

*One of my breasts feels painful and there is redness and swelling where I feel the pain. What should I do?*

A full breast forces milk through the ducts into the surrounding breast tissue, causing inflammation, swelling, redness and pain. If for some reason, milk cannot be removed from the breast efficiently, an infection is likely to develop within the breast, known as mastitis. If milk enters the blood stream it can even cause fever and flu-like symptoms. A course of antibiotics is necessary if symptoms are still present after 24 hours but it is important to continue breastfeeding. Allowing the breast to become full will increase the discomfort and worsen the infection.

*I am not feeling well, can I continue to breastfeed my baby?*

Yes. By the time you feel symptoms your body would have started to produce antibodies to fight that particular infection. These antibodies will then be present in your breastmilk helping to protect your baby from that infection. It is important that you inform your doctor that you are breastfeeding so that any prescribed medication will be compatible with breastfeeding. Avoid buying over-the-counter medications.

*My baby was doing really well but since yesterday he never seems satisfied and my breasts feel really soft and empty!*

This is known as a growth spurt and occurs every so often. Your growing baby needs to increase the amount of milk. The only way your breast can be facilitated to produce more milk is by bringing your baby to your breast to feed very frequently for a few days. Subsequently, you will notice that your baby settles again. You may also feel your breast fuller.

*I need to return to work when my baby is 3 months old, is it worth starting breastfeeding?*

Yes. Breastfeeding and working can be combined in different ways. You can express breastmilk for your carer to feed the baby and breastfeed directly when not at work. Your breasts do adjust but you may need to express small quantities at first to relieve full breasts during the absence from your baby. Breastfeeding can be very special to a working mother as only she can give that to her baby, so their special bond continues. Check with your employer whether a breastfeeding room is available at your place of work.

*How long should I breastfeed for?*

The World Health Organisation (WHO) recommends exclusive breastfeeding for the first 6 months. This means that no other food and/or drink except breast milk should be given for the first six months. At six months, your baby should be gradually introduced to single-ingredient, pureed foods with a smooth consistency while continuing the same amount of breastfeeds.

The WHO recommends that breastfeeding continues even into the second year of life and beyond (as long as mother and baby want to) accompanied by an increasing diet of solid foods.



### *A word on allergies*

As a general rule, no food should be eliminated from your diet but if you think that a food might be affecting your baby and is unsettled, best to talk to your family doctor. Mothers with a history of allergy benefit from avoiding any of the foods that are commonly associated with allergy such as cow's milk, nuts and corn, shellfish, wheat and citrus fruits. Try eliminating any of these foods, one at a time, and see if your baby's condition improves. It may take up to ten days for it to clear from your baby's system. The good news is that breastfeeding lessens your baby's chance of developing a sensitivity or allergy towards these foods later in life.

Caffeine may cause your baby to become irritable and sleepless. Reducing your intake of coffee, tea, cola drinks and chocolate may reduce your baby's irritability.

#### For further help and assistance

Parentcraft Classes	Tel: 2545 5124
Breastfeeding Walk in Clinic	Tel: 2545 4445 Tel: 2545 4447
MMDNA (Community Midwifery)	Tel: 21 387 526
Association of Breastfeeding Counsellors (ABC)	Tel: 21 494 766 Mob: 9983 7170

This publication has been formulated by **Mrs. Helen Borg** (Breastfeeding Walk in Clinic), with the contribution of **Ms. Lucienne Pace** (Health Promotion Unit). Design and photography by **Mr. Stefan Attard**.



5B, The Emporium, C. De Brocktorff Str., Msida MSD 1421 Malta.  
Tel: 2326 6000, Fax: 2326 6104, [www.ehealth.gov.mt](http://www.ehealth.gov.mt)

# Breastfeeding



**FREQUENTLY  
ASKED QUESTIONS**

Health Promotion & Disease  
Prevention Directorate

# Breastfeeding

## frequently asked questions

Although most mothers tend not to experience problems with breastfeeding, the following list of frequently asked questions (FAQ's) on breastfeeding has been gathered to reduce some misconceptions about the process of breastfeeding and to further assist those parents who choose to breastfeed their child.

This list of FAQ's supplements the booklet 'Guidelines for the Feeding of Infants and Young Children' which can be obtained either directly from the Health Promotion Unit or from your Health Centre or Mater Dei Hospital.

### *How often do I need to feed my baby?*

Ideally breastfeeding should be on demand for the first few days, whenever and as long as your baby wants. In the first 24 – 48 hours babies do not tend to feed very often but then become quite demanding for a day or two to catch-up. Following this feeding pattern, breastfeeding can be frequent during the early weeks. It is calculated that your baby requires at least 8 feeds in 24 hours; although more often than not, young babies tend to feed more frequently. Your baby can feed even up to 14 times in 24 hours.

### *My baby is having a bowel movement every 3 days. Is my baby constipated?*

There is a wide variation in bowel movements of breastfed babies. These vary from ten times a day to once a week. Your baby is unlikely to be constipated provided there is an adequate number of wet nappies (about 6 wet nappies in 24 hours once milk supply comes in i.e. baby is feeding well) and is gaining adequate weight and the consistency of the stools is yellowish, rather loose and soft. When bowel movements are less frequent, they should be abundant.

### *Do I need to change breasts during a feed?*

No. At the start of a feed the milk does not contain much fat. This type of milk is known as foremilk and it quenches your baby's thirst. As the feed progresses, the fat content of human milk increases and is known as hindmilk. Hindmilk satisfies your baby's hunger. When your baby drops your breast spontaneously appearing satisfied, offer your second breast, which may or may not be accepted.

### *What should I eat when breastfeeding?*

You should keep on eating a varied, well-balanced diet in the right proportions that includes the following:

- At least five portions of varied vegetables and fruit per day
- Starchy foods such as wholemeal bread, rice, pasta and potatoes. These should always accompany each of the main meals. Choose wholemeal or wholemeal varieties for plenty of fibre (roughage). Fibre can also be obtained by consuming legumes (beans, peas and lentils)
- Foods such as lean meat, chicken, fish, eggs and legumes. It is good to eat one-two portions of fish a week, including some oily fish
- Milk and dairy products as these contain calcium and are a source of protein too
- Drink plenty of fluids especially water; it is wise to have a small bottle of water when you are breastfeeding

Here are some ideas for a healthy snack to give you energy and strength:

- Fresh fruit (1 medium sized fruit is one portion)
- Bean-dip or hummus with vegetable sticks or wholemeal bread
- Vegetable and bean soups
- A small tub of yoghurt
- Two slices of wholemeal bread with tuna, tomato and green salad
- A small amount of dried fruit e.g. apricot, figs or prunes
- Baked potato and a salad
- A glass of milk or a glass of freshly squeezed seasonal fruit juice
- Fortified unsweetened wholegrain cereal (35-45g) with milk

To find more information on food portion-sizes, you may wish to refer to our guidance booklet 'Healthy eating for a healthy weight!'

### *Do I need to give extra fluids in between breastfeeding?*

Breast milk contains all the fluids a baby needs even in very hot weather. Juices and teas are not required before six months even if packets state otherwise.

### *Is nipple soreness normal?*

Some nipple soreness is normal in the first few days but there should be no signs of damaged skin or bleeding. This would suggest the baby is not being well positioned at the breast.

### *How can I tell if my baby is latched-on properly?*

**Comfortable seating:** Comfortable seating in an armchair enables you to have your feet firm on the ground whilst keeping your back straight. Sit or lie in a comfortable position prior to 'latching-on' your baby to your breast.

**Positioning of your baby:** Your baby's shoulders and chest should be turned towards the breast. Your baby's nose should be level with your nipple, then tease your baby's lips with your nipple and as your baby opens the mouth wide, bring your baby towards it. Your baby should have a mouthful of your breast. Check whether your baby is suckling effectively or simply comfort-sucking on your nipple. Always bring your baby to your breast; never take your breast to your baby. Once latched you will see some areola, (areola is the brown circle surrounding the nipple) by your baby's upper lip but you should see much less, near the bottom lip.

### Check list for breastfeeding your infant successfully



#### Good Attachment

- more areola should be visible above baby's mouth than below
- baby's mouth should be wide open
- baby's lower lip should be turned out
- baby's chin should be touching your breast

#### Effective Suckling

- slow deep suckles, occasionally pausing

#### Good Position

- baby's body should be straight (not bent or twisted)
- baby should be facing breast, start with nose to nipple (looking up at mother's eyes)
- baby's body should be close to mother's body
- baby's whole body should be supported (not just the head, or the bottom)

### *My baby is 4 days old. Why have my breasts become very uncomfortable?*

This normal discomfort means that your milk has come in. It usually lasts for around 3 days after which your breast becomes softer and comfortable. Engorgement occurs when the breast becomes very hard, like a stone, and is very painful. It can be the result of giving bottles at the stage when the mature milk comes in or by abruptly stopping breastfeeding. Some mothers may even experience engorgement as a result of irregular breastfeeding times. The best relief occurs with feeding your baby and then applying warm and cold compresses to your breast between feeds. Expressing small quantities of milk, approx 10cc, whenever your breast feels painful, relieves it; and keeps your nipple and areola soft so that your baby can form a teat for feeding.