

BREASTMILK FOR YOUR BABY IN THE NICU



The
Children's
Hospital

WOMEN'S & NEWBORN
CENTER



NATURE'S BUILT-IN
NUTRIENT
PROTECTION



Why is human milk so important?

Research shows that mother's milk is the best nutrition for babies. Human milk contains germ-fighters, growth hormones, and is easy to digest. The medical team recommends that your baby get your milk whenever possible. Even if you do not want to feed your baby at the breast, you can still provide pumped milk. Your milk can then be fed using a feeding tube or bottle.

Impact on Mothers

- Mothers report that giving milk for their babies helps them cope with stress and feelings of helplessness when their babies are in the neonatal intensive care unit (NICU).
- Mothers say that giving milk was the one thing they could do for their baby.
- Mothers say that it helps them create a special bond with their baby.



PROVIDING MILK

Since even small amounts of your milk for a short time can greatly protect and improve your baby's health, it's important to begin expressing your milk within the first few hours after you give birth.

- The milk producing hormone prolactin increases the first few hours and days after your baby's birth but declines if you don't pump/breastfeed.

If you are unsure how long you want to provide milk, you can decide later in your baby's hospital stay.

- Some mothers keep pumping and later nurse their baby directly.
- Other mothers decide to feed their babies expressed breastmilk from a bottle.

If you decide to stop expressing and collecting your milk after a week or a month, that is easily done; however, it can be hard for you to start making milk at a later time.



Collecting Milk for Your Baby

Many babies in the NICU are not ready to begin feeding at the breast right after birth. You will need to express your milk with a breast pump. Any milk you collect can be chilled or frozen until it is fed to your baby. Breastmilk can be used for oral care before feedings begin. Even if your baby is not quite ready for feedings, you should remove the milk from your breasts early, often and fully, so that your body gets the signal to make a good supply.

You will need to obtain a good breast pump to express your milk both while you are in the hospital and after you go home.

A lactation consultant can advise you on good pumps and will teach you how to use the pump.

After your milk supply is established in about six to eight weeks, regular pumping of the breasts is the only way your body knows to keep making milk.

BREASTFEEDING

Being in close physical contact with your baby will help stimulate your milk production.

- Some mothers collect more milk while sitting at their baby's bedside in the NICU.
- It is also good to use the breast pump right after holding your baby skin-to-skin (kangaroo care).

Finding a Breast Pump

Hospital-grade pumps are on-hand for mothers while they are patients in the hospital. For mothers who have gone home from the hospital, they are available for use:

- in the NICU
- at Ronald McDonald House

These pumps can also be:

- obtained from WIC for mothers who qualify
- rented
- purchased
- most insurances now supply pumps

A lactation consultant can assist you in getting a hospital-grade pump from WIC or provide you with a list of locations where you can rent or purchase a breast pump.



Storing Your Milk

Mothers are given containers in which to store their expressed milk. Milk freezers are in all the NICUs. Our staff takes great care in handling and storing your milk.

- Each baby has a labeled plastic bin to hold the storage containers.
- The temperature inside the freezers is checked and recorded at regular times.
- For the safety of all the babies, only the NICU staff has access to the milk freezers. The staff will be happy to show you where your baby's milk is kept.

Early Nursing at Breast

If you choose you want to nurse at breast, your baby's overall medical condition will help decide when feeding at the breast can start. You may discuss this with your baby's doctors and nurses to find the very best time for your baby to begin learning how to nurse at your breast.

- No certain weight or age applies for preterm babies to start nursing at their mother's breast.
- A baby's sucking and swallowing ability helps decide when nursing at the breast should begin.

You may have heard that nursing is “more work” for a baby or “takes more energy” than bottle feedings. Research shows that this is not true. In fact, when the same preterm babies were studied during both feedings at the breast and bottle feedings, they showed higher oxygen levels and more stable breathing when at the breast. Babies are also less likely to aspirate (choke) when nursing than when bottle-feeding.

Spending time with your baby in kangaroo care each day not only helps your milk supply, it also helps you both get ready for nursing. Babies are so relaxed, warm and secure during kangaroo care, they use less energy due to stress, cold and pain. Your baby knows you and will often begin rooting, licking or nuzzling at your breast or nipple.

- Even small babies may suck and swallow a little bit during kangaroo care.
- Daily kangaroo care is an early step to nursing at breast.

Later Nursing at Breast

The process by which a preterm baby learns to breastfeed is usually a gradual one and preterm babies need many opportunities to practice their skills.

Your baby’s nurse or a lactation consultant will be able to assist you with nursing.

We want babies to have plenty of time to learn how to nurse at breast before they go home, so start as soon as your baby is able.

- Some babies may be exclusively breastfeeding when it is time to leave the hospital.
- Other babies may be partly feeding at the breast and taking some milk by bottle.

Whether your baby is fully or partly nursing, it is important that you feel confident in feeding your baby before your baby goes home.

Donor Human Milk

The Children’s Hospital wants mother’s milk for all babies when possible. At times when mother’s milk is not available, your baby’s doctor may want to use human milk from a licensed milk bank.



What if I cannot provide my own milk or don't have enough milk?

A mother who is sick or taking medicine may be unable to produce milk that is safe for her baby. This may be a short-term problem. The lactation (breastfeeding) specialists can review your medications and medical history to help you know if your milk is safe. Donor human milk may be used during the time you are sick or taking medications.

Some mothers have problems pumping enough milk. This may happen when you are sick or your baby is premature. We can teach you how to increase your milk supply. Donor human milk is available during this time, if needed.

What is donor milk and how is it prepared?

The Oklahoma Mother's Milk Bank uses milk donated by healthy mothers with extra milk to share. Donors are asked about their medical history and use of drugs and alcohol. Donors are given a blood test for diseases. Milk from several donors is mixed together. It is then heat-treated to kill germs. This also reduces some of the germ-fighting abilities. The milk is then frozen and sent to the hospital.



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