# Prenatal Breastfeeding Promotion

## A Counseling Guide for Health Care Professionals

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<thead>
<tr>
<th>Counseling Message for Mothers</th>
<th>Background for Professionals</th>
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<tbody>
<tr>
<td>Breastfeeding is best for mothers and babies, including preterm babies. Your body will make milk to match your baby’s changing needs.</td>
<td>Breastfeeding is a newborn’s first relationship and is ideal to continue through the child’s early years. The breastmilk of a mother is designed to meet her baby’s needs and the composition changes over time depending on the age of the baby. Breastmilk is especially important for preterm babies because of enhanced brain and immune system development.</td>
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<tr>
<td>Formula-fed babies are more likely to have ear infections, diarrhea, constipation, allergies, asthma, obesity, diabetes, cancer, and pneumonia. Many mothers feel breastfeeding is easier than formula feeding. Breastfeeding saves time, money and decreases the mother’s risk of breast, uterine, and ovarian cancer.</td>
<td>Women who have encouragement to breastfeed from healthcare providers are four times more likely to initiate breastfeeding. The duration of breastfeeding and frequency of exclusive breastfeeding at six months is also significantly higher in women with support.</td>
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<td>Support from the father of the baby, family, friends and health care providers is critical to your breastfeeding success. There are many things that others can do to help you with the baby such as: cuddling, rocking, bathing and diapering. These all help connect with the baby.</td>
<td>Breastmilk provides everything a healthy baby needs for the first 6 months of life provides the greatest benefit. Supplementing with formula or water can interfere with milk supply and lead to early weaning. Wait until one month to introduce a pacifier. If you choose to give your baby a bottle, wait until your baby is one month old.</td>
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<td>Exclusive breastfeeding (breastmilk only) for the first 6 months of life provides the greatest benefit.</td>
<td>Breastmilk provides everything a healthy baby needs for the first 6 months. Formula, water, or other supplemental feedings are not necessary for a healthy baby. Supplemental feedings change the baby’s GI tract and increase the risk for illnesses. Supplemental feedings, especially in the early days, also interfere with a mother’s milk supply. The amount of milk a mother produces depends on the frequency and effectiveness of milk removal from the breast. Artificial nipples on bottles and pacifiers require different movements of the baby’s tongue, lips, and jaw that may make it hard for babies to return to the breast.</td>
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<td>Breastfeeding within the first hour assists the baby in colonizing mother’s bacteria, helps stabilize baby’s temperature and blood sugar levels, and decreases the chance of maternal hemorrhage. Rooming-in encourages unrestricted nursing which helps mother/baby learn the art of breastfeeding, stimulates an increase in milk volume and assists in decreasing newborn jaundice.</td>
<td>Opening the breast to the baby in the first hour encourages unrestricted nursing which helps mother/baby learn the art of breastfeeding, stimulates an increase in milk volume and assists in decreasing newborn jaundice.</td>
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<td>Colostrum is your baby’s first immunization. Colostrum has a laxative effect that helps baby pass their first stool.</td>
<td>Colostrum has a high concentration of nutrients and antibodies which enhances the baby’s immune system. It is small in quantity (teaspoons not ounces) and provides everything that a healthy newborn needs.</td>
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<td>American Academy of Pediatrics recommends breastfeeding for at least 12 months or as long as mutually desired by mother and baby.</td>
<td>American Academy of Pediatrics recommends exclusive breastfeeding for the first 6 months followed by continued breastfeeding with complementary foods until at least 12 months. The benefits of breastfeeding continue beyond the first year. There is no evidence of psychological or developmental harm from breastfeeding into the third year of life or longer.</td>
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<td>The World Health Organization recommends breastfeeding for at least two years.</td>
<td>Ask about pregnancy practices where you plan to give birth. Breastfeed within the first hour unless you or your baby requires medical attention. Keep your baby in your room even at night to increase your confidence and milk supply. Ask what help is available when you have questions or if problems arise.</td>
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## Background for Professionals

- Breastfeeding is a newborn’s first relationship and is ideal to continue through the child’s early years. The breastmilk of a mother is designed to meet her baby’s needs and the composition changes over time depending on the age of the baby. Breastmilk is especially important for preterm babies because of enhanced brain and immune system development.

- Women who have encouragement to breastfeed from healthcare providers are four times more likely to initiate breastfeeding. The duration of breastfeeding and frequency of exclusive breastfeeding at six months is also significantly higher in women with support.

- Breastmilk provides everything a healthy baby needs for the first 6 months of life. Supplementing with formula or water can interfere with milk supply and lead to early weaning. Wait until one month to introduce a pacifier. If you choose to give your baby a bottle, wait until your baby is one month old.

- Breastmilk provides everything a healthy baby needs for the first 6 months. Formula, water, or other supplemental feedings are not necessary for a healthy baby. Supplemental feedings change the baby’s GI tract and increase the risk for illnesses. Supplemental feedings, especially in the early days, also interfere with a mother’s milk supply. The amount of milk a mother produces depends on the frequency and effectiveness of milk removal from the breast.

- Artificial nipples on bottles and pacifiers require different movements of the baby’s tongue, lips, and jaw that may make it hard for babies to return to the breast.

- Colostrum has a high concentration of nutrients and antibodies which enhances the baby’s immune system. It is small in quantity (teaspoons not ounces) and provides everything that a healthy newborn needs.

- American Academy of Pediatrics recommends exclusive breastfeeding for the first 6 months followed by continued breastfeeding with complementary foods until at least 12 months. The benefits of breastfeeding continue beyond the first year. There is no evidence of psychological or developmental harm from breastfeeding into the third year of life or longer.

- Breastfeeding within the first hour assists the baby in colonizing mother’s bacteria, helps stabilize baby’s temperature and blood sugar levels, and decreases the chance of maternal hemorrhage. Rooming-in encourages unrestricted nursing which helps mother/baby learn the art of breastfeeding, stimulates an increase in milk volume and assists in decreasing newborn jaundice.
### Prenatal Breastfeeding Promotion (continued)

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| Ask for breastfeeding accommodations at work.  
  - Talk with your supervisor about your plans to breastfeed.  
  - Find out if your work site provides a lactation support program. If not, ask about private areas other than a bathroom where you can comfortably and safely express milk.  
  - Find other women at your company who have breastfed after returning to work and ask them to share their tips. | Encourage breastfeeding for at least 12 months.  
  - Breastfeeding mothers are less likely to miss work to take care of a sick baby because their babies are healthier. Health care costs will also be lower.  
  - Employees who receive support for breastfeeding are more productive.  
  - Section 4207 of the Patient Protection and Affordable Care Act states that employers shall provide “reasonable break time” and a private, non-bathroom place to express breastmilk during the workday, up until the child’s first birthday. |
| You can breastfeed when your baby gets teeth. It is not possible for your baby to bite, suck, and swallow at the same time. Ask for tips on dealing with biting when your baby starts to teethe. | Biting typically occurs at the end of feedings when babies are no longer hungry, but playful. It may also happen when mothers are breastfeeding while doing other things (e.g., talking on the phone) and not interacting with their babies. |
| Most prescriptions and over the counter medicines can be taken during breastfeeding.  
  - Check with health care providers (yours and your baby’s) before taking anything.  
  - Tell your provider how important breastfeeding is to you and ask them to help you continue. The Infant Risk Center (806-352-2519) takes calls from parents and professionals on questions about medicines when breastfeeding. The website, [www.infantrisk.org](http://www.infantrisk.org) is a good resource as well for pregnant and breastfeeding women. | Prescribe medications that will expose the baby to the least amount of the drug; i.e., those with the shortest half life, the lowest dose possible and time the dose related to the baby’s typical feeding schedule. Check credible resources like Thomas Hale’s book, Medications and Mother’s Milk and the website Lactmed. If temporary weaning is necessary, provide instructions about how to maintain a full milk supply with a quality electric breast pump. |
| You don’t need to eat a perfect diet when breastfeeding although it is best to avoid alcohol and tobacco. If you choose to use alcohol or tobacco limit as much as possible. Mothers who consume alcohol need to wait at least 2-3 hours per drink and until they no longer feel the effects before nursing. Keep 2nd and 3rd hand smoke away from your baby.  
  If you smoke you should:  
  - Limit smoking as much as possible  
  - Explore use of a nicotine patch  
  - Smoke only after nursing the baby  
  - Make a “no smoking” rule in your home and car | Encourage breastfeeding mothers to consume a variety of healthy foods every day and drink when thirsty.  
  Excessive alcohol intake (≥2 drinks/day) can:  
  - decrease a baby’s growth  
  - cause motor delay  
  - interfere with the milk ejection reflex that decreases a baby’s intake. |
| You can learn to breastfeed discreetly when you’re with family and friends.  
  - Seek out family and friends who have had a positive breastfeeding experience and ask them how they handled these concerns.  
  - You may practice ways to breastfeed discreetly before breastfeeding in front of others. | Help her verbalize her concern about breastfeeding in front of others. Encourage her to share how important breastfeeding is to her and seek their support. Refer her to prenatal classes and new mother support groups where her concerns can be discussed. Iowa Code 135.30A states that a woman may breastfeed her own child in any public location where the mother and the child are allowed to be. |

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