Birth to Five

This book gives you information on:

Becoming a parent
Taking care of yourself and your child
Finding practical help and support
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This book is given free to all mothers.

Every effort has been made to make this book reflect the most up-to-date medical advice at the time of publication. Because developments can be very rapid, significant changes will always be notified to doctors and other health professionals at once. They will then be incorporated into the text for the next reprint. For the most up-to-date information and advice, visit the online version of the book at www.nhs.uk/birthtofive

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Birth to Five

This book gives you information on:

Becoming a parent
Taking care of yourself and your child
Finding practical help and support

your complete guide
No one needs a book to tell them what is good about being a parent. Parents turn to books when they need advice, when they are worried and when they have got questions or concerns, small or large.

This is a book you can turn to for guidance and advice on the growth and development of your child. If there is anything you are unsure of, or if you need further explanation, don’t hesitate to ask your health visitor or doctor.

The information in this book is also available online from the NHS Choices website at www.nhs.uk/birthtofive
Attaching your baby

To begin breastfeeding, hold your baby close to you with their nose level with your nipple. Let their head tilt a little so the top lip can brush against your nipple. This should make their mouth open. Once the baby’s mouth is wide open, bring them to your breast, chin first, head tipped up and nose clear of the breast. Make sure your baby takes in a large mouthful of breast, not just the nipple. Your nipple should go towards the roof of your baby’s mouth.

The let-down reflex

Your baby’s sucking causes milk stored in your breasts to be squeezed down ducts inside your breasts towards your nipples. This is called the ‘let-down’ reflex.

Some women get a tingling feeling which can be quite strong, while others feel nothing at all. You will see your baby respond and their quick sucks change to deep rhythmic swallows as the milk begins to flow. Babies often pause after the initial quick sucks while they wait for more milk to be ‘delivered’. If your baby falls asleep quickly before the deep swallowing stage, check that they are properly latched on. It might be easier to get someone else to check for you. Sometimes you will notice your milk flowing in response to your baby crying or when you have a warm bath.

If you have any concerns about any of these points, talk to your peer supporter, midwife, GP or health visitor, or contact the National Breastfeeding Helpline on 0300 100 0212.

Note that if your baby seems unusually sleepy and/or is slow to start feeding, they may be ill, so contact your GP as soon as possible.

Helpful tips

Breastfeeding should feel comfortable. Your baby should be relaxed. You should hear a soft swallowing. If it doesn’t feel right, start again. Slide one of your fingers into your baby’s mouth, gently break the suction and try again.

How do I know that my baby is feeding well?

- Your baby has a large mouthful of breast.
- Your baby’s chin is firmly touching your breast.
- It doesn’t hurt you to feed (although the first few sucks may feel strong).
- If you can see the dark skin around your nipple, you should see more dark skin above your baby’s top lip than below their bottom lip.
- Your baby’s cheeks stay rounded during sucking.
- Your baby rhythmically takes long sucks and swallows (it’s normal for your baby to pause from time to time).
- Your baby finishes the feed and comes off the breast on their own.
In the beginning, it can seem that you are doing nothing but feeding, but gradually your baby will get into a pattern of feeding and the amount of milk you produce will settle. Your baby will be happier if you keep them near you and feed them whenever they are hungry. This will quickly help your body to produce the amount of milk your baby needs. At night, your baby will be safest sleeping in a cot in the same room as you. This will make feeding easier and will reduce the risk of cot death. Try to take each day as it comes. If you are very uncomfortable or sore, ask for help as soon as possible.

**First steps: starting to breastfeed**

You might like to watch the *Bump to Breastfeeding* DVD as you read this part of the chapter so you can see what to expect. You should have been given a copy of the DVD during your pregnancy. If not, ask your midwife or health visitor for one. For more information visit www.bestbeginnings.info

**Getting comfortable**

You can breastfeed in a number of different positions. Finding one that is comfortable for both of you will help your baby feed as well as possible.

If you are lying back in a well supported position with your baby lying on your tummy, they will often move themselves onto your breast and begin to feed.

Remember at all times to keep your baby safe.

You can try feeding lying on your side or in a chair, supported in an upright position. This will make it easier to hold your baby so their neck, shoulders and back are supported and they can reach your breast easily. Their head and body should be in a straight line.

1. Hold your baby’s whole body close with the nose level with your nipple.

2. Let your baby’s head tip back a little so that their top lip can brush against your nipple. This should help your baby to make a wide open mouth.

3. When your baby’s mouth opens wide, the chin is able to touch the breast first, with the head tipped back so that the tongue can reach as much breast as possible.

4. With the chin firmly touching, and with the nose clear, the mouth is wide open, and there will be much more of the darker skin visible above your baby’s top lip than below their bottom lip – and their cheeks will look full and rounded as your baby feeds.

**Partners and breastfeeding**

As a partner, you can bond with your baby in lots of different ways, like bathing, changing nappies and carrying your baby in a sling close to you. You can also help by bringing your baby to their mother when it’s time for a feed. Some parents worry that breastfeeding will make it harder for their partner to bond with the baby. But this doesn’t have to be the case.

You have an important role to play in supporting your partner, for example by preparing meals or providing extra help so she can get some rest. You can do small, practical things like making sure she has got a cool drink to hand while she is feeding, and later you can even give some feeds yourself, using expressed milk.
BREASTFEEDING

Just like any new skill, breastfeeding takes time and practice to work well. In the first few days, you and your baby will be getting to know each other. Any close contact and holding your baby against your skin can really help with this.

The more time you spend with your baby, the quicker you will learn to understand each other’s signs and signals. The next few pages will help you to understand how breastfeeding works. And remember, it’s OK to ask for help.

Immediately after your baby is born

Every pregnant woman has milk ready for her baby at birth. This milk is called colostrum and it is sometimes quite yellow in colour. It is very concentrated, so your baby only needs a small amount at each feed, which might be quite frequent. It is full of antibodies to boost your baby’s ability to fight off infection.

Holding your baby against your skin straight after birth will calm them, steady their breathing and keep them warm. It will also encourage them to breastfeed. Babies are often very alert in the first hour after birth and keen to feed. Your midwife can help you with this.

The first few days

Each time your baby feeds, they are letting your body know how much milk it needs to produce. The amount of milk you make will increase or decrease in line with your baby’s needs. Around days two to four, you may notice that your breasts become fuller and warmer.

This is often referred to as your milk ‘coming in’. To keep yourself as comfortable as possible, feed your baby as often as they want. Your milk will vary according to your baby’s needs. It will look quite thin compared with colostrum, but gets creamier as the feed goes on. Let your baby decide when they have had enough.

Sometimes, breastmilk may leak from your breast – try gentle but firm hand pressure on your nipple whenever this happens. This usually helps very quickly. If you decide to buy breast pads, it is necessary to change them at each feed. Plastic-backed ones can make you even soggier.

‘Liquid gold’: the perfect food for your newborn

Colostrum is sometimes called ‘liquid gold’. This extra-special breastmilk is full of germ-fighting antibodies that will help protect your baby against infections that you have had in the past. The first few feeds ‘coat’ your baby’s gut to protect them from germs and reduce the chances of them developing allergies as they get older.

Later on, your breastmilk will still contain antibodies, and as you come across new infections you will have new antibodies in your milk. This means that if you get colds or flu while you are breastfeeding, your baby will automatically get some immunity from those illnesses.
Breastfeeding is the healthiest way to feed your baby. Exclusive breastfeeding (that means giving your baby breastmilk only, with no other food or drink) is recommended for around the first six months of your baby’s life. Breastmilk provides all the nutrients your baby needs and helps to protect them from infections and diseases.

- Your breastmilk is the only food designed for your baby. It contains everything your baby needs for around the first six months of life. After that, giving your baby breastmilk alongside solid food will help them continue to grow and develop. The World Health Organization recommends breastfeeding for two years or longer.

- Breastfeeding protects your baby from infections and diseases. It also offers health benefits for mums. Every day makes a difference to your baby, and the longer you breastfeed, the longer the protection lasts. And it reduces your chance of getting some illnesses later in life. Formula milk cannot give your baby the same ingredients or provide the same protection.

- Breastfeeding helps build a strong bond between mother and baby, both physically and emotionally.

- Breastfeeding reduces the risk of cot death.

Help and support

Midwives, health visitors and trained volunteers – or peer supporters – can all offer information and practical help with breastfeeding. Peer supporters are mothers who have breastfed their own babies and have had special training to help them support other mothers. Talk to your midwife or health visitor about the help that is available in your area.