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# Breastfeeding Overview for Parents

**Pacifier Use for the Preterm or Ill Infant** Nonnutritive sucking, or sucking without taking milk, has been shown to have many benefits for preterm or ill infants, especially when provided during gavage (tube) feedings. Nonnutritive sucking may be provided with a pacifier or at the emptied breast (called nuzzling). Although pacifier use during the early postbirth period has been linked with breastfeeding problems in the healthy full-term baby, pacifier use during tube feedings for preterm or ill infants does not cause problems. Discuss nuzzling during tube feedings with your infant’s provider or neonatal nurse practitioner.

## Protecting Your Milk Supply

In the early weeks following your baby’s birth, the breast pump did the work of maintaining your milk supply. It is natural to think that once your baby starts to feed at the breast, you can stop pumping. In fact, most mothers are anxious to get rid of the pump and just breastfeed. Remember, your baby may not be strong enough to empty your breast, and you have worked so hard to get your milk supply where it is. It is important to continue to pump your breasts after your premature baby has nursed to make sure your breasts are empty. This will ensure you continue to make enough milk. Stopping too quickly may cause your milk to dry up.

## Maintaining Your Milk Supply

The first 2 weeks after having your baby is a very import- ant time to establish a good milk supply. Your baby will be fed eight times every 24 hours; therefore, you will need to pump at least eight times every 24 hours. This is necessary to send the right signals to your breasts to make milk.

If you are separated from your baby, you may want to consider renting a hospital-grade pump. Contact your insurance company and discuss pump options with a lactation consultant.

Consider the following ideas for maintaining your milk supply:

* Pump every 2–3 hours during the day and 3–4 hours at night for a total of eight pump sessions every 24 hours.
* Prior to pumping, massage your breasts to promote the flow of milk. Pump for 15 minutes (20 minutes if you have multiples). Continue to pump an additional 2 minutes once the flow has stopped to be sure to remove as much milk as possible.
* After pumping, express your breast milk by hand for several minutes. Hand expression has been shown to increase milk production. Ask your nurse or lactation consultant to teach you this simple technique.
* Continue to take your prenatal vitamins while pumping or breastfeeding.
* Drink plenty of fluids; eat three healthy meals and three healthy snacks every day.

Whether you choose to directly breastfeed or to pump only, this journey can be very difficult at times. You may even wonder if it is worth all of the effort. Every study shows that it is worth it. Babies who are ill or premature and receive breast milk have fewer infections, fewer developmental delays, and stronger immune systems than babies who receive formula. Providing breast milk to your baby is a gift of love that will have health benefits for you and your baby that will last for years to come.

## Tips for Storing Your Milk for Your Infant After Discharge from the NICU

* Wash your hands with warm water and soap before handling pump parts or breast milk.
* Use clean bottles or plastic nursing bags to store your breast milk.
* Write the date and time on each new bottle of pumped milk.
* Once at home, freshly expressed breast milk is safe at room temperature for 4 hours.
* Frozen milk can be stored in the freezer for 3–6 months.
* Thaw frozen milk in the refrigerator or in cold water and use within 24 hours.
* Do not store expressed milk in the refrigerator or freezer door; temperature variation is considered warmer inside door space.
* Do not add fresh milk to milk that is already frozen.
* Do not thaw or warm breast milk in the microwave.