This book gives you advice on:

becoming a parent

taking care of yourself and your child

finding practical help and support

ASPIRIN
Do NOT give Aspirin to children under the age of 16 years
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About this book

No one needs a book to tell them what's good about being a parent. Parents turn to books when they need information, when they're anxious, when they've got questions or concerns, small or large. This is a book you can turn to.
There's something very special and exciting about being alone for the first time with your new baby, but it can also be frightening. This is when you begin to realise that you can never go back.

You're now responsible for a new human being. The responsibility may seem much too big. You may have a secret wish to run home to your own mother and ask her to take over. Or you may be the kind of person who just knows that you'll get through and that everything will turn out fine in the end.

In these early weeks you'll find there's a great deal to learn, and all of it at the same time. Think of these first few pages as a guide to the basic information you'll need to survive. Today it might seem impossible. In a matter of months you'll look back and wonder how it could have all seemed so hard. Read Chapter 7 for more on how having a baby changes your life.
Coping with the First Few Weeks

- Make your baby your first task and try not to worry about everything else.

- Ask for help from your partner, mother or friends. Sometimes people with small babies of their own can be the most help because they know what it's like. The health visitor and midwife will also help you to put things into perspective.

- Accept help and suggest to people what they can do: cook a meal and bring it round; do a stack of washing up; do bits of shopping when you run out; take the baby for a walk.

- Sleep whenever your baby allows you to.

- Practise relaxation techniques (see page 124).

- Keep a good supply of nutritious snacks, like fruit, milk and wholemeal bread, which you can eat without cooking.

- See friends when you want to and, if you're tired, tell your friends and suggest that they leave and come back later.

- Remember, this period is hard but it lasts for a relatively short time and it does get better.
IS IT THE BLUES OR POSTNATAL DEPRESSION?

THE BABY BLUES

During the first week after childbirth, most women get what is often called the 'baby blues'. Symptoms can include feeling emotional and irrational, bursting into tears for no apparent reason, feeling irritable or touchy or feeling depressed or anxious. All these symptoms are normal and usually only last for a few days. They are probably due to the sudden hormone and chemical changes which take place in your body after childbirth.

PUERPERAL PSYCHOSIS

One or two mothers in 1000 will also develop an obvious severe psychiatric illness after the birth of their baby, which requires hospital treatment. Usually a complete recovery is made, although this may take a few weeks or months.

POSTNATAL DEPRESSION

This lies between the baby blues and puerperal psychosis, and is an extremely distressing condition with many symptoms. Postnatal depression is thought to affect at least one in ten women, but many women suffer in silence or the condition may go unnoticed by health professionals.

Postnatal depression usually occurs two to eight weeks after delivery. In some cases the baby blues do not go away or the depression can appear up to six months or even a year after the birth of the baby. Some symptoms such as tiredness, irritability or poor appetite are normal if you have just had a baby, but usually these are mild and do not stop you leading a normal life. With postnatal depression you may feel increasingly depressed and despondent and looking after yourself or the baby may become too much. Some other signs of postnatal depression are:

- anxiety
- panic attacks
- sleeplessness
- aches and pains or feeling unwell
- memory loss or unable to concentrate
- can’t stop crying
- feelings of hopelessness
- loss of interest in the baby.

If you think that you are suffering from postnatal depression don’t struggle on alone. It is not a sign that you are a ‘bad mother’ or are unable to cope. Postnatal depression is an illness just like any other illness. Ask for help just as you would if you had the flu or had broken your leg. Talk to someone you can trust such as your partner or a friend or ask your health visitor to call. It is also important to see your GP – if you don’t feel up to making an appointment, ask someone to do this for you, or arrange for the GP to call. You may also find it helpful to contact the Association for Postnatal Illness, Meet-a-Mum Association (MAMA) or the National Childbirth Trust (see page 141) (see also Feeling depressed, on page 125).
Breastfeeding gives babies the best start in life. As the box on this page shows, it gives them many benefits that bottle feeding is unable to provide. If your baby is born prematurely then it’s even more beneficial. And there are advantages for you too (see box on page 8). Even if you only breastfeed for a few weeks, your baby will benefit, although the longer you can breastfeed for, the greater the benefits. So, if you are undecided about breastfeeding, why not give it a try? Very occasionally a mother is advised not to breastfeed. For example, if she is HIV positive, because of the risk of passing the virus on to the baby, or if she is taking some essential medication that may be harmful to the baby.

SUCCESSFUL BREASTFEEDING

Knowing how to breastfeed is a skill that needs to be learnt. Some women and babies find this easy, others a little more difficult at first. With practice and support you will soon gain confidence. Understanding how your breasts produce milk and how to deal with any problems that may arise can help you to breastfeed successfully. The next few pages give you lots of information about this.

Your milk supply
Your breasts produce milk in response to your baby feeding at your breast. The more your baby feeds, the more milk you produce, provided that your baby is correctly positioned (see Finding the right position – for your baby on page 9). So, if you let your baby feed whenever he or she wants to feed, you’re likely to produce the amount of milk your baby needs. This is

BEST FOR BABY

• Breast milk is the only food naturally designed for your baby and contains all the nutrients your baby needs in the right proportions.
• Breast milk contains antibodies and other protective factors which are transferred from you to your baby to help him or her fight against infections. It also helps to build up long-term resistance to infections. Babies who are breastfed are less likely to have gastroenteritis, urinary tract or ear infections, coughs or colds.
• Breast milk is easily digested and absorbed and it is less likely to cause stomach upsets or diarrhoea. It will also help to avoid constipation in your baby.
• Breastfed babies may be less likely to develop allergies such as eczema and asthma.
• Breast milk contains growth factors and other substances which help your baby’s growth and development. Formula milks manufactured from cow’s milk and used for bottle feeding don’t contain any of these living factors, which you alone can provide for your baby.
• Breastfeeding may help to prevent juvenile diabetes in children who are genetically susceptible to this.
• Some studies have found that children who are breastfed have better dental health and better eyesight.
• Very tiny premature babies who are given breast milk have less risk of serious complications while they are gaining their strength.
• Breastfed babies may be easier to wean because they have already tasted, through your breast milk, traces of what you have eaten and drunk.