

## THE SUCCESSFUL BREASTFEEDING GUIDE

### “Breastfeeding Is The Best Choice For Baby And You”

#### MALAYSIA BREASTFEEDING POLICY

All mothers are encouraged to breastfeed their babies exclusively with breast milk from birth until six (6) months, and continue to breastfeed until two (2) years of age. Complementary foods should be introduced when baby is six (6) months of age.

#### THEREFORE, FROM BIRTH UNTIL SIX (6) MONTHS OF AGE, BABIES:

- Are exclusively breastfed
- Do not need additional water or milk
- Do not need complementary foods

# 01

### THE IMPORTANCE OF BREASTFEEDING FOR BABIES

#### MOTHER'S MILK

- Provides ideal nutrition.
- Protects against many infections.
- Prevent some infant deaths.
- Reduces risk of allergies.
- Reduces risk of conditions such as juvenile-onset diabetes, (in families with a history of these conditions).
- May assist in blood pressure regulation.
- Reduction of obesity in later life.
- Readily available, no preparation, suited to the child's need

#### CHILDREN WHO DO NOT BREASTFEED OR RECEIVE BREASTMILK MAY BE AT INCREASED RISK OF:

- Infections such as respiratory infections cough and flu, diarrhoea and gastrointestinal infections, and urinary tract infections (UTI).
- Ear Infections (otitis media).
- Eczema and other atopic dermatitis conditions.
- Obesity in childhood.
- Higher blood pressure.
- Later heart disease.
- Dying in infancy and early childhood.
- Necrotising enterocolitis (NEC), in preterm infants.
- Lower developmental performance and educational achievement, thus reducing learning potential
- Developing juvenile onset insulin dependent Diabetes Mellitus.

# 02

### THE IMPORTANCE OF BREASTFEEDING FOR MOTHERS

Women who breastfeed may reduce risk of:

- Breast cancer, and some forms of ovarian cancer.
- Hip fractures / osteoporosis in older age.
- Close/rapid pregnancies.
- Anaemia due to low contraction of the uterus and early return of menses.
- Retention of fat deposit during pregnancy, which may result in later obesity.

# 03

### THE IMPORTANCE OF SKIN-TO-SKIN CONTACT IMMEDIATELY AFTER BIRTH

Immediately after birth, skin-to-skin contact between your baby and you should be practiced for at least one hour to:

- Keep your baby warm and calm.
- Promotes bonding, helps breastfeeding get started.
- Helps the baby learn that the breast is a safe and comfort place.
- Enables colonization of the baby's gut with the mother's normal body bacteria gut.
- Assists with metabolic adaptation and blood glucose stabilization in the baby.
- Allow your baby to an earlier successful first breastfeed as well as more optimal suckling.

# 04

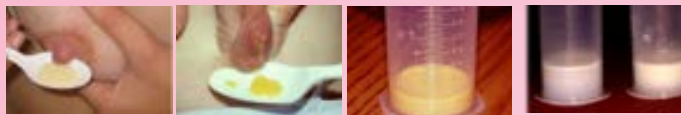
### THE IMPORTANCE OF EARLY INITIATION OF BREASTFEEDING

Starting breastfeeding after birth has many benefits for both the baby and the mother, especially nutrition, health, immunity, developmental, psychological and social aspects. Therefore, it is important to start breastfeeding within the first hour.

- To ensure the success of exclusive breastfeeding.
- To ensure your baby quickly receives enough colostrum as newborns have a strong sucking instinct.

### COLOSTRUM

- Colostrum is milk produced from the seventh month of pregnancy to a few days after birth.
- It is thick, sticky, and yellowish in colour.
- It is produced in small quantities suitable for your baby's small stomach.
- It contains nutrients (proteins and vitamin A) that are highly suitable for your baby



# 05

### THE IMPORTANCE OF MOTHERS WITH BABIES (ROOMING -IN) 24 HOURS A DAY

- Your baby cries less and can sleep soundly.
- You and your baby's sleep schedules are not disrupted when you are together.
- Breastfeeding can be further strengthened, continuous, and your baby's weight can increase quickly.
- Feeding can follow your baby's demands, and your milk supply will be sustained.
- You gain more confidence in caring for your baby and continuing breastfeeding.
- You can monitor your baby at all times.
- Your baby has a lower risk of infection compared to being placed in a nursery.
- It encourages bonding between you and your baby.

# 06

### THE IMPORTANCE OF BREASTFEEDING ACCORDING TO THE BABY'S DEMAND OR BABY-LED FEEDING OR WHEN THE BABY SHOWS OF WANTING TO BREASTFEED (FEEDING CUES)

Breastfeed your baby frequently at any time and for as long as they desire so that :

- Your baby receives colostrum, which can protect them from infections.
- Milk supply is produced more quickly.
- Your baby's weight increases more rapidly.
- You are less likely to experience engorged breasts.
- Breastfeeding is more easily strengthened.
- Your baby cries less and there is less pressure to give formula milk.
- You can breastfeed your baby for a longer duration.

### FEEDING ON DEMAND OR BABY-LED FEEDING

- This means the frequency and length of feeds is determined by the baby's needs and signs. Let babies feed whenever they want and shows signs of hunger. Feed on demand and not the clock.
- Breastfeed the baby for as long as the baby wants until they get the hind milk and release the breast on their own (indicating fullness).
- Feed the baby if your breasts are full.
- Wake up a sleeping baby for breastfeeding.

### SIGNS OF HUNGER

- The time to feed the baby is when baby shows signs of hunger:
- Increases eye movements under closed eyelids or opens eyes.
- Sucks or chews on hands, fingers, blanket or sheet, or other object that comes in mouth contact.
- Opens his or her mouth, stretches out the tongue and turns the head to look for the breast.
- Makes soft whimper sounds.
- Later hunger signs: Baby is crying loudly, arches his or her back.



#### Time to calm crying baby

- Cuddling
- Skin-to-skin on chest
- Talking
- Stroking

# 07

### THE IMPORTANCE OF FREQUENT BREASTFEEDING TO ENSURE ADEQUATE BREAST MILK PRODUCTION

Breastfeed your baby frequently, on demand, and when the baby shows signs of wanting to feed (baby feeding cues), including night time feedings. Frequent breastfeeding will result in more milk production, ensuring the baby gets enough milk.

### WAYS TO ENSURE ADEQUATE MILK PRODUCTION

- Nurse every chance mother have. Express milk after feeding the baby, if still feel full.
- While breastfeeding your baby on one breast, use a pump to express milk from the other breast.
- Get enough rest, calories and fluids.
- Directly breastfeed your baby on non-working days.
- Express milk at your workplace.
- If you are working, breastfeed before going to work in the morning and as soon as you return home in the evening.

# 08

### THE IMPORTANCE OF GOOD POSITIONING AND ATTACHMENT DURING BREASTFEEDING

Key elements of positioning for successful and comfortable breastfeeding. **Mother should be:**

Comfortable

Feet supported if needed.

Back supported

Breast supported, if needed.

#### 1 CRADLE-HOLD

This position is suitable for you, if you:  
• Already familiar with breastfeeding



#### 2 CROSS-CRADLE HOLD

This position is suitable for you, if you:  
• Learning to breastfeed  
• Baby is smaller



#### 3 SIDE-LYING

This position is suitable for you, if you:  
• Pain that makes it difficult to sit down  
• Want to rest while breastfeeding  
• Large breasts  
• After a caesarean section  
• Breastfeeding at night or just want to relax



#### 4 LAID-BACK

This position is suitable for you, if you:

- In the first few days after delivery, the mother still has difficulty sitting up. At this time, it is most appropriate to feed the baby in a semi-lying position.
- Put the baby on the mother's abdomen, use pillows to raise the upper body behind the baby, and lie down in a reclining position.



#### 5 FOOT-BALL HOLD

This position is suitable for you, if you:

- Learning to breastfeed
- Baby has difficulty latching on
- Baby is smaller
- Large breasts
- Flat or painful nipples
- After a caesarean section
- When feeding twins or when another child wants to cuddle with mom at the same time



#### POSITION FOR BABY

- Body in line.
- Close to mother's body, (Baby brought to breast, not breast to baby).
- Head, shoulders supported (whole body supported for premature baby).
- Baby faces the breast, with the nose aligned with your nipple.

#### BABY'S ATTACHMENT

##### CORRECT LATCH

1. Baby's mouth is wide open.
2. Baby's lower lip is turned outward.
3. Baby's chin touches the breast.
4. Baby takes in most of the areola.
5. More of the areola is visible above the mouth than below it.



##### IMPROPER LATCH

1. Baby's mouth not wide.
2. Lips pointing forward / turned in
3. Cheeks drawn in when suckling.
4. Baby's chin not touching breast.
5. More areola seen below bottom lip.



Notes: Signs of good attachment show: baby's cheeks are rounded and not drawn inward during a feed, can see slow deep sucks. You may hear gentle swallowing or clicks and gulps.



## THE CORRECT BREASTFEEDING ATTACHMENT IS THE "3 TIPS":

1. Chest to chest. (Baby to mother)
2. Belly to belly.
3. Place baby chin against your breast.
  - The mother support the baby's buttocks with her hands.
  - Mother's elbow supports baby's head and neck,
  - The baby's upper body lies on the mother's forearm, which is the most comfortable position for the baby to feed.



## TECHNIQUES TO PROMOTE MILK FLOW OXYTOCIN: oxytocin reflex is also sometimes called the "letdown reflex" or the "milk ejection reflex"

- Seeing, Hearing, Touching and Thinking lovingly about baby
- Feeling pleased about her baby and confident
- Relaxing and getting comfortable for feeds
- Expressing little milk and gently stimulating the nipple
- Keeping the baby near
- Massage upper back

## BREAST MILK STORAGE

General guidelines:

- Wash hands when handling expressed milk.
- Use suitable containers:
  - Glass/plastic containers with lids.
  - Clean/sterile condition (wash with soap and rinse with hot water).
- Store milk in amounts needed for one feeding (2 oz to 5 oz) or as per the baby's requirement.
- Label the storage container with the baby's name and date if multiple containers are stored.
- Use previously expressed milk first.

FRIDGE (1 DOOR)	FRIDGE (2 DOOR)
 Frozen Section (freezer) : 2 weeks  Chiller Section (2°C - 4°C) : <8 Days  (DEEP FREEZER) :6 Months	 Frozen Section (freezer) (-20°C) : 3 Months  Chiller Section (2°C - 4°C) : <8 Days  (ROOM TEMPERATURE) Temperature 25°C - 37°C : 4 HOURS Temperature 15°C - 25°C : 8 HOURS

## THAWING THE EXPRESSED BREAST MILK

- Frozen breast milk can be thawed slowly by placing it overnight in the refrigerator's chill compartment.
- Thawed milk should be used within 24 hours and should not be refrozen.
- Alternatively, frozen breast milk can be thawed by placing the storage container in a bowl of warm water.
- Do not heat breast milk in a microwave or directly on the stove.
- \*\* Expressed breast milk should not be stored above 37°C.
- Thaw breast milk in the amount needed for one feeding only. Leftover breast milk should not be reused.
- Milk fat may separate during thawing. Gently swirl the storage container to mix the fat back into the milk

## FEEDING THAWED EXPRESSED MILK

- Thawed breast milk should be warmed by placing the container in warm water or a bottle warmer and used within 1 hour after warming.
- Warmed breast milk should not be stored or reheated.
- Milk can be given to the baby using a cup.
- Use a spoon to feed the baby if the amount is small.



## PREPARING FOR BREASTFEEDING WHEN RETURNING TO WORK

During maternity leave, fully breastfeed your baby. Follow a pumping and milk storage schedule like the one below:  
Start following this schedule at least 4 weeks after the baby is born.

Time	Day			
	1-3	4-6	7-9	10-13
Breakfast 7.30 am - 9.00 am	Expressed breast milk	Expressed breast milk	Expressed breast milk	Expressed breast milk
Morning Snack 10.00 am - 11.30 am	Breastmilk	Expressed breast milk	Expressed breast milk	Expressed breast milk
Lunch 12.00 pm - 1.30 pm	Breastmilk	Breastmilk	Expressed breast milk	Expressed breast milk
Afternoon Snack 3.30 pm - 4.30 pm	Breastmilk	Breastmilk	Breastmilk	Expressed breast milk

## 13 IMPLEMENTATION OF MOTHER-FRIENDLY BIRTH AND CARE PRACTICES (MOTHER FRIENDLY CARE)

If you give birth at a hospital recognized as a Baby-Friendly Hospital, the following Mother-Friendly Care services may be offered to you. (Dependent on the conditions in the hospital's delivery room):

- You are allowed to have your husband or a female companion who can provide emotional and physical support throughout the childbirth process.
- You are allowed to have light snacks or beverages of your choice during labor, if you are at low risk.
- You are encouraged to move around and walk during labor and choose birthing positions, unless complications occur.
- You are encouraged to consider non-pharmacological pain relief methods unless complications arise or at your own discretion.
- Invasive procedures to expedite labour such as artificial rupture of membranes, episiotomy, caesarean section or assisted instrumental delivery will not be used unless you experience complications.

## THE IMPORTANCE OF HIV SCREENING TEST

Know your health status through an HIV test at a nearby health clinic or hospital near your residence. So that, you can discuss regarding your treatment plan and feeding option for your baby.

If you are confirmed HIV positive:  
Please attend counseling sessions at nearby government health clinic or hospital.

## HIV AND INFANT FEEDING

Find out the following information related to HIV and BABY FEEDING:

- Not all babies born to HIV-positive mothers will get HIV.
- Breastfeeding is NOT ALLOWED for all babies born to HIV positive mothers in this country to reduce the risk of infection.
- Approximately 20% of babies born to HIV positive mothers get HIV infection through breastfeeding.
- Mixed feeding (both breast milk and formula milk) should be avoided because it increases the risk of HIV infection, diarrhea and other infections.

## BREASTFEEDING SUPPORT GROUP

If you have any problems or want to get advice related to breastfeeding, contact or go to a government hospital or health clinic close to where you live.

## The Breastfeeding Support Group is always ready to help you at any time

### BREASTFEEDING SUPPORT GROUP

<b>Delivery Suite</b>	<b>03 7872 3088/3089</b>
<b>Lavender Ward</b>	<b>03-7872 3098/3099</b>
<b>SCN/NICU</b>	<b>03-7872 3096/3097</b>
<b>Low Min Ian</b>	<b>013-3795769</b>
<b>Parameswary A/ P M Raman</b>	<b>010-268 5227</b>
<b>Mun Siew Wan</b>	<b>016-293 2974</b>
<b>Vinny Tan</b>	<b>016-208 8341</b>
<b>Premalatha A/P Kesavan</b>	<b>016-263 7984</b>
<b>Norhayati Binti Hashim</b>	<b>018-965 4194</b>
<b>Siti Rohana Binti Bakar</b>	<b>017-268 7499</b>



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