

When your breastfed baby needs extra milk





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Occasionally breastfed babies may need to be given extra milk (also called a supplement) in addition to breastfeeding. A health care provider will tell you how much extra milk or supplement to offer your baby. It is important to get help with breastfeeding if you need to give a supplement.

A breastfed baby MAY need a supplement if:

- They are having trouble latching onto the breast
- They are not able to remove enough milk from the breast
- Milk supply is low
- They are premature or ill and cannot feed directly at the breast
- They are not having the correct number of wet or dirty diapers
- Breastfeeding has been interrupted for some reason
- Mother and baby have been separated
- Your health care provider is concerned that the baby is not growing as expected

Where to get breastfeeding help in York Region:

It is important to follow-up with a health care provider and breastfeeding expert when you are giving your baby extra milk. They will monitor your baby's growth and help you work toward your breastfeeding goals.

York Region Community and Health Services Department offers breastfeeding assistance and support. Telephone counselling and in person clinic appointments are available. Call York Region Health Connection at **1-800-361-5653**, **TTY 1-866-252-9933**, to get breastfeeding help or visit york.ca/breastfeeding

What to feed your baby

If a health professional has told you that your baby needs a supplement, you may be wondering what to feed them.

Expressed breastmilk

- When available, **your own expressed breastmilk** is the recommended supplement
- Fresh expressed breastmilk will provide your baby with all the protective effects of breastmilk
- If fresh expressed breastmilk isn't available, **thawed, previously frozen breastmilk** can also be given

Breastmilk from a donor milk bank

- At this time in Ontario, this is only available to hospitalized or ill babies.

Cow's milk-based infant formula

- If your own expressed breastmilk is not available, or if you are not able to produce enough breastmilk to meet your baby's needs, **commercial cow-milk based infant formula** should be offered (unless your health care provider has recommended a specialized formula for your baby)
- Soy, lactose-free and other specialty beverages should only be given on the advice of your physician
- Follow the instructions on the label when preparing infant formula
- To learn more about preparing infant formula, including accessing a video on preparation steps, visit www.york.ca/feedingkids

Ask your public health nurse for a copy of the Infant formula booklet or call Health Connection at **1-800-361-5653**, TTY **1-866-252-9933** if you have questions about how to safely prepare or feed infant formula.

The following are not appropriate for babies as a substitute for breastmilk:

- Cow's or goat's milk
- Raw or unpasteurized milk
- Other beverages such as soy, rice or almond
- Evaporated or condensed milk
- Other toddler supplements such as Enfagrow®, Baboo® milk and Pediasure®

DO NOT give water to babies under 6 months of age

Feeding Safely

Your baby needs to feel secure and comfortable when feeding. Babies should never have breastmilk or infant formula pushed or poured into their mouth. Your baby should not choke, gag or dribble while feeding. It is important to watch your baby's cues and stop or slow down the feeding when your baby shows signs of stress or fullness. Babies should look relaxed while feeding, with a calm face and relaxed hands and arms. Hold your baby skin to skin as much as possible while working on breastfeeding. Skin to skin contact will help your baby feel safe, calm and secure, and will help baby learn to breastfeed.

Signs of stress during feeding:

- Swallowing quickly without taking a breath after each swallow
- Making smacking or squeaking noises
- Squirming or struggling during the feed
- Pushing feeding device away with hands or tongue
- Breathing fast or working hard to catch breath
- Milk leaking or dribbling out of mouth

If signs of stress are shown, give your baby a break and watch for signs of hunger (known as feeding cues) to resume. Feeding cues include hand to mouth movements, turning head from side to side and sucking sounds and movements. If feeding cues are present, continue feeding. If they do not resume, end the feeding.

If your baby is having difficulty breastfeeding, is unable to feed by any other method, and is not having the correct number of wet and dirty diapers, contact your physician or visit the nearest emergency room **immediately**.

Ways to supplement your baby

- Lactation aid at the breast
- Finger feeding
- Cup, spoon, or syringe
- Bottle



Lactation Aid

A lactation aid is a tube placed at the breast which will allow your baby to receive extra milk while breastfeeding. It works like a straw. This method allows your baby to remove milk from your breast, as well as getting the extra milk needed through the tube. It can help increase milk supply and be less confusing to your baby than other methods of feeding. Commercial feeding tubes or lactation aid systems are available to purchase in the community.

You will need:

- Feeding tube (36 inch #5 French) or commercial lactation aid system
- Container with breastmilk or infant formula
- Medical tape to hold tube to mother's breast — optional
- Syringe to clean the tube

Getting Started:

- Place the large end of the tube into the container of extra milk
- Place the container on a table that is level with your baby's head
 - if the container is too high, the milk will flow too fast
 - if the container is too low, the milk will flow too slowly

There are several ways to position the tube:

Place the tube on your breast so that the end of the tube lines up with the tip of your nipple. You can use a small piece of tape to keep the tube in place or you can hold it while baby latches at the breast. Or, after your baby latches to your breast, slide the tube into the corner of your baby's mouth about 1-2 cm.

Once you have positioned the tube at the breast:

Listen or watch for swallows. You can see the milk go up the tube and see the amount of milk in the container go down.



Finger Feeding

Finger feeding allows baby to receive milk from a feeding tube or syringe while the baby sucks on the caregiver's finger. This method of supplementing is usually used for a short period of time. Other methods of feeding may be more effective after the first week of life. Finger feeding encourages infants to practice sucking while receiving food and avoids the use of artificial nipples which can interfere with breastfeeding.

You will need:

- 36 inch #5 French feeding tube or syringe with a long curved tip
- Tape (optional)
- Container with expressed breastmilk or formula
- Syringe to clean the tube

Getting Started:

- Trim your fingernail on your index (pointer) finger
- Place the large end of the tube into the container with milk
- Place the container on a table level with your baby's head
 - if the container is too high, the milk will flow too fast
 - if the container is too low, the milk will flow too slowly

Place the tube on the pad of your finger – you can use tape to hold the tube in place. With the baby sitting upright, gently touch your baby's lips with your finger until your baby's mouth opens. Your finger should be straight, pad side up, and inserted into your baby's mouth to a length between the first and second knuckle. As your baby drinks, you will hear swallows, as well as see the milk go up the tube and the level of milk in the container go down.



Finger feeding with a syringe (alternate method)

Use the same method as finger-feeding, but don't use a tube. Instead, put the syringe tip in the side of the baby's mouth and squeeze slowly as the baby sucks on your finger. Be careful that the tip of the syringe does not rub against the baby's mouth. Ensure you do not push too much milk into your baby's mouth or push too quickly as this can cause baby distress.

Cup, Spoon or Syringe Feeding

Cup feeding is inexpensive, easy to learn and cups are easy to clean. Any small cup, such as a clean medicine administration cup, can be used.

You will need:

- Medicine cup, small cup or small glass
- Or a small spoon (teaspoon or soup spoon)
- Or a syringe

Getting started

CUP OR SPOON FEEDING

- Make sure your baby is awake and alert and ready to feed
- Sit baby upright

Fill the cup or spoon with a small amount of milk. Place the rim of the cup or spoon gently on the baby's lower lip. Tip the cup or spoon just enough for the milk to touch your baby's lips and let your baby sip or lap up the milk. **Do not pour the milk into your baby's mouth**, follow your baby's cues and take short breaks as needed.

SYRINGE

- Make sure your baby is awake and alert
- Sit baby upright

Fill the syringe with a small amount of milk. Place the syringe on the lower lip and gently press a small amount of the milk into the baby's mouth. The baby will lap it and swallow. Ensure you do not push too much milk into your baby's mouth or push too quickly as this can cause choking and stress.



Bottle Feeding

For some babies, bottle use can make going back to the breast difficult. Babies suck differently on a bottle nipple than on the breast and they can get used to the feel of the silicone nipple in their mouth. Milk can flow out of a bottle more quickly than it naturally would from the breasts. This may also cause some confusion when baby tries to breastfeed.

If you decide to use a bottle:

- Choose a bottle which has a silicone wide based nipple with a round tip
- Choose a slow flow nipple
- Your baby should have a good seal around the wide base of the nipple
- Your baby's lips should not touch the collar which holds the nipple to the bottle
- Use a smaller based nipple if your baby is not able to maintain a good seal around the wide part of the nipple and milk dribbles
- The nipple should not cause your baby to gag — if this happens, use a nipple with a shorter tip

Getting started

- Sit your baby almost fully upright
- Hold the bottle flat (straight, in line with the floor) so that the bottle nipple is about half full of expressed breastmilk or infant formula

Touch your baby's upper lip with the nipple and wait for your baby to open their mouth wide. Put the bottle into your baby's mouth so that the lips seal around the wide base of the nipple and not the smaller tip. Your baby's lips should be turned out. Watch your baby's cues to see how your baby is handling the flow. If your baby appears stressed or is gulping rapidly, lower the bottle, or take the bottle away and give your baby a break. If you hear your baby swallowing air, tip the bottle slightly upwards. You can tip the bottle up at the end of the feeding when there is less milk in the bottle.

NOTE: The side-lying position may be used in special circumstances. Your health care provider will provide information about this position should it be necessary.

Cleaning Feeding Equipment

FEEDING TUBE (LACTATION AID OR FINGER FEEDING)	
Breastmilk used	Infant Formula used
<ul style="list-style-type: none"> • After each feed, fill a syringe with warm soapy water • Connect the syringe to the tube, and push the plunger of the syringe to run the soapy water through the tube • Repeat several times • Repeat with clean warm water a few times until the tube is rinsed well • After rinsing, draw air into the syringe by pulling back on the plunger in mid-air. Push this through the tube to clear the water out of the tube. Repeat several times • Store the tube in a clean container or bag • Replace the tube after no more than five days or when the tube becomes stiff, brittle or discoloured 	<ul style="list-style-type: none"> • Follow the manufacturer's instructions • Some commercial feeding tubes are single use only
CUP OR SPOON	
Breastmilk used	Infant Formula used
<ul style="list-style-type: none"> • Wash with hot soapy water, rinse well and leave to dry on the counter on a clean towel or cloth 	<ul style="list-style-type: none"> • Plastic cups or spoons are single use only if using infant formula <p>For steel/glass cups or spoons:</p> <ul style="list-style-type: none"> • Wash in warm soapy water and rinse well • Place in pot of water, cover pot, bring to a boil for at least two minutes • Allow to cool in covered pot until needed or place on clean cloth or towel on counter to dry • Follow manufacturer's instructions if using a sterilization unit or kit

SYRINGE	
Breastmilk used	Infant Formula used
<p>After each feed, fill the syringe with warm soapy water a few times</p> <ul style="list-style-type: none"> • Repeat with clean warm water a few times until the syringe is rinsed well • After rinsing, draw air into the syringe, and push it back out • Repeat several times • Store the syringe in a clean container or bag • Replace the syringe after five days 	<ul style="list-style-type: none"> • Follow the manufacturer's instructions • Many syringes are single use only
BOTTLE AND NIPPLES	
Breastmilk used	Infant Formula used
<ul style="list-style-type: none"> • Wash with hot soapy water, rinse well and leave to dry on the counter on a clean towel or cloth 	<ul style="list-style-type: none"> • Wash in warm soapy water and rinse well • Place in pot of water, cover pot, bring to a boil for at least two minutes • Allow to cool in covered pot until needed or place on clean cloth or towel on counter to dry • Follow manufacturer's instructions if using a sterilization unit or kit

For more information and support with breastfeeding or feeding your baby, call York Region Health Connection at **1-800-361-5653, TTY 1-866-252-9933**.

PUBLIC HEALTH

1-800-361-5653

TTY:1-866-252-9933

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