

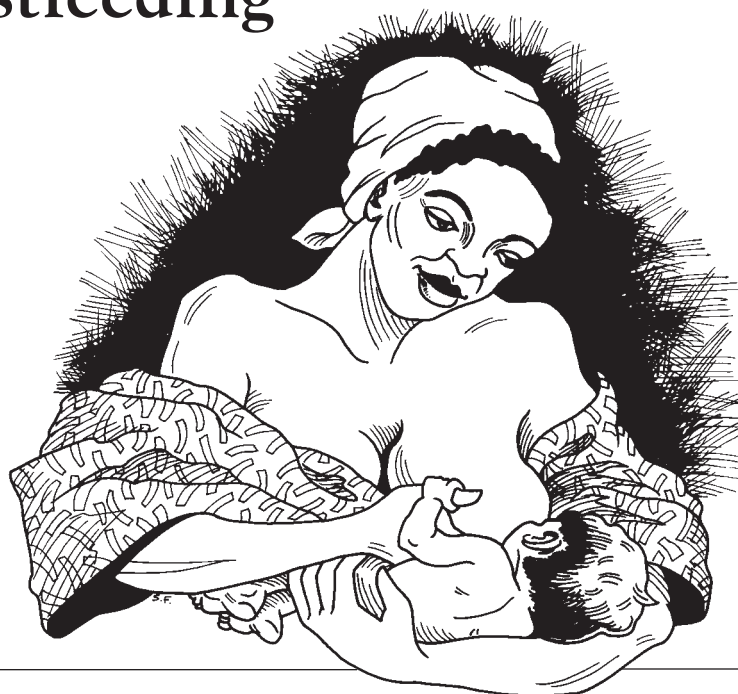
Chapter 7

In this chapter:

Why Breast Is Best.....	105
Why Other Feeding Can Be Harmful	106
HIV and breastfeeding.....	106
How to Breastfeed.....	107
For the new baby.....	107
For any baby.....	107
Advice for the Mother	109
When the Mother Works Outside the Home.....	111
Removing Milk by Hand	112
Common Concerns and Problems	114
Fear there is not enough milk	114
Nipple concerns and problems	114
Pain and swelling in the breasts.....	116
Special Situations.....	118
Babies with special needs can breastfeed	118
When the mother is sick.....	120
When a woman becomes pregnant.....	120
Working for Change.....	121

It is possible to breastfeed your child for as long as you like and never have any problems. But if you have a problem, there are many ways you can help yourself and continue to breastfeed. This chapter has information on healthy breastfeeding practices and help for common problems.

Breastfeeding



Breastfeeding is one of the oldest and healthiest practices in the world. But as the world changes, women sometimes need information and support to keep breastfeeding their babies.

Breastfeeding is important because:

- **Breast milk is the only perfect food** to help a baby grow healthy and strong.
- Breastfeeding helps the womb stop bleeding after birth.
- Breast milk protects the baby against illnesses and *infections* like *diabetes*, *cancer*, *diarrhea*, and *pneumonia*. The mother's defenses against illness are passed on to the baby through her milk.
- Breastfeeding helps protect the mother against diseases like *cancer* and weak or brittle bones (*osteoporosis*).
- When a woman breastfeeds her baby, the milk is always clean, always ready, and always the right temperature.
- Breastfeeding helps the mother and baby feel close and secure.
- For some women, giving their babies nothing but breast milk can help protect them from becoming pregnant again too soon.
- Breastfeeding is free.

Why Breast Is Best

► *It is best to breastfeed for as long as possible, at least for one year. During the first 6 months, give your baby nothing but breast milk.*

Why Other Feeding Can Be Harmful

Companies that make artificial milk (infant formula) want mothers to feed their babies formula instead of breast milk so that the companies can make money. Using bottles or giving formula is often very unsafe. Millions of babies fed with bottles or formula have become malnourished or sick, or have died.



Bottle-fed babies are more likely to get sick and die.

- Formula and other milks, such as tinned milk or the milk of animals, do not protect babies from disease.
- Formula and other milks can cause sickness and death. If the bottle, nipple, or water used to make the formula is not boiled long enough, the baby will swallow harmful germs and get diarrhea.
- When babies drink from the breast, they use their tongue to suckle, or 'milk' the breast. It is very different from what a baby's mouth does when sucking on a bottle. By sucking on a bottle the baby may forget how to suckle well on the breast. And if the baby does not suckle on the breast enough, the mother's milk supply will decrease, and the baby will stop feeding from the breast completely.
- Bottle-feeding costs a lot of money. For one baby, a family would need 40 kg of formula powder in the first year. Buying a day's worth of formula and enough fuel to boil water can cost more than the family earns in a week—or even a month.

Can I really buy all this in one year?

Some parents try to make the milk or formula last longer by using less powder or more water. This makes a baby malnourished, grow more slowly, and get sick more often.



HIV AND BREASTFEEDING

A woman with HIV must make a decision about the safest way to feed her baby. She will need to compare other health risks with the risk of HIV infection. For help with this decision, see page 293.

FOR THE NEW BABY

After birth, a mother should breastfeed during the first hour. It will help her womb stop bleeding and return to normal. Skin-to-skin contact between mother and baby, and the baby's suckling, will help her milk to start flowing.

Newborn babies need the first yellow-colored breast milk (colostrum) that comes out of the breasts for the first 2 or 3 days after birth. Colostrum has all the nutrition that a new baby needs, and it protects against disease. Colostrum also cleans the baby's gut. There is no need to give herbs, teas, or water to do this.

FOR ANY BABY

Feeding from both breasts, but **let the baby finish one breast first** before offering the other. The whiter milk that comes after the baby has been feeding for a few minutes is richer in fat than the first milk. The baby needs this fat, so it is important to let the baby finish one breast before offering the other. The baby will let go when it is ready to stop or switch. If the baby takes only one breast at a feeding, begin the next feeding on the other breast.

Feed your baby whenever it is hungry, day and night. Many new babies will suckle about every 1 to 3 hours, especially in the first months. Let the baby suckle as long and as often as it wants. The more it suckles, the more milk you will make.

You do not need to give cereals, other milk, or sugar water—even in hot climates. These can make the baby take less breast milk and may be harmful before 4 to 6 months.



How to Breastfeed

► *Babies want to suckle when they are hungry, thirsty, fighting off a sickness, growing a lot, or need comfort. If you are not sure what your baby wants, try breastfeeding.*

Mothers who keep their babies close by at night can breastfeed more easily. If she sleeps with the baby, the mother can breastfeed and sleep at the same time.

Helping the baby burp (wind)



Sometimes when babies suckle they swallow air, which can make them uncomfortable. You can help a baby bring this air up if you hold it on your shoulder or chest and rub its back, or rub its back while it sits or lies on your lap.

These positions will also help comfort a restless baby or a baby that cries more than usual.



► Do not pinch the nipple when giving the breast to the baby.

How to hold the baby

When breastfeeding, it is important to hold the baby so it can suckle and swallow easily. The mother should also be in a relaxed, comfortable position so that her milk can flow well.

Support the baby's head with your hand or arm. Its head and body should be in a straight line. Wait until its mouth is open wide. Bring the baby close to the breast and tickle its lower lip with the nipple. Then move the baby onto your breast. The baby should have a big mouthful of the breast, with the nipple deep inside its mouth.



This baby has a good mouthful of breast.



This baby does not have enough breast in its mouth.

Chest to chest, chin to breast.

The mother's back is straight.



With a newborn, the mother's hand should cover the baby's bottom.

The baby's head is supported and in a straight line with the rest of his body.

The baby suckles the breast, not just the nipple.

The baby's body is straight and turned toward the mother's.



This is another good position any woman can use. Use pillows or some rolled up cloth under the baby.

If you are having trouble breastfeeding, get help from a woman who has experience. She can often help more than some health workers. Do not use a bottle. It will teach the baby a different kind of sucking. **Keep trying.** Sometimes it takes practice for you to find good positions for your baby, or for a baby to learn to suckle well.

These are signs that something may be wrong with how you are holding the baby, or how much breast the baby has in its mouth:

- If the baby is restless, cries, or does not want to feed, it may be in an uncomfortable position.
- If the baby's body does not face yours, for example lying on its back and turning its head to reach the breast, it might not be able to swallow.
- If you see a lot of the brown part around the nipple (areola), it might mean the nipple is not far back enough in the baby's mouth.
- If the suckling is very fast and noisy, the baby might need a bigger mouthful of the breast. After the first few minutes, the baby should suckle slowly and deeply, and swallow well.
- If you feel pain, or get a cracked nipple, you may need to help the baby get the nipple farther back in its mouth.

Mother's diet while breastfeeding

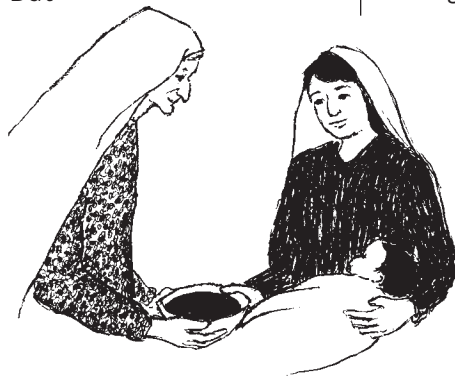
Mothers need to eat well to recover from pregnancy, to care for their babies, and for all the other work they do. They need plenty of foods rich in protein, fats, and lots of fruits and vegetables. They also need to drink plenty of liquid—clean water, milk, herb teas, and fruit juices. But no matter how a woman eats and drinks, her body will make good breast milk.

Some people believe that new mothers should not eat certain foods. But if a mother does not get a balanced diet (see page 166), it can lead to *malnutrition*, weak blood (*anemia*), and other sickness.

Sometimes women are given special foods during breastfeeding. These practices are good, especially if the foods are nutritious. Good foods help a woman's body to grow healthy and strong more quickly after childbirth.

A woman needs extra food if:

- she is breastfeeding 2 young children.
- she is breastfeeding one child and is also pregnant.
- her children are spaced closer than every 2 years.
- she is sick or weak.



Advice for the Mother



eating for good health

► Eat and drink enough to satisfy hunger and thirst. Avoid alcohol, tobacco, drugs and unnecessary medicines. Clean water, fruit and vegetable juices, and milk and herb teas are better than coffee and sodas.

Breastfeeding and child-spacing

Child-spacing means having babies at least 2 or 3 years apart. This allows a woman's body to get strong before another pregnancy. For some women, breastfeeding helps them space their children. For more information, see page 218.

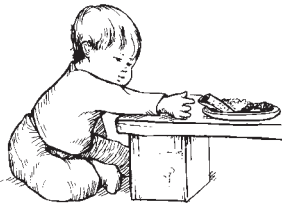
Giving other foods

A baby is ready for other feedings when:

- it is about six months old, or older.
- it starts to grab food from the family or from the table.
- it does not push food out with its tongue.

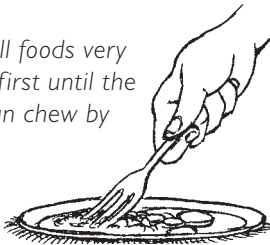
Between 6 months and 1 year, give breast milk whenever the baby wants it. Even if it is eating other foods, it still needs as much breast milk as before. Follow breastfeeding with other foods, 2 or 3 times a day at first. Begin with a soft, mild food, like cereal or porridge. Some women mix these with breast milk. You do not need expensive baby cereals.

If a baby does not seem happy or well-fed with breastfeeding, and it is between 4 and 6 months old, it may simply need to suckle more so that the mother's breasts will make more milk. The mother should breastfeed the baby as often as the baby wants for about 5 days. If the baby is still unhappy, then she should try other foods.



Do not give other foods before 4 months.

Mash all foods very fine at first until the baby can chew by itself.



Use a cup or bowl and spoon to feed the baby.



► Add new foods one at a time. By about 9 months to 1 year, a baby can eat most family foods if they are cut up and made easy to eat.

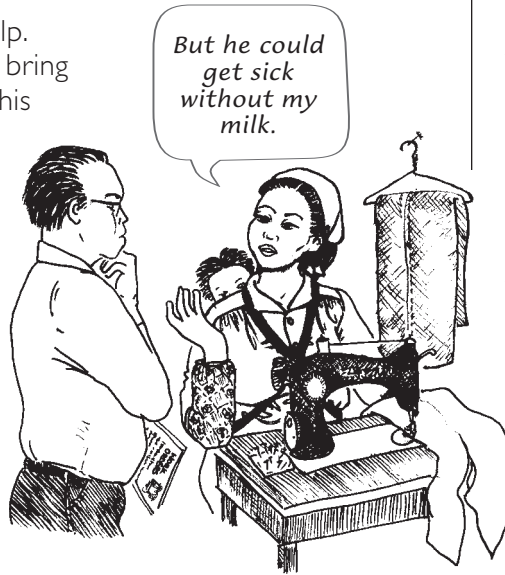
► Even in the second year, breast milk continues to protect your child against infection and other health problems.

Babies need to eat often—about 5 times a day. Each day, they should have some main food (porridge, maize, wheat, rice, millet, potato, cassava), mixed with a body building food (beans, finely ground nuts, eggs, cheese, meat or fish), brightly colored vegetables and fruits, and an energy-rich food (finely ground nuts, spoonful of oil, margarine or cooking fat). You do not have to cook 5 times a day. Some meals can be given as a cold snack.

If you can, keep breastfeeding until the child is at least 2 years old, even if you have another baby. Most babies will slowly stop breastfeeding on their own.

Many women now work away from their homes. This can make it hard for a mother to give her baby nothing but breast milk during the first 6 months.

Working mothers need help. Some jobs allow a mother to bring her baby for a few months. This makes breastfeeding the easiest. If a mother has child care nearby, she might be able to breastfeed during the day, on her breaks. Some employers organize child-care centers so that parents can have their children close by.



When the Mother Works Outside the Home

► A working mother should not have to choose between her work and her child's health.

Here are some ways to make sure your baby gets only breast milk while you are at work:



Keep your baby nearby for 6 months.



Or have someone bring the baby to you at feeding time.

When you are with your baby, feed it only from your breasts. If you sleep with the baby at night, it may feed more, and this will help you to make enough milk.

Some women ask a friend or a relative, like the baby's grandmother, to breastfeed their baby. If you want another woman to breastfeed your baby, she should be tested for HIV and have no risk of becoming infected while breastfeeding.



HIV and AIDS, 284

breastfeeding
and HIV, 293

Removing Milk by Hand

► If a mother removes more milk than her baby needs, she can give it to another baby whose mother is sick, or whose milk has not come in yet.

Another way a woman can give her baby breast milk during the day is if she can have time at work to remove the milk from her breasts. Then someone else can feed the baby for her.



You can remove your milk by hand 2 or 3 times each day...

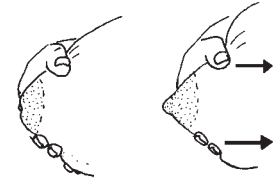


...then send or store the milk for someone to feed your baby.

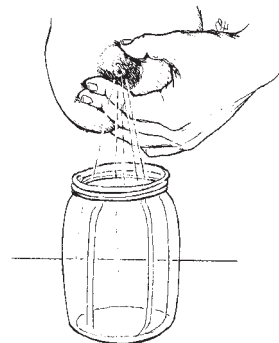
You may also need to remove your milk by hand if your breasts are too full, or if your baby cannot breastfeed for some reason, and you want to keep a good milk supply.

How to remove your milk by hand

1. Wash and rinse a wide-mouth jar and lid with soap and clean water, and leave them in the sun to dry. Just before using them, pour boiling water, that has boiled for 20 minutes, into them and let the water sit for a few minutes. Then pour the water out.
2. Wash your hands well before touching the jar or your breasts.
3. Find a quiet place if you can. Be patient and try to relax. Thinking about the baby as you remove your milk may help it flow. Massage your breasts lightly with your finger tips or fist, moving toward the nipple.



4. Then, put your fingers and thumb at the edge of the dark part of your breast (areola), and press in towards the chest. Gently press your fingers together and roll them towards the nipple. Do not pinch or pull your nipple. Removing milk should not hurt. Move your fingers all the way around the areola so the milk can come out of the whole breast. Do this with each breast until it is empty.



Press back, do not pinch.

5. At first, not much milk will come out. With practice you will remove more. Plan to remove milk as often as your baby eats, or at least 3 times each day. (The person who gives your milk to the baby can let you know if there was enough.) If you start to practice 2 weeks before you return to work, you will be able to remove enough milk by the time you must be separated from your baby.

How to store the milk

Keep your milk in a clean, closed container (see steps 1 and 2 on page 112). You can store milk in the same jar used to remove the milk. Keep the milk in a cool place away from sunlight. The milk can be used for up to 8 hours. Or you can bury the closed container in wet sand, or keep it wrapped in a cloth that is kept wet all the time, and it will keep for about 12 hours.

The container can be stored longer in a cool place such as a clay pot with water in it.



► Breast milk can change color. The color comes from what you eat. No matter what color it is, your milk is good for your baby.

Milk can be kept in a glass jar in a refrigerator for 2 or 3 days. The cream (fat) in the milk will separate, so before giving it to the baby, shake the container to mix the milk. Heat it to room temperature in warm water. Test the milk to make sure it is not too hot by shaking a few drops onto your arm.

Warm bottle method

This method may work best if the breasts are too full or very painful. This may happen right after birth, or if a woman gets a cracked nipple or breast infection (see pages 115 and 117).

1. Clean a large glass bottle that has a 3 to 4 cm-wide mouth. Warm it by filling it with hot water. Fill it slowly so the bottle does not break. Wait a few minutes and then pour the water out.



2. Cool the mouth and neck of the bottle with clean, cool water so that it does not burn you.
3. Fasten the bottle mouth over your nipple so that it makes a seal. Hold it firmly in place for several minutes. As it cools, it will gently pull the milk out.

3 to 4 cm wide



4. When the milk flow slows down, use your finger to loosen the seal around the breast.
5. Repeat on the other breast.

IMPORTANT Milk that cannot be kept cold will spoil and should be thrown out. If milk smells sour or strange, throw it out. Spoiled breast milk can make a baby very sick.

Common Concerns and Problems

With my other baby, my breasts were so full...



► A baby older than 2 weeks may not pass stool every day. If the baby is feeding well, wetting, and seems content, the stool will come.

► The size and shape of your nipple is not important—the baby suckles from the breast, not just the nipple.

FEAR THERE IS NOT ENOUGH MILK, OR THAT MILK IS NOT GOOD ENOUGH

Many women think they do not have enough milk. This is almost never true. Even mothers who do not have enough to eat can generally make enough milk for their babies.

The amount of milk your breasts make (your milk supply) depends on how much the baby suckles. The more the baby suckles, the more milk you will make. If you skip a feeding and give a bottle instead of breast milk, your body will make less milk.

Some days it may seem like the baby is always wanting to breastfeed. If you feed your baby whenever it is hungry, your milk supply will increase. In a few days the baby will probably seem satisfied again. Night feeding helps to build up a mother's milk supply. Try not to believe anyone—even a health worker—who says that you do not have enough milk.

Breasts do not have to feel full to make milk. The more babies a woman has breastfed, the less full her breasts will feel. Small breasts can make as much milk as large breasts.

A baby is getting enough milk if:

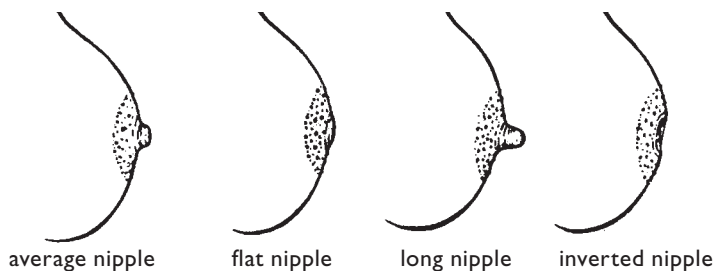
- it is growing well, and seems happy and healthy.
- it wets 6 or more times and dirties the diaper (nappy) about 1 to 3 times in a day and night. You can usually tell this after the baby is 5 days old, when the baby will start to pass *urine* and *stool* more regularly.

Because breast milk looks different from other milks, some women fear that it is not good milk. But breast milk gives babies everything they need.

NIPPLE CONCERNS AND PROBLEMS

Flat or pushed-in (inverted) nipples

Most women with nipples that are flat or pushed-in can breastfeed without a problem. This is because the baby suckles on the breast, not just the nipple. You do not need to do anything to prepare your nipples during pregnancy.



These ideas may make it easier for your baby to suckle:

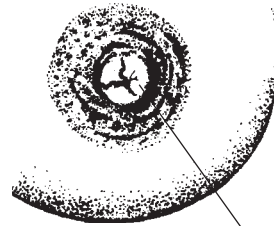
- Start breastfeeding right after birth, before your breasts become full. Make sure your baby takes a good mouthful of breast (see page 108).
- If your breasts become too full, remove some milk by hand to make them softer. This will make it easier for the baby to get more breast in its mouth.
- Lightly touch or roll your nipple before you feed. Do not squeeze it.
- Try cupping your hand around the breast and pushing back to make your nipple stick out as much as possible.



Offer the whole breast. This helps the baby get a good mouthful of the breast.

Sore or cracked nipples

If you feel pain from breastfeeding, the baby probably does not have enough of your breast in its mouth. If the baby suckles only on the nipples, they will soon become painful or cracked. A cracked nipple makes it easier for a woman to get an infection. You can teach your baby to take more breast in his mouth. Here are some suggestions.



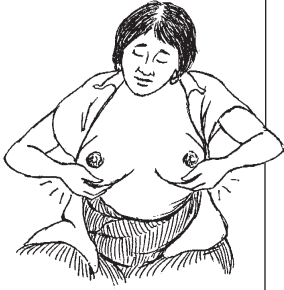
cracked nipples

Prevention and treatment:

- Be sure to hold the baby so it can get a good mouthful of the breast (see page 108).
- Do not pull your breast out of the baby's mouth. Let the baby feed as long as it wants. When it is done, it will let go of the breast itself. If you need to stop before the baby is ready, pull down on its chin or gently put the tip of a clean finger into its mouth.
- Soothe sore nipples with breast milk at the end of a feed. When the baby has stopped feeding, squeeze out a few drops of milk and rub them on the sore places. Do not use soap or cream on your breasts. The body makes a natural oil that keeps the nipples clean and soft.
- Avoid rough or tight clothing.
- To help sore nipples heal, leave your breasts open to the air and sun, if possible.
- Continue to feed from both breasts. If a nipple is very sore or cracked, start on the less painful breast and then switch to the other breast when the milk is flowing.
- If the pain is too great when the baby suckles, remove the milk by hand and feed the baby with a cup or spoon (see page 119). A crack should heal in 2 days.



breast infection



PAIN AND SWELLING IN THE BREASTS

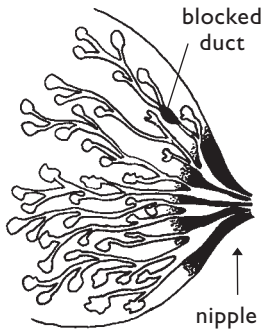
A woman's breasts are too full (engorgement)

When the milk first comes in, the breasts often feel swollen and hard. This can make it difficult for the baby to suckle, and the nipples may get sore. If you breastfeed less because of the pain, your milk supply will be less.

Prevention and treatment:

- Start breastfeeding within the first hour after birth.
- Make sure you are holding the baby well (see page 108).
- Feed the baby often, at least every 1 to 3 hours, and on both breasts. Sleep with the baby nearby so you can breastfeed easily during the night.
- If the baby cannot suckle well, remove some milk by hand—just enough to soften the breast—and then let the baby suckle.
- After feeding, apply fresh cabbage leaves or cool wet cloths to the breasts.

After 2 or 3 days, the swelling should go down. Engorgement that does not improve can become *mastitis* (a hot, painful swelling of the breast).



Blocked duct, mastitis

If a painful lump forms in the breast, it may mean that a duct is blocked by thick milk. When milk flow stops in part of the breast, it can also cause mastitis. If a woman has a fever and part of her breast is hot, swollen and painful, she probably has mastitis. **It is important to continue breastfeeding** so that the duct can empty and the breast does not get infected. The milk is still safe for the baby.

Treatment for blocked duct and mastitis:

- Apply warm wet cloths to the painful breast before you breastfeed.
- Continue to feed the baby often, especially from the painful breast. Make sure the baby is holding the breast well in its mouth (see page 108).
- As the baby feeds, gently massage the lump, moving your fingers from the lump toward the nipple. This will help to clear the blocked duct.
- Change feeding positions to help the milk flow from all parts of the breast.
- If you cannot breastfeed, remove your milk by hand or use the warm-bottle method. The milk must be kept flowing from the breast to clear the blocked duct.
- Wear loose-fitting clothing, and rest as much as you can.

Most mastitis clears up in 24 hours. If you have fever for more than 24 hours, you need treatment for breast infection.

Breast infection (mastitis with infection)

If you have had signs of mastitis with no improvement after 24 hours, or severe pain, or a crack in the skin where germs can enter, **you must get treatment for breast infection right away.**

Treatment:

The most important part of treatment is to continue breastfeeding often. Your milk is still safe for the baby. Medicines and rest are necessary too. If you can, take time off from work and get help with your household work. Also follow the treatment for blocked duct and mastitis. If needed to keep the milk flowing, you can milk your breast by hand or use the warm bottle method.



Warm, wet cloths can help with blocked ducts or mastitis.

Medicine for Breast Infection		
Medicine	How much to take	When and how to take
For infection take:		
dicloxicillin	500 mg	4 times a day for 7 days.
If you cannot find this or are allergic to penicillin, take:		
erythromycin	500 mg	4 times a day for 7 days.
Before taking medicines, see the "Green Pages."		
For fever and pain, take:		
paracetamol (acetaminophen) 500 to 1000 mg until the pain goes away (see page 511).		
IMPORTANT <i>If a breast infection is not treated early, it will get worse. The hot and painful swelling will feel as if it is filled with liquid (abscess). If this happens, follow the treatment described here AND see a health worker who has been trained to drain an abscess using sterile equipment.</i>		

Thrush (yeast)

If you are holding the baby so it is comfortable and feeding well, and the pain in your nipples lasts for more than a week, it may be caused by thrush in the baby's mouth. Thrush can feel like an itchy, stabbing or burning pain, moving through the breast. You may see white spots or redness on your nipple and in the baby's mouth.

Treatment:

Mix gentian violet with clean water to a strength of 0.25% and paint on the nipples and on the white patches in the baby's mouth once every day for 5 days, or until 3 days after healing is complete. Use a clean cloth or finger to apply. If it does not get better, see the "Green Pages" for other medicines. You can continue to breastfeed. The medicine will not hurt you, your milk or the baby.

How to mix gentian violet with clean water to make a 0.25% solution:

If your gentian violet says...	Use
0.5%	1 part gentian violet plus 1 part water
1%	1 part gentian violet plus 3 parts water
2%	1 part gentian violet plus 7 parts water

Special Situations



Babies that were born too early or very small should be kept against your skin for warmth.

BABIES WITH SPECIAL NEEDS CAN BREASTFEED

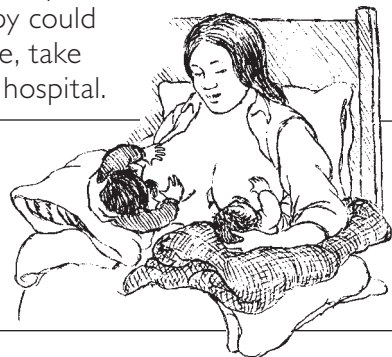
Small baby. If a small baby cannot suckle strongly enough to feed itself, you will need to remove your milk by hand and feed the baby with a cup. Begin right after birth, and continue even when the baby can suckle some by itself. This will help your breasts make more milk. If your baby weighs less than 1½ kilos or 3½ pounds, it may need special medical care, including a tube that goes through the nose and down to the stomach. Your milk can be given through that tube. Talk with a health worker about this.

Baby born too early. Babies born too early need extra help to stay warm. Place the baby naked, with a hat and a diaper or nappy, upright inside your clothing, against your skin and between your breasts. (It helps to wear a loose blouse, sweater, or wrap tied at the waist.) In some places this is called 'Kangaroo Care'. Keep skin-to-skin contact inside your clothing day and night, and breastfeed often. If the baby suckles weakly, also give milk you have removed by hand.

Cleft lip or cleft palate. These babies may need special help to learn how to suckle. If the baby has only a cleft lip, it can still suckle well. (To help make a seal, use your finger to cover the cleft.) If the roof of the mouth is also open, try to hold the baby up straight while keeping a good feeding position. You may need to get special help. You can remove your milk by hand to keep up a good supply while the baby is learning to suckle.

Yellow baby (jaundice). A yellow baby needs plenty of sunlight and breast milk to get the jaundice out of its body. Some babies with jaundice are very sleepy. If a baby is too sleepy to take the breast, remove milk by hand and give it with a cup and spoon, at least 10 times in 24 hours. Put the baby in the sun in the early morning and late afternoon. Or keep the baby in a bright room.

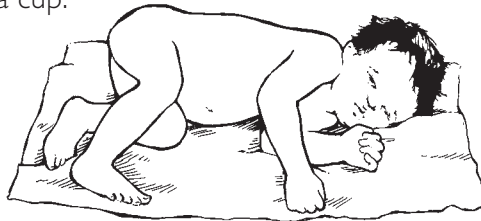
Most jaundice does not start until after the first 3 days of life and clears up by the 10th day. If the baby has jaundice or very yellow eyes at any other time, or if a jaundiced baby was also born very early, or if the yellow or sleepiness gets worse, the baby could have a serious illness. If possible, take the baby to a health center or hospital.



Twins. Sometimes one twin is smaller or weaker. Be sure that each baby gets plenty of your milk. You have enough milk for both babies. Be sure you are getting enough to eat too.

When your baby is sick

- If your baby is sick you should not stop breastfeeding. Your baby will get better more quickly if it is breastfed.
- Diarrhea is especially dangerous in babies. Often no medicine is needed, but special care must be taken because a baby can die very quickly of *dehydration*.
- For diarrhea, breastfeed more often and also give sips of rehydration drink.
- Breastfeed more often if the baby is weak. If the baby is too weak to breastfeed, remove the milk by hand and give the milk with a cup. Take the baby to a health worker.
- For vomiting, give shorter feeds more often, and also give rehydration drink in small sips with a cup every 5 to 10 minutes. If you can, see a health worker—dehydration can lead to death.
- Keep breastfeeding your baby even if the baby needs to go to the hospital. If you cannot stay at the hospital, try to remove your milk by hand and get someone to give it to the baby with a cup.



rehydration drink

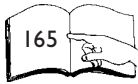
How to feed a baby with a cup

1. Use a small, very clean cup.
If boiling it is not possible, wash it with soap and clean water.
2. Hold the baby upright or almost upright on your lap.
3. Hold the cup of milk to the baby's mouth.
Tip the cup so the milk just reaches the baby's lips. Rest the cup lightly on the baby's lower lip and let the edges touch the baby's upper lip.
4. Do not pour the milk into the baby's mouth. Let the baby take the milk into its mouth from the cup.



► If you have HIV, see page 293 for information about breastfeeding and HIV.

► Get treatment right away for any serious disease caused by infection, like TB, typhoid or cholera, so it does not spread to the baby.



eating for good health

WHEN THE MOTHER IS SICK

If she can, it is almost always better for a sick mother to breastfeed her baby than to feed other foods too soon. If you have a high fever and sweat a lot, you may make less milk. To keep producing enough milk, drink plenty of liquid and continue to breastfeed often. If it is more comfortable for you, breastfeed in the lying-down position (see page 107).

If you need to stop breastfeeding for a few days, remove the milk by hand (if necessary someone can help you).

To prevent passing any infection to the baby, wash your hands well with soap and water before touching your baby or breasts.

When the mother needs medicine

Most medicines pass into breast milk in very small and weak amounts, so they do not harm the baby. It is usually more harmful to the baby to stop breastfeeding.

There are a few drugs that cause side effects. In this book we have marked these medicines with a warning and suggest other medicines that will be safer (see the “Green Pages”).

If a health worker tells you to take a medicine, remind her that you are breastfeeding so that a safe one can be selected.

WHEN A WOMAN BECOMES PREGNANT OR GIVES BIRTH TO ANOTHER CHILD

If a nursing mother becomes pregnant, she can continue to breastfeed. Since breastfeeding and pregnancy take a lot from her own body, she should eat plenty of good foods.

It is also safe to continue breastfeeding an older child when a woman has a new baby. The new baby should be fed before the older child.



A woman with a new baby and an older baby can safely breastfeed both of them.



It is safe to breastfeed when you are pregnant.

If you are a health worker, it is not enough to talk about breastfeeding. Women need information and support. Teach women to give nothing but breast milk for the first 6 months. Teach them and their family members that other kinds of feedings may harm the baby.

Support women with breastfeeding before problems start.

Help women feel confident that they have enough milk. Mother-to-mother support is the best help for common problems. Try starting a breastfeeding group in your community led by women who have breastfed exclusively, and whose children are growing well.

Make your health center friendly to breastfeeding. Help mothers to breastfeed within the first hour after birth. Allow babies to sleep with or near their mothers. When a mother is sick, let the baby stay with her.

If you are a mother yourself, breastfeed your own baby to show women they can work and breastfeed too.

Remove any posters or educational materials that promote artificial milks. Do not pass on samples or gifts from the infant formula companies and do not let representatives from these companies come to the clinic.

Educate employers about the importance of breastfeeding. Encourage them to provide places for women to breastfeed their babies or to pump milk.

Working for Change

