



In collaboration with AOU and Fondazione Meyer

Information and advice for parents.

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1) Naturally Mum

WELCOME!

You were born on

In

At _____ o'clock

You were named

You weighed _____ kg

You were _____ cm long

Breastfeeding your baby with love and ease

It is, first of all, an act of love.

It is the most natural way to maintain that special and unique relationship which developed between you and your child during pregnancy. This experience is rich in emotions, it creates an intense bond which helps you and your baby get to know each other and grow.

NATURALLY MUM

Your milk is the best for your baby: it nourishes him/her completely while providing protection from many illnesses and infections. It is practical, simple, inexpensive, in one word: perfect. Most babies, in fact, will need no other food or drink until they are over six months old.

Breastfeeding is easy, but in the early days you might need to learn what to do and, if necessary, ask for help.

NATURALLY MUM

If you have already started giving your baby artificial milk and you wish to breastfeed him/her you can do so, perhaps by asking for an expert's advice.

This booklet is meant to be a precious aid for you, Mother, and for your baby. It contains useful information about breastfeeding, accompanied by photographs and pictures.

The volume also comes with a bright-colored mum-baby diary, where you can make a note of memories and special moments.

Breast milk contains antibodies that protect your baby from infections. Enteritis, ear infection, respiratory and urine infections are all more frequent in babies fed with artificial milk. Breastfeeding helps the baby grow up and develop in the best way and its advantages continue over time as well. Breastfeeding has a special importance for mothers too. It helps them lose the weight gained during pregnancy and it reduces the risk of developing osteoporosis and some forms of tumor of the breast and of the ovaries.

BREASTFEEDING: UNIQUE AND SPECIAL

Advantages for the baby:

- Better mouth formation.
- Protection against respiratory infections and asthma.
- Protection against ear infection.
- Protection against diarrhea.
- Lower risk of diabetes.
- It does not pollute.

Advantages for the mother:

- Lower risk of early breast cancer.
- Stronger bones in later life.
- It does not pollute.
- It is free.

CLOSE TO THE HEART

The mother's position

First of all, it is important to find a comfortable position.

If you are sitting down, make sure that:

- your back is straight and supported;
- your feet are placed firmly on the ground or perhaps propped on a stool;
- you have some pillows, they are useful to support your back and arms or to hold the baby at the level of your breast.

Breastfeeding lying down is useful after a Caesarean delivery, in the first days after giving birth or whenever you feel particularly tired. It is the most comfortable position at nighttime as well, because you can rest while your baby feeds.

Lie down on the bed and get comfortable on your side, with a pillow under your head and shoulder. A pillow behind your back and one between your legs might be of help.

Once your baby has learned to feed well, you will be able to breastfeed anywhere, without needing pillows.

The baby's position

There are various ways in which you can hold your baby for breastfeeding.

Whichever position you choose, here are some guidelines to help make sure that the baby feeds well:

- hold the baby close to you;
- the baby should be facing the breast, with head, shoulders and body in a straight line;
- the baby's nose or upper lip should be in front of the nipple;
- the baby should be able to reach the breast easily, without having to stretch or twist;
- remember always to move your baby towards your breast, rather than your breast towards the baby.

In short:

- the baby facing the mother;
- the nose in front of the nipple;
- the baby towards the breast and not the breast towards the baby.

Cross-cradle hold

Cradle hold

Football hold

When the baby is well attached you will notice that:

- his mouth is wide open and "filled" by the breast;
- his chin brushes against the breast;
- his bottom lip is curled back and his tongue is on the breast;
- the areola, the darker skin around the nipple, is more visible above the baby's upper lip than below the bottom one;
- the sucking pattern changes from short sucks to long, deep sucks, with pauses.

The first few times you breastfeed your baby you may feel some discomfort, but this sensation will tend to fade quickly.

If it continues to hurt, probably the baby is not latched on properly. In this case try to pull him/her off by gently inserting a finger in the corner of his/her mouth, so as to break the suction. Then help the baby latch on again. If the pain continues, ask for advice. The milk produced in the first few days is called colostrum and it is precious, even in small quantities, because it contains everything your baby needs.

Lactogenesis begins a few days later.

SOME PRECIOUS ADVICE

Keep the baby near you, especially when you start to breastfeed. You will get to know him/her well and understand when he/she is hungry. This is important, especially at night.

If the baby is close by, it will be easier for you to breastfeed him/her and you will be able to return to sleep more quickly. **Breast milk contains all the nourishing substances and water your baby needs in the first 6 months.** Offering other food or drink could be harmful and make the baby lose interest in breast milk.

If the baby does not feed often, you may not produce enough milk to meet his growing needs.

Therefore feed your baby every time he seems hungry.

Some problems, experienced in the first few weeks of breastfeeding (sore nipples, engorgement, mastitis), occur either because the baby is not latched on to the breast properly or because he/she is not nursing often enough.

If you feel you need advice, ask for it.

WHEN TO BREASTFEED?

HOW MANY TIMES?

Babies are not all the same and their feeding patterns vary enormously. In the first day or two some babies don't seem interested. Later on the feeds may become very frequent, particularly in the first few weeks. This is absolutely normal.

If you breastfeed your baby every time he asks for it, you will produce enough milk to meet his needs.

This is because every time he suckles at your breast, signals are sent to a gland in your brain called hypophysis. This, in turn, sends signals to your breast to produce more milk.

Therefore: MORE BREASTFEEDING = MORE SIGNALS = MORE MILK

The more you breastfeed, the more milk you produce: it's a mistake to skip feeding time, thinking to save milk for next time.

The less you breastfeed, the less stimuli you will have for producing milk! Each time your baby feeds, he stimulates the production of milk. While the baby is learning how to suckle, his feeds may be quite long.

Many mothers fear that frequent feeding might mean less milk. It's not true. If the baby is well attached to the breast, this is very unlikely. However, if you are unsure, ask for advice.

As the days go by, breastfeeding becomes easier and easier.

Breast milk is always available and at the right temperature.

The baby will let you know when it is time for the next feed.

Babies enjoy nursing very much and usually they stop sucking when they are full.

IS EVERYTHING GOING WELL?

Breastfeeding is going well if your baby:

- is ready and awake for meals;
- produces clear and abundant urine at least 5-6 times a day after the first week;
- gains weight after the first week;
- is relaxed and sleeps several times in 24 hours.

And when your breasts or nipples do not hurt.

GROWING TOGETHER

Breastfeeding shouldn't stop you and your baby going out and enjoying life. You can breastfeed almost anywhere if this is not against your cultural sensitivity. In the beginning you may feel a little uncomfortable but soon you will get more confident, without worrying that you are showing your

breast or, if you prefer having more intimacy, by wrapping a wide shawl around yourself and your baby. Most people won't even notice that you are breastfeeding: try practicing at home in front of the mirror. Sometimes the baby is hungrier and wants to feed more often. Feeding your baby whenever he is hungry allows you to give him/her what he needs.

Again, remember: **the more you breastfeed, the more milk you produce.**

If you want to go out without your baby or if you return to work, you can easily continue to breastfeed: it is possible to express milk and leave it ready for feeding time.

Below you will find some advice on this practice.

Breast milk alone provides all the food and drink a baby needs for the first six months.

Don't try to introduce your baby to solid food before he is ready and always ask for the pediatrician's advice.

Many mothers breastfeed for longer time, into the second year and beyond.

Breastfeeding will benefit both you and your baby for as long as you wish to continue; even when you stop breastfeeding, remember that milk is a fundamental nutrient for your child's growth.

MOTHER'S MILK IN MANY WAYS

Expressing breast milk

Sometimes it can be useful to express breast milk.

For example, if:

- you need to help your baby latch on to a breast that is too full;
- your breasts feel engorged and sore;
- your baby is too small or sick to breastfeed;
- you need to be away for many hours;
- you have to go back to work.

You can express breast milk:

- by hand;
- with a hand pump;
- with an electric breast-pump.

Getting started

- Try to be as comfortable and relaxed as possible; A quiet room and a hot drink may help.
- Stay close to your baby, if this is not possible keep a photograph of your baby in front of you.
- Before expressing the milk, have a hot bath or shower or apply warm flannels to your breast.

- Gently massage your breast: you can do this by rotating your fingertips (**A**) or with your closed fist towards the nipple (**B**); massage the whole breast, even the underneath part; don't slide your fingers so as not to damage the skin.
- After the massage gently roll your nipple between your index finger and your thumb: this encourages the release of hormones which stimulate your breast to produce and release the milk.
- You will find that expressing milk becomes easier with practice, just like breastfeeding.

Hand Expressing

- It is a convenient and cheap way of expressing milk and it is particularly useful if you want to relieve the discomfort of a full breast. These instructions are a guide, but the best way to learn is to practice: with practice you will find the way that suits you best.
- You will need to collect the milk in a sterile, large mouthed container such as a small jug, for example.
- With practice, it's possible to express milk from both breasts at the same time.

Whichever method you use, you have to wait one-two minutes before the milk starts to flow.

Milk can be continuously expressed from one breast for a few minutes before the supply slows down or stops.

At this point milk should be expressed from the other breast, you should then go back to the first breast and start again.

Keep alternating between the two breasts until the milk stops or drips slowly.

Techniques for expressing milk by hand

1. Place your index finger under the breast, towards the edge of the areola, and your thumb on top of the breast opposite the index finger. If you have a large areola, you may need to place your fingers slightly inside its edge; if your areola is small, you can place them slightly outside. Use your other fingers to support the breast (**C**).
2. Keeping your index finger and thumb in the same position, gently press them inwards towards the thoracic wall.
3. Maintaining this gentle backwards pressure move your thumb and index finger towards each other, thus easing the milk along the ducts and towards the nipple (**D**). Do not squeeze the nipple, it is unnecessary and it could be painful.
4. Release the pressure between the fingers to allow the ducts to refill and then repeat steps 2 and 3.

With practice you will find that it will only take a few seconds to carry out all the steps and you will be able to keep a steady rhythm. This will result in the milk dripping and maybe even spurting from the breast. It's important to change the position of the hands to make sure that the milk is expressed from each part of the breast.

Hand pump

It's easy to use. There are various designs that work in different ways: some are operated by hand, others by a battery. They all have a small funnel which fits over the nipple and areola. Different breast-pumps suit different women, it would therefore be useful to try it out before buying it, if possible.

Electric pump

These pumps are easy and fast because they work automatically. They are particularly suitable if you need to express for an extended period, for example, if your baby is in an intensive-care unit. In this case, to maintain your supply you should use it at least 6-8 times in 24 hours, including once during the night. Some breast-pumps have a dual pumping beaker set which allows you to express both breasts at the same time. This system is quicker and may stimulate your milk production.

Important, when you use a hand or an electric breast-pump:

- Follow the manufacturer's instructions carefully.
- Wash your hands thoroughly before you start!
- The breast-pump's containers, bottles and pieces must be: always washed in hot soapy water; sterilized if your baby is very small, if he is in hospital, or if you share the breast-pump with other women.

You can also donate your milk to the closest milk bank.

HOW TO STORE YOUR MILK

Breast milk can be stored in the coldest part of the refrigerator at a temperature of 2-5 °C for up to 3 days.

If there is no thermometer in the refrigerator, it might be safer to freeze the milk that you think you won't be using within 48 hours.

Milk can be stored:

- For one week in the refrigerator's ice compartment;
- Up to 3 months in refrigerator's freezer with an independent door;
- Up to 6 months in the deepfreeze.

At home you can use any plastic container (sterilized and with an airtight seal) to freeze the milk.

Remember to label and write the date of extraction on each container and to use the older one first. If you are expressing your milk because your baby is premature or ill, always ask the staff who is caring for him/her for advice. Frozen breast milk should be thawed slowly in the refrigerator or at room temperature. You can also place the container in warm water. **Do not use a microwave oven**, this may cause the milk to become an uneven temperature which may scald your baby's mouth. Thawed milk can be stored in the refrigerator and used within 24 hours.

Once it has been brought back to room temperature, it must be used or thrown away, **never refrozen**.

Do not follow "special diets" during breastfeeding: simply, according to your own taste, keep a balanced diet that makes you feel well; it's not necessary to avoid particular foods.

Remember that at birth your baby already knows the smells and tastes of what you were used to eating during the last three months of pregnancy and it is important for him to resume those habits.

BACK HOME: WHO TO TURN TO?

There are various possibilities for receiving help to continue breastfeeding in the best way. These also depend on where you live. When you are discharged you can ask the hospital's pediatrician or the health workers who have been caring for you to give you precise indications.

Once you're home you can turn to your **guidance council** or to the outpatient breastfeeding clinic, if there is one near you.

In any case the **family pediatrician** you choose before being discharged or immediately afterwards will be the figure of reference for you and your baby. In some areas there are active self-help groups made up of trained mothers who are willing to give advice or support.

There are also voluntary workers such as the members of **La Leche League**.

WORKING MUMS: THEIR RIGHTS

Remember that working mothers have special rights in the first years of the baby's life.

The Region of Tuscany has published a pamphlet, which you can find at the guidance council, on safeguarding the health of pregnant women at work and after childbirth.

You can ask for more information at the guidance council or at the prevention departments of Tuscany's ASL.

MY SUPPORT NETWORK

Telephone Number
of the Birth Place:

Guidance council's midwife:

Family pediatrician:

Gynecologist:

Breastfeeding clinic:

Voluntary services:

Other mums:

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2) It's Better for Them

The Sudden Infant Death Syndrome (SIDS) is the sudden and unexpected death of an infant, also known as “cot death”.

Even though its causes are still unknown the preventive measures described below are well known.

Sleeping Safety

During the first months of life

- The best sleeping position for your baby is on his/her back
- Never let your baby sleep face down or on his/her side
- Let your baby sleep on a firm mattress without a pillow in your room, but not in your bed with you

Keep your baby Smoke-Free

- During pregnancy
- Once born
- Do not smoke or keep your baby in smoke-filled rooms

Cool is Best

- Do not cover your baby too much
- Do not wrap your baby tightly in blankets
- Keep your baby away from heat sources: the ideal room temperature is 18-20 C°
- If your baby has a high temperature he/she needs to be covered less, not more!

Using a Dummy while sleeping can also reduce the risk of SIDS

However, it is important to remember

- To give your baby a dummy only after the first month of life
- Not to force your baby if he/she does not want it
- Not to reuse it if it falls out
- To avoid coating it in sweeteners
- To stop using it before the age of one

3) An Act of Love

Donating breast milk

Donating milk feeds life

Voluntary donation of milk is an act of love, simple yet important for the health of the most fragile babies. If you are breastfeeding your baby, please consider it.

Why you should donate

Breast milk is important for premature and sick babies. Often the mothers of these tiny creatures find it difficult to produce enough milk, due to stress and the length of time spent away from their hospitalised child. Donated milk helps these babies live and get better.

What it's used for

Donated milk is used to feed babies born prematurely and/or with gastrointestinal, metabolic, heart and kidney disorders, conditions often characterised by a lower food tolerance. As a priority it is given to hospitalised babies, but it can also be supplied to babies with persisting problems after discharge.

Who can donate

Mothers who would like to donate are given a simple medical check-up.

Donation is approved if:

- a) this does not harm the health of the donor or baby
- b) the donor is in good health and has no recent history of behaviour or conditions with the risk of transmission via the milk of toxic substances or infective agents
- c) infection screening (for HIV, Hepatitis B and C, syphilis) with a blood test prior to donation gives negative results.

How much milk is donated and for how long

A reasonable quantity can be donated for as long as desired. Every drop is important, especially if you are a mother who gave birth prematurely or recently due to the special characteristics that the milk has at this stage. Mothers with plenty of milk can donate with no problems for themselves or their own child. Stimulating and emptying the breast regularly in fact guarantees greater production, which is also an advantage for their own baby.

Where the milk is stored

Donated milk is collected and stored in the Donor Human Milk Banks (in Italy Banche del Latte Umano Donato or BLUD). These health structures, linked to neonatal wards, are responsible for checks, processing to guarantee quality and safety and free distribution of the milk to the babies who need it for medical reasons.

To ensure continual availability throughout Tuscany of quality controlled donor human milk, a regional network of Donor Human Milk Banks has been set up (ReBLUD), which coordinates the banks in the region (with offices in Arezzo, Florence, Grosseto, Lido di Camaiore, Lucca and Siena).

What to do to become a donor

For this act of love, you should contact your local Milk Bank, where dedicated personnel will give you all the information you need regarding donation and helpful advice for breastfeeding.

Mothers who decide to donate will receive all the necessary equipment (bottles, breast pump, etc.) and instructions on how to express and store the milk correctly. Most banks organise scheduled home collection.

Information and contacts

Rete regionale delle Banche del Latte Umano Donato - ReBLUD

Regional network of Donor Human Milk Banks

Centres divided into local areas.

AREZZO

(covering Valdarno, Casentino)

Ospedale Nuovo San Donato

Via Pietro Nenni Tel. 0575 254531

Contacts: Manuela Caneschi; Letizia Magi

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GROSSETO

(covering Cecina, Piombino, Portoferraio)

Ospedale Misericordia

Via Senese 115

Tel. 0564 495329 - 485316

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LIDO DI CAMAIORE

(covering Massa, Viareggio, Pisa, Livorno)

Ospedale Unico Versilia

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LUCCA

(covering Pistoia, Pescia, Pontedera)

Ospedale Campo Marte

Via dell'Ospedale 1

Tel. 0583 970364 - 970371

Contacts: Raffaele Domenici, Simona Tognetti,

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SIENA

(covering Castelfiorentino Poggibonsi)

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www.regione.toscana.it/salute

4) Dedicated to Parents

Understanding, protecting and sharing, on your child's level

Advice from the Family Paediatrician and the Trauma Center

The first year of life is an intense fundamental period for a child's growth. In these twelve months a wide range of behaviour is learnt and refined; dialogue starts with other humans that will last a lifetime; exploration of surroundings goes further with the conquest of more and more evolved physical positions and abilities; it is the beginning of verbal language acquisition. Children learn quickly and achieve new movements from one day to the next, giving no prior warning and so, during this first year, from barely mobile babies they become capable of turning, moving, then sitting up and finally pulling themselves up and taking their first steps.

Attention and care: preventing hazards

For children to be safe, it is fundamental that adults protect them and teach them how to interact with their surroundings without risks. Children need to touch and feel everything around them, to experiment use of their body. These explorative needs must be encouraged as they are the base for growth and the ability to develop a satisfying productive relationship with the surrounding world. It is not a question of mollycoddling children with hyper-protective behaviour, but of following them throughout their day so that they develop the abilities, habits and automatisms fundamental for safety. The smaller the child, the more no's and alarms there are; as they grow these make way for explanations of danger and how to deal with it.

Unexpected movements that small children can make

- never leave your baby alone on the changing mat or scales; babies move and you cannot predict the moment when he/she will manage to make a movement like rolling for the first time
- small objects (buttons, brooches, beads, toys with parts that may come off) can be swallowed
- never put laces or chains around your baby's neck because they may cause suffocation
- never use talcum powder; if inhaled it can have very serious consequences
- never use cotton ear buds to clean your baby's ears, unexpected turning of the head may cause

internal injuries

- remember that children can drown in a very little water: bathtubs, blow-up paddling pools or swimming pools must never be easy to reach by children and they must always have adult supervision.

Safety at home

Small children can climb or hold onto shelving or furniture and these may topple over:

- fix furniture to the wall and avoid putting heavy or unstable ornaments on it
- use suitable barriers to block access to stairs and landings
- protect low windows with safety locks: your child will soon learn to how to reach windowsills or tops of railings by climbing onto easily moved furniture (chairs, benches, flower vases, stiff boxes, etc.)
- sockets and switches must be firmly attached to walls.

Medicines and hazardous substances

- keep all medicines in the home in a special cupboard, closed and out of the reach of children. Never leave daily medicines (tranquillisers, birth-control pills, etc.) on bedside tables or tables
- never fill empty mineral water or soft drink bottles with liquids used around the house (stain removers, caustic substances, disinfectants, etc.)
- keep hazardous substances in their original containers, sealed tightly, the contents clearly marked on the label and stored somewhere out of the reach of children (for example in the top cupboards in the kitchen)
- if boiling liquid should come into contact with the child's body, do not apply ice or creams. Immediately cool the area with cold running water for several minutes, cover with a clean cloth and take the child to your local A&E department

In the car and in the buggy

- you must adopt certain safety criteria when you take your children in the car: always use a car seat suitable for the age and weight of your child
- make sure small children in pushchairs are well strapped in, especially when going up and down stairs or pavements.

Time together: reading and music

Telling a story or listening to a lullaby can become important means to create a close relationship with your children from a very early age.

A way of communicating love and enjoyment of reading and music, stimulating their imagination, creativity and their capacity to listen, but also a chance to spend time together, having fun and helping them to discover, word after word, note after note, the world around them.

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