

## When the baby's mother is returning soon

If the baby becomes unsettled, try holding him and talking to him softly. A small amount of EBM given from a clean bottle, small cup or with a spoon may also help keep him calm until his mother arrives. When the mother returns, she will probably want to feed her baby as soon as possible — for her own comfort, for contact with her baby and to help her milk supply.

## What to do if you are running out of EBM

Feed the baby the last of the EBM. If he needs more to drink before his mother returns, a small amount of cooled, boiled water can be given. Do not mix the water with the EBM or give the baby any other milks unless the mother has left them for her baby. You should always ask the mother before giving any other liquids to her baby, including water. She may be able to return sooner or send extra milk.

If the baby is eating other foods, you may be able to give something that the baby has had before. However please check this with the mother first.

## How you can help the baby's mother

You can be a big help to the baby's mother if you are positive about her leaving breastmilk for her baby. For some mothers it is easy to express milk, for others it takes quite a lot of effort but because it is very important to their baby, they want to continue. Your support can make a big difference, especially if she arranges to come to your home or centre to feed her baby. The baby will settle more quickly too.

There are times when a baby may go through a fussy period and for a few days may seem to need more milk. This often occurs at about the ages of 6 weeks, 3 months and 6 months. If you let the mother know, she can express more milk. The fussy period should stop in a few days. If the mother knows you support her efforts to give breastmilk to her baby, you will be helping in a very positive way for her to continue breastfeeding her baby.

## BREASTMILK IS THE NORMAL FOOD FOR BABIES.

Your encouragement and support are very important.

## If you need further help

The Australian Breastfeeding Association has breastfeeding counsellors available throughout Australia who are able to help mothers and caregivers with any queries. The number is on the front of this leaflet.

## Australian Breastfeeding Association website

This has informative articles, podcasts on different topics and a discussion forum where parents can talk with others on a variety of issues. Email counselling can also be accessed from the website.

[www.breastfeeding.asn.au](http://www.breastfeeding.asn.au)



# A Caregiver's Guide to the Breastfed Baby

This leaflet gives helpful information for the caregiver of a breastfed baby. It will help you confidently manage expressed breastmilk feeds and has guides for the storage and handling of breastmilk.

The Australian Breastfeeding Association also has booklets available which will help mothers who are expressing milk for their baby: *Expressing and Storing Breastmilk* and *Breastfeeding, Women and Work*. These are available from Mothers Direct stores in some states or via the Mothers Direct website [www.mothersdirect.com.au](http://www.mothersdirect.com.au)

If you need urgent information about breastmilk feeds for the baby you are looking after, please use the mother's contact details first. If you cannot contact the baby's mother and can't find the answer in this leaflet, the Australian Breastfeeding Association has a counselling helpline that can be called for more information. It is not a medical helpline. Please call the medical emergency number for a medical emergency.

## Breastfeeding Helpline

**1800 mum 2 mum**  
**1800 6 8 6 2 6 8 6**

Baby's name \_\_\_\_\_

Mum's name \_\_\_\_\_ Contact no. \_\_\_\_\_

Alternative contact \_\_\_\_\_ Contact no. \_\_\_\_\_

Emergency contact nos. \_\_\_\_\_

Notes: (usual feed, sleep, play times)

## General information

---

Breastmilk is the normal food for babies. It looks different to cows' milk or artificial baby milk (formula). Unlike milks that have been processed, which always look the same, breastmilk will form layers after standing. Separation of the milk is normal. A gentle shake will mix it again. Although you can mix together milk that has been expressed at different times if you need a larger amount, be guided by the baby's mother and the baby as to how much to feed at one time. Breastfed babies often have smaller feeds than babies who are not being fed breastmilk.

For health reasons, the expressed breastmilk (EBM) that a mother provides should only be used for her baby. Milk from different mothers should not be mixed together.

## Storing, preparing feeds and hygiene

---

In most cases the mother will leave EBM ready in bottles in the fridge. Fresh EBM can be kept safely in the fridge for up to 5 days. To warm cold EBM stand the bottle in a container of hot water (not boiling) until the EBM reaches body heat. Test how warm the milk is by dropping a little onto your wrist. It is right when it feels warm. Do not overheat or boil EBM as this can destroy some of the nutrients in breastmilk. **Do not use a microwave oven to thaw or heat EBM.**

Frozen EBM may be in a bottle, storage bag or other container. It can be warmed quickly, or thawed slowly in the fridge. Do not leave frozen EBM standing at room temperature. To thaw quickly, move the bottle or bag of frozen EBM about in a bowl of warm water. As the water cools, add a little hot water to the bowl and keep moving the EBM around until it all becomes liquid. You may need to put the EBM into a clean feeding container. It is a good idea to ask the mother when the baby is likely to need a feed and thaw the EBM before this time. Store thawed EBM in the fridge for no more than 4 hours and heat as for cold EBM.

EBM, like other food, can grow germs, particularly after freezing and thawing. Bottles, teats, spoons, cups or other feeding equipment need to be well washed in hot, soapy water and rinsed well (air-dry or dry with new paper towel if not being used straight away). Personal hygiene is also important. Wash your hands well before you start to prepare a feed.

Breastmilk should not be frozen or heated more than once. Offer small amounts of EBM at a time to the baby. If the baby is not hungry you will not have to throw out large amounts of EBM. If the baby needs more, prepare another small amount.

## Getting the baby to feed

---

Many breastfed babies refuse to take a bottle at first — a teat feels and tastes very different to their mother's skin. Babies may refuse to take a bottle from their mother as they are used to her breastfeeding them. Most babies adjust more quickly if they know their caregiver well, so it can help to have met the baby a few times, including a feed time before the baby is left with you for longer times. If the caregiver is the only person to give the baby a bottle, he will get used to this and will accept it more easily.

If the baby refuses to drink from a bottle, try feeding the EBM in a small cup or spoon. Or take the teat off, and use the bottle as a cup. Hold the baby in a sitting position and give small sips at first. Older babies may have success with a straw or sipper cup.

Sometimes, the baby will still refuse to drink the EBM. If so, gentle rocking or walking around may help settle him enough to feed. If the baby is still refusing, ask the mother to next time leave you some clothing that smells of her. If the baby cuddles into this while feeding, it may help him to accept the EBM from the bottle.

## Pacing bottle-feeds

---

Breastfed babies are used to being able to control the flow of milk as they feed and may find it quite stressful feeding from a teat with a fast flow. It may look like the baby is very hungry and gulping the milk down. However, he might be swallowing fast so that he does not choke. One way to avoid this is to pace the feeds.

Reasons for giving babies control of the pace of feeds:

- It allows the baby to drink the amount he wants rather than the caregiver giving him too much.
- By not giving a baby too much milk while he is away from his mother, it helps him to breastfeed when he is with his mother. This will help to keep his mother's milk supply.
- If you give only the amount the baby needs, the mother does not need to spend as long expressing to keep up with the amount of milk the baby is being (over)fed.

## How to pace feeds

---

- Try not to feed the baby every time he is unhappy. A nappy change, cuddle or more attention may be what he needs. If he is obviously hungry though, offer a feed.
- Watch for signs that the baby is hungry rather than feeding to a time schedule. The baby will get restless and may start sucking his fingers or moving his head on your chest when you pick him up. If he is past this stage, he may be crying and not stop when you comfort him.
- Hold the baby in an upright position. This stops him taking too much milk at the start of the feed. Support the baby's head and neck with your hand rather than with your arm (see drawing at right).
- Use a slow-flow teat.
- Gently brush the teat down the middle of the baby's lips, particularly the bottom lip. This helps the baby to open his mouth wide, allowing you to place the whole teat into his mouth, like he would if he was breastfeeding. Do not push the teat into the baby's mouth. Let him take it himself.
- Tip the bottom of the bottle up just far enough for the EBM to fill the teat. As the feed goes on, you will need to let the baby gradually lean backwards more and more so that the teat stays filled with EBM. Keep the baby's head and neck lined up. At the end of the feed the bottle will be almost vertical.
- Let the baby have rests every few minutes to make it more like a breastfeed. This will help stop the baby drinking too much too fast.
- Allow the baby to decide when to finish the feed. He may not need to drink all the EBM in the bottle. It is better to do this than to worry about wasting a small amount of EBM.



## Settling the baby

---

Many breastfed babies are used to being cuddled or rocked to sleep. Ask the mother what works for her baby. If the baby is used to being carried in a front-carry baby sling, such as a Meh Tai or Simplicity Sling, ask the mother to leave the sling with you to use. Fast, gentle back patting combined with slow side-to-side movement usually soothes a baby. The baby should be held high in this type of sling, close enough that you could easily kiss the baby's head.