

Chapter 7

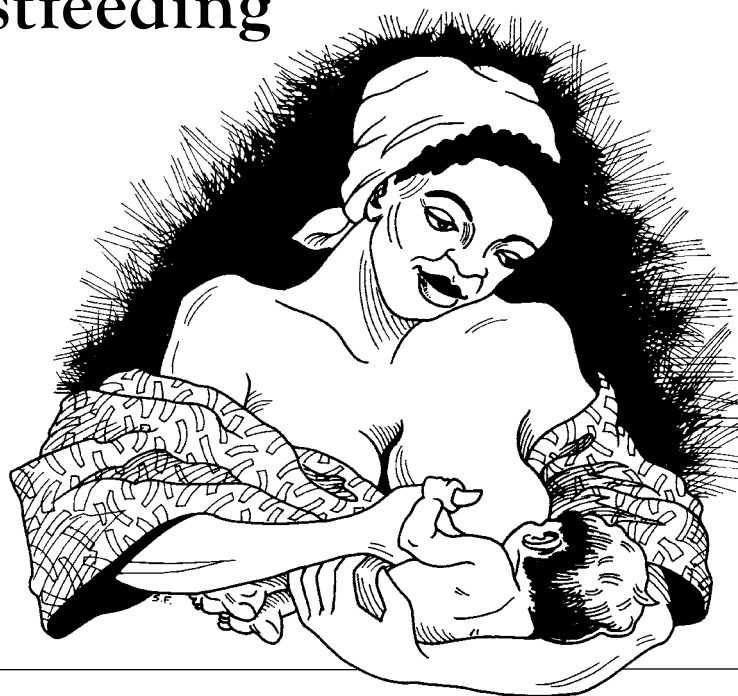
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You can breastfeed your child for as long as you like and may never have a problem. But if you have a problem, you may find help in this chapter, which has information on healthy breastfeeding practices and what to do for common problems.

Some people use the word “chestfeeding” to describe feeding babies with their own milk. This can be important for people who have given birth and who do not live as women—such as transgender men and nonbinary people. These parents need information and support for feeding their babies just like anyone else with a new baby.

Breastfeeding



Breastfeeding is one of the oldest and healthiest practices in the world. But as the world changes, people 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*, some types of *cancer*, *diarrhea*, and *pneumonia*, because the defenses against illness pass to the baby through breast milk.
- Breastfeeding helps protect the birth parent against diseases like *cancer* and weakened bones (*osteoporosis*).
- Breast milk is always clean, always ready, and always the right temperature.
- Breastfeeding makes a close, secure bond with and for the baby.
- Giving babies nothing but breast milk for 6 months can protect you from becoming pregnant again too soon after giving birth.
- Breastfeeding is free.

Why Breast Is Best

► *It helps both baby and parent to breastfeed for as long as possible, at least for 1 to 2 years. During the first 6 months, give your baby nothing but breast milk.*

Why Other Feeding Can Be Harmful

► Feeding with formula is often a way a father or partner participates in a baby's care. To encourage breastfeeding, help family members find other ways to care for a baby.

Can I really buy all this in one year?

Do not try to make milk or formula last longer by using less powder or more water. This starves the baby, making it grow more slowly and get sick more often.



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



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



HIV AND BREASTFEEDING

Before HIV treatment was available, babies could get HIV from breastfeeding, so some people became afraid to feed their babies breast milk. Many babies feeding on formula died from malnutrition or severe diarrhea. Now that antiretroviral treatment (ART) can control someone’s HIV, it rarely spreads to a baby from breastfeeding.

FOR A NEW BABY

After birth, **breastfeeding during the first hour** helps the womb stop bleeding and return to its non-pregnant size and shape. Skin-to-skin contact and the baby's suckling helps breast milk 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 and cleans the baby's gut. There is no need to give herbs, teas, or water to do this.

FOR ANY BABY

Feed from both breasts, and **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 milk that first comes out. 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 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.*

Keep your baby close by at night so you can breastfeed more easily. If you sleep with your baby, you 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 or arm.

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. You should also be in a relaxed, comfortable position so that your 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.



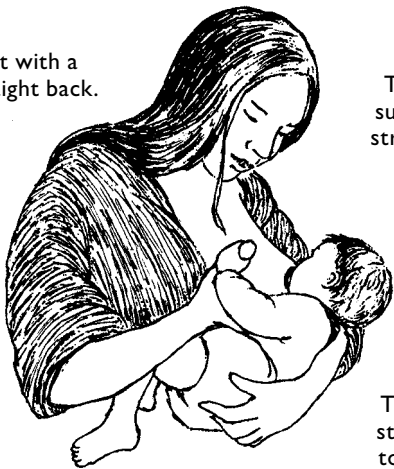
This baby has a good mouthful of breast.



This baby does not have enough breast in its mouth.

Chest to chest, chin to breast.

Sit with a straight back.



With a newborn, your hand can usually cover the baby's bottom.

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

The baby suckles the breast, not just the nipple.

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



This is another good position to use. Put pillows or some rolled up cloth under the baby.

If you are having trouble breastfeeding, get help from someone who has experience. This often helps more than many health workers can. Do not use a bottle. It teaches 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.

How to think about possible problems with breastfeeding:

- 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, if it is 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 darker 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.

Eating well is important for breastfeeding

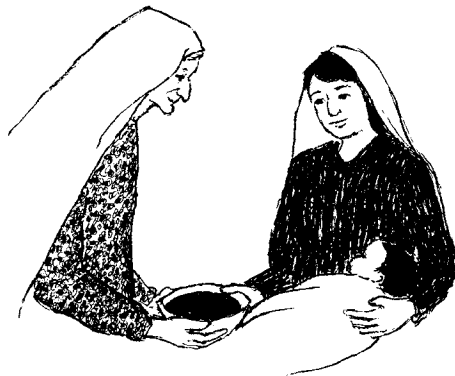
Food is like medicine for recovering from pregnancy and birth, for being able to care for babies and children, and for all the other work parents do. They need plenty of foods rich in protein, fats, and lots of fruits and vegetables. They also need to drink plenty of healthy drinks—clean water, milk, herb teas, and fruit juices. Luckily, people make good breast milk no matter what they eat or drink.

In some places, people believe that certain foods should not be eaten soon after giving birth. But without a balanced diet (see page 166), a person can develop *malnutrition*, *anemia*, and other sickness.

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

Some people need extra food:

- those who are breastfeeding 2 young children
- those who are breastfeeding one child and also pregnant
- those with children spaced closer than every 2 years
- those who are sick or weak

**Advice for
Healthy
Breastfeeding**

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.



using breastfeeding to prevent pregnancy



Do not give other foods before 4 months.

Breastfeeding and child spacing

Child spacing means having babies at least 2 years apart. This gives a person's body time to get strong again before another pregnancy. Breastfeeding can be one way to help space your children.

Giving other foods

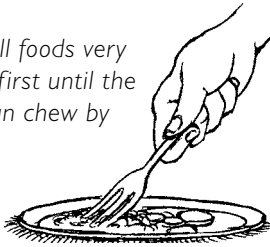
Babies are ready for other foods when:

- they are at least six months old.
- they start to grab food from the family or from the table.
- they do not push food out of their mouths.

Between 6 months and 2 years, give breast milk whenever your baby wants it. Even if it is eating other foods, it still needs as much breast milk as before. Give other foods **after** breastfeeding, 2 or 3 times a day at first. Begin with a soft, mild food, like cereal or porridge. You can mix these with breast milk or safe water. 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 the breasts will make more milk. Breastfeed the baby as often as it wants for about 5 days. If the baby is still unhappy, then it is OK to try other foods.

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 need 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. To wean a baby can take 3 days to 3 weeks.

Many parents, including those with newborn babies, now work away from their homes. This can make it hard to give a baby nothing but breast milk during the first 6 months of their life.

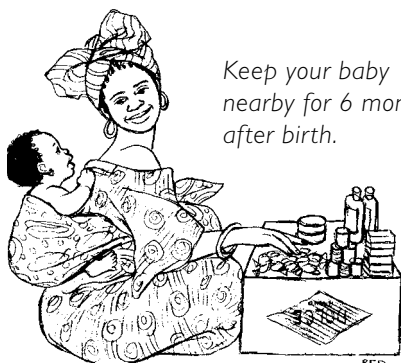
Working parents need support to breastfeed. Some jobs allow someone to bring their baby for a few months after birth. This makes breastfeeding easier. If there is child care nearby, it might be possible to breastfeed during the day, on breaks. Some employers organize childcare centers so parents can have their children close by.



When Parents Work Outside the Home

► You should not have to choose between your work and your 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 after birth.



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.

In some cases, people ask a friend or a relative, like the baby's grandmother, to breastfeed their baby. If you want someone else to breastfeed your baby, they should be tested for HIV and have no risk of becoming infected while breastfeeding.



HIV, 283

breastfeeding and HIV, 293

Removing Milk by Hand

► If you remove more milk than your baby needs, you can give it to another baby whose parent is sick.

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



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

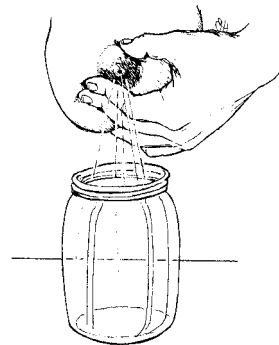
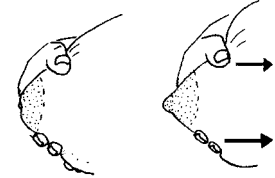


...then send or store the milk for someone to feed your baby.

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.
2. Just before using them, fill them with water that has boiled for 20 minutes and let the water sit for a few minutes. Then pour the water out.
3. Wash your hands well before touching the jar or your breasts.
4. 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.
5. Then, put your fingers and thumb at the edge of the dark part around your nipple (areola), and press backwards against your 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.
6. At first, not much milk will come out. With practice you will remove more. Plan to remove milk at least 3 to 5 times a day, or as often as your baby eats. 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.

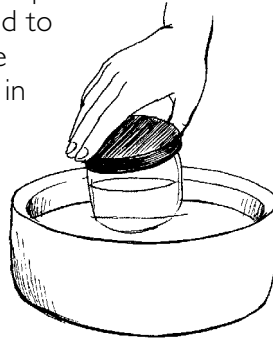


Press back,
do not pinch.

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 will stay good to use for about 8 hours. If you can keep the container cool, for example, by burying it in wet sand or wrapping it in an always wet cloth, it will stay good 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. Any color milk is good for your baby, as long as it is fresh or stored in a refrigerator or freezer.

Milk that is kept cold in a glass jar in a refrigerator will stay good for 2 to 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 is good to use if the breasts are too full or very painful. This might happen right after birth or if a cracked nipple or breast infection interrupts breastfeeding (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.
4. When the milk flow slows down, use your finger to loosen the seal around the breast. Wetting your finger may help.
5. Repeat on the other breast.

3 to 4 cm wide



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...



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

► *If you have flat or inverted nipples or other concerns that make breastfeeding difficult, talk to a midwife, health worker, or someone with similar problems about what to do.*

FEARS

Being afraid you do not have enough milk is very common, but is almost never true. Even those 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 wants, your milk supply will increase. In a few days the baby will probably seem satisfied again. Night feeding helps to build up the milk supply. Try not to believe anyone—even a health worker—who says you do not have enough milk.

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

A baby is getting enough milk if:

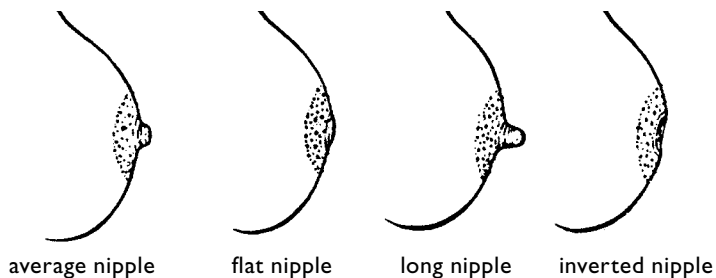
- it is growing well and seems happy and healthy.
- it wets 6 or more times, and dirties the diaper (nappy) about 1 to 3 times, in a day and night. You can usually tell this after the baby is 5 days old, when the baby will start to pass *urine* and *stool* more regularly.

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

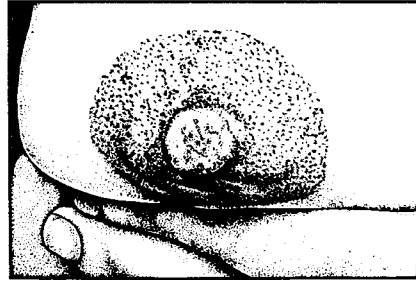
Flat or pushed-in (inverted) nipples

If you have nipples that are flat or pushed-in, you can still usually breastfeed well. 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.



To help your baby suckle:

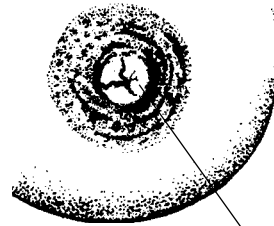
- Start breastfeeding right after birth, before your breasts become full. Make sure your baby takes a good mouthful of breast (see page 108).
- If your breasts become too full, remove a little milk by hand to make them softer. This will make it easier for the baby to get more breast in its mouth.
- Lightly 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 to get an infection. You can teach your baby to take more breast in its mouth. Here are some suggestions.

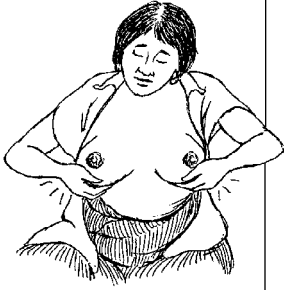


cracked nipples

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. Your 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 for a while each day, 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 a few days.

► Watch for signs of breast infection, see page 117.



PAIN AND SWELLING IN THE BREASTS

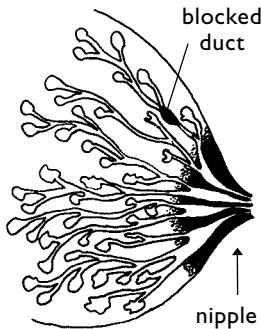
Your breasts are too full (*engorgement*)

When the milk first comes in, 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, put fresh cabbage leaves or cool wet cloths on your breasts.

After 2 or 3 days, the swelling should go down. If it does not improve, it can become *mastitis*.



Blocked duct, mastitis

If a painful lump forms in the breast, it may be a duct blocked by thick milk. The stopping of milk flow can also cause mastitis (a hot, painful swelling of the breast). If you have a fever (38°C or 100.4°F or higher) and part of your breast is hot, swollen, and painful, you probably have mastitis. **Continue breastfeeding** so the duct can empty and your breast does not get infected. Your milk is still safe for the baby.

Treatment for blocked duct and mastitis:

- Put warm, wet cloths on 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 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 keep flowing from the breast to clear the blocked duct.
- Wear loose-fitting clothing and rest as much as you can.

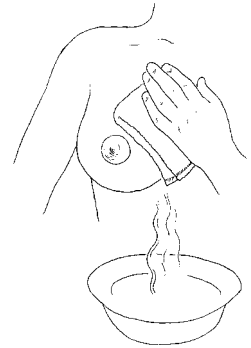
Most mastitis clears up in 24 hours. If you have a fever for more than 24 hours, you need treatment for breast infection.

Breast infection (*mastitis with infection*)

If you have had signs of mastitis with no improvement after 24 hours, including a fever of 38°C (100.4°F) or higher, a painful lump in your breast, and body aches, **get treatment for breast infection right away.**

Treatment:

Follow the treatment for blocked duct and mastitis (see box on page 116). It is most important 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.



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

Medicines for Breast Infection

Medicine	How much to take	When and how to take
For infection, take:		
dicloxacillin	500 mg	by mouth, 4 times a day for 7 days
If you cannot find this or are allergic to penicillin, take:		
erythromycin	500 mg	by mouth, 4 times a day for 7 days
For fever and pain, take:		
paracetamol (acetaminophen) 500 to 1000 mg		4 times a day as needed (do not take more than 4000 mg in a day)
Before taking medicines, see the "Medicines Pages."		
IMPORTANT <i>If there is no improvement after 2 days, go to a hospital for treatment. If you have a painful lump in your breast (abscess) that did not go away with antibiotics, see a health</i>		

Thrush (yeast)

If the baby is in a good position while suckling and pain in your nipples lasts for more than a week, it may be from thrush on the nipple or in the baby's mouth. Thrush can cause itchy, stabbing or burning pain in the nipple or breast. You may see white spots or redness on your nipple and in the baby's mouth.

How to treat thrush:

Cover white spots in the baby's mouth with nystatin drops. Use 2 full droppers (0.5 ml of nystatin per dropper) 4 times a day. Keep giving this medicine for 2 days after the patches are gone or they may return. If you have itching or pain on your nipples, treat them the same way you did the baby's mouth, with nystatin drops. Keep breastfeeding. If thrush does not get better in 3 days, get medical advice.

Special Situations



Keep new babies that were born too early or very small against your skin for warmth.

BABIES WITH EXTRA NEEDS CAN BREASTFEED

Small or weak baby. If a small or weak 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 kg or 3½ pounds, it may need specific 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 care to stay warm. Place the baby naked, wearing a hat and a diaper, 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 more 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 (cleft palate), try holding the baby more upright and pushing the nipple to the part of the mouth away from the cleft. You may need to get help from someone with experience feeding a baby with cleft palate. Remove your milk by hand to keep up a good supply while the baby is learning to suckle.

Yellow skin (jaundice). A baby with yellow skin needs plenty of sunlight and breast milk to lose the yellow color. Babies with jaundice may be 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 3 or more days after birth 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 yellowness or sleepiness gets worse, the baby could have a serious illness. If possible, take the baby to a health center or hospital.



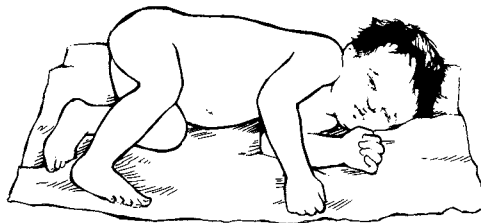
Twins. Sometimes one twin is smaller or weaker. Be sure that each baby gets plenty of your milk. You have enough milk for both babies. Be sure you are getting enough to eat too.

When your baby is sick

- Do not stop breastfeeding if your baby is sick. Your baby will get well more quickly with breastfeeding.
- Diarrhea is especially dangerous in babies. Often no medicine is needed, but extra care must be taken because a baby can die very quickly of *dehydration*. Breastfeed more often and also give sips of rehydration drink.
- Breastfeed more often if your baby is weak. If the baby is too weak to breastfeed, remove milk by hand and give the milk with a cup. Get the baby seen by a health worker.
- If your baby is vomiting, give shorter feeds more often. 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 quickly in a baby.
- Keep breastfeeding your baby when 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.





breastfeeding and HIV

► *Get treatment right away for any serious disease caused by infection, like TB, typhoid, or cholera. It is safe to continue breastfeeding your baby as long as you are being treated.*



eating for good health



BREASTFEEDING WHEN YOU ARE SICK

If possible, it is almost always better to breastfeed your baby when you are sick, than to feed a baby other foods too soon. If you have a high fever and sweat a lot, drink plenty of liquid. Breastfeed often to keep producing enough milk. If it is more comfortable for you, breastfeed in a lying-down position (see page 107).

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

To prevent passing any infection to the baby, wash your hands well with soap and water before touching your baby or breasts, and wear a mask if you have a cough or think you could pass your illness.

When you need 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 do pass to the baby through breast milk and can cause harm. In this book we have marked these medicines with a warning and suggest other medicines that are safer (see the “Medicines Pages”).

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

BECOMING PREGNANT OR HAVING ANOTHER CHILD WHILE BREASTFEEDING

If you are nursing and become pregnant, you can continue to breastfeed. Since breastfeeding and pregnancy both make your body work harder, eating plenty of healthy foods is important.

It is also safe to continue breastfeeding an older child if you have a new baby. Feed the younger baby before the older child.

Someone 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 just talk about breastfeeding. Families need many kinds of information and support. While teaching families to give nothing but breast milk for the first 6 months, also help them find their own ways to care for and be close with the baby. Explain how other kinds of feedings can lead to serious illness.

Support breastfeeding before problems start. Help people feel confident they have enough milk. A breastfeeding group, led by experienced breastfeeders, can provide the best support in solving common problems.

Make your health center friendly to breastfeeding. Support breastfeeding within the first hour after birth. Allow babies to sleep with or near their parents. When a parent is sick, keep the baby close by. Try to meet the needs of people who are poor, transgender people, and people who have many children. If you have a baby yourself, breastfeed to show it is possible to work and breastfeed too.

Remove posters or other materials that promote artificial milks. Do not routinely pass on samples or gifts from 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 and time for people to breastfeed their babies or to pump milk, or even paid time off.

Working for Change

► While encouraging breastfeeding, do not shame those who cannot breastfeed or who stop before 6 months. Explain that any breastfeeding is helpful, and help them do the best they can with what is possible.

