



# HUTT maternity

Hutt Valley Maternity Care

## **Breastfeeding Quick Reference** Information for women



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## **Why Breastfeed?**

### **World Health Organisation**

The World Health Organisation (“WHO”) recommends:

- ⌘ initiation of breastfeeding within one hour of birth;
- ⌘ exclusive breastfeeding for the first six months of life; and
- ⌘ introduction of nutritionally-adequate and safe complementary (solid) foods at six months
- ⌘ continued breastfeeding up to two years of age or beyond.
- ⌘ Breastfeeding is normal for baby

### **Breastmilk**

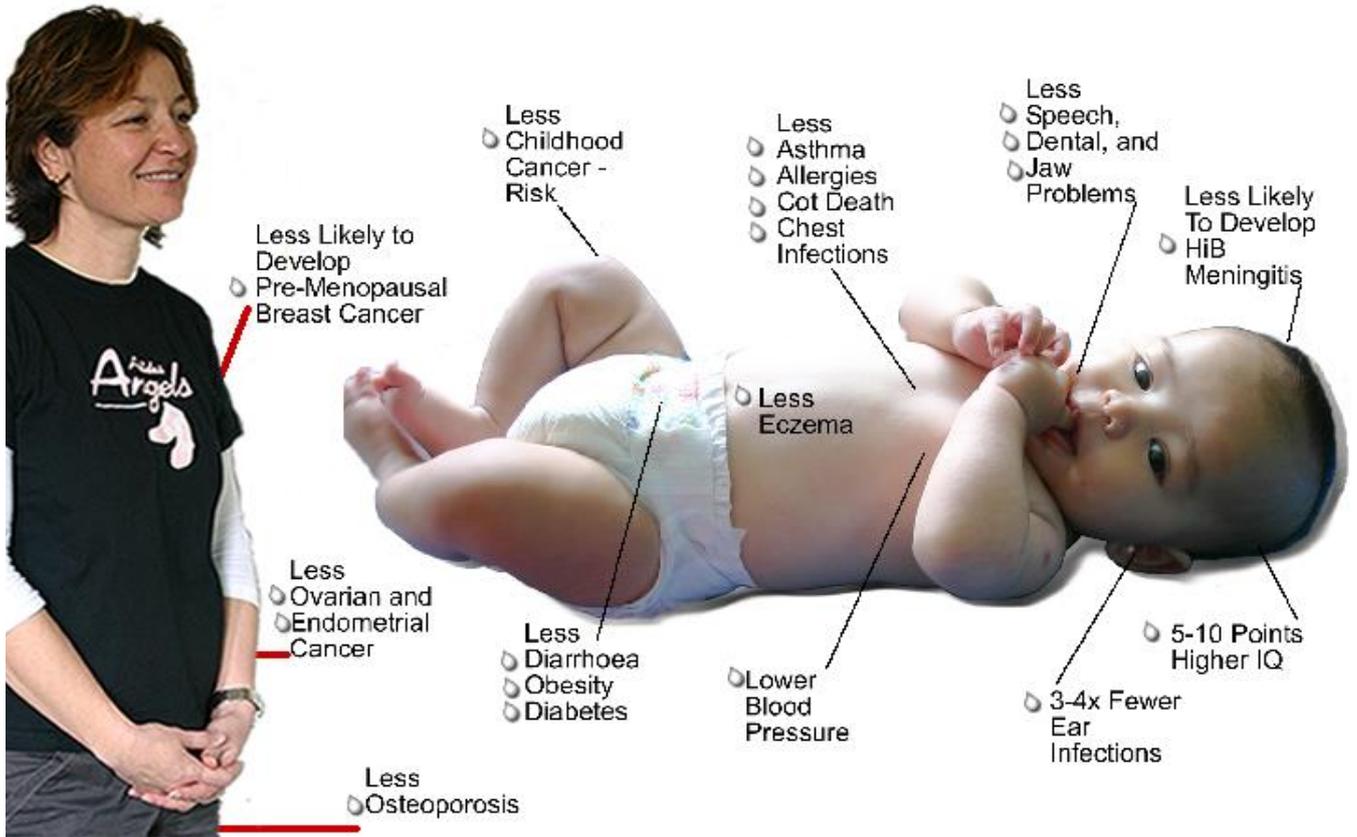
- ⌘ Is all the food and drink your baby needs for the first six months
- ⌘ Helps to protect your baby against colds, tummy bugs, infections and allergies
- ⌘ Helps your baby to feel safe and secure
- ⌘ Reduces the risk of SUDI

### **Formula**

- ⌘ Can cause a decrease in your milk supply
- ⌘ Should be used only if there is a medical reason

### **Breastfeeding is best for mum too**

- ⌘ Reduces the risk of heavy bleeding
- ⌘ Reduces risk of osteoporosis and breast cancer
- ⌘ Is good contraception (ask your lead maternity carer for more information)
- ⌘ It saves you time
- ⌘ It's free



## ***Ten Steps to Successful Breastfeeding:***

“The Ten Steps to Successful Breastfeeding” are the foundation for BFHI (Baby friendly Hospital Initiative). BFHI is a World Health Organisation initiative and each hospital in New Zealand is required to meet the BFHI standards. Hutt Valley DHB is a BFHI maternity facility. We have implemented the following “Ten Steps” which have been proven to help support, promote and protect breastfeeding mothers and their babies.”

1. (a) Comply fully within the international Code of Marketing of Breastmilk Substitutes;  
(b) Have a written breastfeeding policy that is routinely communicated to staff and parents;  
(c) Establish ongoing monitoring and data management systems.
2. Ensure that staff have sufficient knowledge, competence and skills to support breastfeeding.
3. Discuss the importance and management of breastfeeding with pregnant women and their whanau/family
4. Facilitate immediate and uninterrupted skin-to-skin contact and support mothers to initiate breastfeeding as soon as possible after birth and any opportunity thereafter.
5. Support mothers to initiate and maintain breastfeeding and manage common difficulties.
6. Avoid giving breastfed newborns any food or fluids other than breastmilk, unless clinically indicated.
7. Enable mothers and their infants to remain together and to practise rooming-in 24 hours a day.
8. Support mothers to recognise and respond to their infants’ cues for feeding (responsive feeding).
9. Discuss with mothers the use and risks of feeding bottles, teats and pacifiers.
10. Co-ordinate discharge so that parents and their infants have timely access to ongoing support and care.

## **Attachment:**

### **Good attachment:**

- ⌘ Comfortable nipples
- ⌘ Good feed for the baby

### **Poor attachment**

- ⌘ Sore nipples

## **Positioning:**

### **Natural Feeding Position:**

This position is a great way to help your baby with attachment. In the first couple of days this helps your baby to use his instincts for a good latch and feeding.



- ⌘ Get yourself in a comfortable position and recline at a 45° angle with your hips forward
- ⌘ Gravity draws baby onto your body. There should be no gaps between mum and baby's body.
- ⌘ Make a nest with your arm to provide support.
- ⌘ Baby may find mum's nipple and self attach.
- ⌘ You may need to use two fingers to help baby find your nipple.
- ⌘ Relax and encourage baby by your gentle voice and touch

Please search this natural feeding position  
<https://vimeo.com/210224351>

### **Cradle Hold:**

- ⌘ Cradle baby: comfortably in your arm, elbows relaxed by your side
- ⌘ Allow baby's arms to 'hug' your breast which encourages natural feeding responses



- ⌘ First breast: roll baby onto the side to face your breast
- ⌘ Align baby: baby's lips to mother's nipple
- ⌘ Baby self-locates: tongue protrudes; mouth opens to a natural width, draws in nipple and breast tissue
- ⌘ Face to breast symmetry: nose, chin and both cheeks contact the breast with no gaps
- ⌘ Initial suckle will be rapid and as your milk starts flowing you will observe a change to a long, deep rhythmical draw; baby will swallow as milk flows.
- ⌘ If baby shows feeding cues offer the second breast.

Please search this positioning and latching video for mothers  
<https://www.youtube.com/watch?v=kZuSAzivTB4>

## Rugby Hold

- ⌘ Follow same guidelines as for cradle hold but support baby gently on back of shoulders to keep baby's body close to yours and face is touching the breast at all four points



## Cross Cradle Hold

When feeding baby sitting up:

- ⌘ Baby needs to be up to the level of the breast.
- ⌘ Baby should be turned so that baby is in alignment: tummy facing you and head not turned to the side but facing straight ahead.

## Side-lying Hold

⌘ Slide your little one up so their nose is level with your nipple and your arm is above their head.

⌘ Roll your baby onto their side pulling their hips or knees close to your hips. Try to position baby so their ear, shoulder and hip are in one line.



## How to maintain your milk supply:

1. Frequent Feeding (8-12 times a day)
2. Ask for assistance from staff when baby indicates he wants to feed again after the first initial feed (within 6hrs)
3. Avoid the use of formula or artificial bottles. Teats if baby not latching yet.
4. Express breasts 8-9 times in 24 hours if baby is not feeding frequently and then give expressed breast milk to baby.
5. Keep baby skin to skin during the day and feed when showing feeding cues: chewing on hands, wriggling, or licking lips.

## What do I do if my breasts become overfull and my baby is sleeping?

- ⌘ Try waking baby for another feed.
- ⌘ Hand express just to relieve the pressure on your breasts and store the milk for later.

## How do I make sure my baby is getting enough milk?

- ⌘ Breastfeed at least 8 times a day.
- ⌘ Check baby's poos are changing colour from black to greeny yellow (day 3) to yellow (day 5).
- ⌘ Check baby has more than 5 wet disposable nappies/ 6 wet cloth nappies per day

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## **Common Problems**

*When to contact my midwife:*

### **Baby**

- ⌘ If output (wees and poos) is less than above
- ⌘ If baby's skin is becoming yellow before 24 hours or increasingly yellow after day 3
- ⌘ Baby sleepy and not feeding

### **Mother**

Breasts painful reddened areas

Nipples painful, cracked

*"The more you breastfeed the more milk you will make."*

## Hand Expressing:

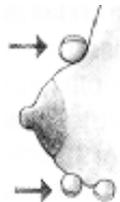
It is important to label your expressed breastmilk with your name **and** the date and time you expressed it. Staff will assist you to refrigerate and store appropriately.



Correct Positioning



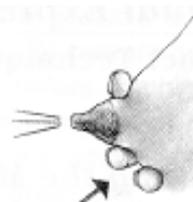
Incorrect Positioning



Push into chest wall



Roll



Finish Roll



Right Hand



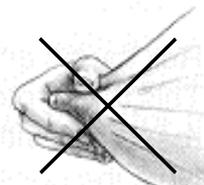
Left Hand



Squeeze



Slide



Pulling



Images taken from an article titled “Learn How to Hand Express Breastmilk”, 1988 by Chele Marmet and the Lactation Institute published on the ParentsPlace.com website.

## Milk Storage:

Breastmilk	Room Temperature	Refrigerator	Freezer
Freshly expressed into a closed container	4 hours (26°C or lower). If refrigeration is available store milk there	2 days (4°C or lower) Store in back of refrigerator where it is coldest	2 weeks in freezer compartment inside refrigerator. 4 months in freezer section of refrigerator with separate door. 6–12 months in deep freeze (-18°C or lower).
Previously frozen— thawed in refrigerator but not warmed	4 hours or less (ie the next feeding)	Store in refrigerator 24 hours	Do not refreeze
Thawed outside refrigerator in warm water	For completion of feeding	Hold for 4 hours or until next feeding	Do not refreeze
Infant has begun feeding	Only for completion of feeding, then discard	Discard	Discard

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## Where to go for help:

Talk to your Midwife/LMC, see orange card for Community Breastfeeding Support contacts.

### **For further help contact:**

- ⌘ Your Well Child provider (Plunket, Tamariki Ora, Pacific Health Services)
- ⌘ Helpful websites and Community Networks: ask for our Orange Card
- ⌘ Plunket + 0800 Plunket Line
- ⌘ Well Child Health Book

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*Visit our website for information on pregnancy, giving birth and taking care of your baby  
All HVDHB Breastfeeding Policies are available on our website.*

[www.huttmaternity.org.nz](http://www.huttmaternity.org.nz)



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