciate a baby ready to eat!

Research has not yet been done to determine if it is safe to give a baby milk that was leftover from a previous feeding or milk that was previously warmed but not used. Talk to the baby's mother when making this decision. Some breastfeeding moms have flexible schedules that allow them to come to nurse their baby during their work day. Providing an area where mothers can relax and breastfeed their babies will benefit all of you.

TIPS FOR THE BABY WHO IS RELUCTANT TO TAKE A BOTTLE

Feeding reluctance is not unique to just breastfed babies. Occasionally, even babies who are bottle fed from birth will refuse bottles from anyone other than their mother.

Some tips that may help you if baby is reluctant to take a bottle:

- Try offering the bottle while baby is drowsy and before the baby is likely to be too hungry
- Hold baby closely, wrapped in his or her own blanket (something with mom's scent on it)
- Run warm water over the bottle nipple before feeding. Breastfeeding babies aren't used to cold nipples!
- Try different feeding positions. Some babies like to be propped higher or lower. Some babies like to be rocked while they are fed
- Keep trying, but remember the breastfed baby can be fed mother's milk using other feeding methods, such as a cup, spoon or eye dropper if the baby continues to refuse the bottle

Remember, refusing a bottle is rare. The majority of breastfed babies will offer no additional challenge for the daycare provider.

DISPELLING THE MYTHS

There are many misconceptions, old wives' tales and falsehoods about breastfeeding. You can help by learning what is known from research about breastfeeding.

MYTH: THERE IS LITTLE OR NO DIFFERENCE BETWEEN BREASTMILK AND FORMULA. BOTH ARE EQUALLY AS GOOD FOR THE BABY.

FACT: Human milk is exactly what human babies need. Formula is an attempt to imitate some of the properties of mother's milk. Technology cannot reproduce the living cells found in mother's milk. For some babies, formula can actually be hazardous. Formula feeding is associated with increased illness, as well as several lifelong health problems (obesity, diabetes, Crohn's, etc.).

MYTH: BREASTFED BABIES ARE TOO ATTACHED TO THEIR MOTHERS.

FACT: Breastfeeding does provide a special bond between mother and baby. However, babies are supposed to feel attached to their parents. This gives them the feeling of love and security that is critical in the early developmental years.

MYTH: MOMS HAVE TO BE VERY CAREFUL WITH THEIR DIET WHEN BREASTFEEDING.

FACT: A balanced diet is good for everyone, not just breastfeeding moms. Even mothers who don't eat well can still breastfeed because her body uses nutrients efficiently and mobilizes stored nutrients. Worldwide, studies show that maternal nutrition has only a modest effect on milk production and composition.

MYTH: MOMS HAVE TO AVOID SPICY FOODS WHEN BREASTFEEDING.

FACT: Women all over the world breastfeed their babies, even those who live in cultures where spicy or highly seasoned foods are common. Women should follow a diet appropriate to their culture, eating foods of different colors, flavors and textures. Remember, breastmilk is made from what is in the mother's blood, not from what is in her stomach. Some strong flavors, like garlic, can pass into the milk, but they do not seem to cause problems. Various studies have shown that breastfed infants were more accepting of solid foods when introduced because they have already been exposed to various flavors, while the formula fed baby gets the same taste every day.

MYTH: BABIES HAVE TO EAT THE SAME AMOUNT EACH FEEDING, AND SHOULD EAT ON A REGULAR SCHEDULE.

FACT: Breastfed babies may eat different amounts and at different times, just like adults. They may develop a pattern of not eating much during the day, and waiting until they're with mom to take in most of their calories. This is quite common in breastfed babies and is called "reverse cycling".

Because breastmilk is so well digested, breastfed babies tend to need less milk than babies fed formula. Breastfed babies are also less likely to be overweight.

MYTH: BREASTFEEDING BABIES ARE HARDER TO CARE FOR BECAUSE THEY WANT TO EAT MORE OFTEN.

FACT: Breastfed babies may eat more frequently than bottle fed babies because human milk digests more quickly. Formula has a protein in it, which is harder to digest so formula-fed babies feel full longer. However, some breastfed babies will “reverse cycle,” so they may eat less often during the day than the bottle-fed babies.

MYTH: BREASTFED BABIES HAVE MORE DIRTY DIAPERS THAN BOTTLE FED BABIES.

FACT: While this is probably true in the first few weeks of breastfeeding, it is not necessarily true after that. Every baby develops his/her own pattern, but it is not uncommon for breastfed babies to go several days between dirty diapers, without being constipated. The stool of breastfed babies also has a “sweeter,” less strong odor than that of formula-fed babies.

MYTH: BREASTFED BABIES ARE MORE GASSY AND FUSSY.

FACT: Most babies are gassy from time to time; some more than others. This is mostly due to an immature digestive system and not with what the mom does or eats. If certain foods were universally a problem for babies, we would expect cultures that emphasize those foods to have more gassy and fussy babies, but this does not occur. Mothers can eat a normal, balanced diet and know that all babies experience gas and fussiness from time to time.