

# PUMPING, STORING & BOTTLE-FEEDING

Some babies are rarely, if ever, bottle-fed. This is possible if mom and baby's other caregivers have flexible schedules: mom waits till baby is ready to feed, gives a feeding, and then can leave the baby with a caregiver for a couple hours before he will need to eat again.

However, most women find it helpful to be able to bottle-feed at times.

## Hand expressing

If you only need a bottle on a rare occasion, it may work to hand express. To collect this milk, lean over a cup as you express, and let the drops fall into the cup.

To hand express: Cup your hand in a C-shape, with the thumb above the areola and the first two fingers about 1 – 1.5 inches below the nipple. (The other fingers are held slightly away from the breast.) Push your hand straight back toward your rib-cage, then roll your fingers forward toward the nipple, expressing a few drops of liquid. Rotate the thumb and fingers to milk other reservoirs, using both hands on each breast.

Avoid: squeezing the breast, sliding hands over the breast, and pulling on the nipple or breast.

## Choosing a Pump

If you plan to pump less than 5 – 7 times a week, a good quality manual pump should meet your needs. If you're pumping multiple times a day, want to pump as quickly as possible, and want to maintain the best milk supply, you may want a high-quality electric breast pump, which can pump both breasts at the same time, allowing mom to complete a pumping session within 10 – 15 minutes. It is possible to rent electric breast pumps instead of buying.

## When and How to Pump

- Always wash hands before expressing. Wash pump and collection bottles after each use.
- Pump anytime you will miss a feeding, i.e. whenever baby gets a bottle. Making sure that you express the same amount of milk as baby takes in will help to maintain your milk supply.
- It may work best to pump when breasts feel full. This could be first thing in the morning, or it could be in the early evening. Some women pump while baby is nursing on one breast.
- Make yourself comfortable first, ideally in a private, uninterrupted, warm area. Then relax by doing some slow deep breathing. Some people find it helpful to look at baby's picture.
- Gently brush fingertips across nipples before pumping. Massage the breasts in small circular motions, then stroke the breast area from the top of the breast to the nipple while pumping.
- Jiggle or gently shake the breast while leaning forward. Gravity helps the ejection reflex.

## Storing Breast Milk

Mature milk appears thinner than cows' milk, and it may look slightly blue, although the color varies. The hindmilk may separate off, and look like a creamier substance floating on top of the milk. This does not mean milk has spoiled... just shake to re-integrate it.

After pumping, transfer milk to whatever storage container you're planning to use: bottles, bottle liners or plastic breast milk storage bags. Store in 2 – 4 ounce quantities. Small amounts thaw and warm up quickly, and baby is likely to take in at least this much at each feeding. If you're

planning to freeze the milk, don't fill the container all the way, since the milk will expand while freezing. Some women freeze milk in ice cube trays so they have 1 ounce servings ready to thaw. Always label the milk with date and time pumped. Rotate the stock of breast milk so you are using the oldest milk first, to ensure that all milk will be consumed within its safe range. Storage times: If you know you will feed the milk sometime today, breast milk can be kept at room temperature for a *maximum* of 10 hours. It will keep on the refrigerator for a *maximum* of 8 days. If the milk was frozen within 24 hours of pumping, it will keep three months in the back of the freezer. In general though, it is best to refrigerate as soon as possible after pumping, and to use the milk as soon as possible.

## Preparing a Bottle

There are several kinds of bottles and nipples on the market, each “scientifically designed” for babies. Buy two or three different kinds, and find out which one works best for your baby.

Warming Bottles: For frozen milk, thaw overnight in the refrigerator, or place it in a container of warm water, or hold it under warm running water from the sink. Once milk has thawed, serve immediately, or refrigerate and use within the next 24 hours; do not re-freeze.

Babies can drink milk at room temperature, or warmed to body temperature. Again, warm the bottle in a container of warm water, or under running water. Test the temperature by dotting a little milk on the inside of your wrist. If it is comfortably warm, but not hot, it's ready for baby. Don't use a microwave to heat baby's milk. They can cause hot spots that are hot enough to burn baby's mouth. They may also damage some of the nutrients and antibodies in the milk.

## Introducing a Bottle

If breastfeeding is a priority to you, it is generally recommended that you wait to introduce a bottle till breastfeeding is well established: baby's latch is good, mom is comfortable with nursing, and her breast milk supply is established. This is typically when baby is 3 – 5 weeks old. (If a supplement is medically necessary before breastfeeding is established, you can use medicine droppers, spoons, or “SNS” to feed expressed milk. See PCN page 453.)

The reason to wait to introduce a bottle is that some babies develop “nipple confusion” and have a hard time switching back and forth between breast and bottle. In the early weeks, if given both options, they may choose the bottle, and you may have a difficult time continuing breastfeeding. If you do intend to use bottles at some point, it is best not to wait more than 12 weeks, as some older babies will develop a strong preference for mom, and will not learn to use a bottle as easily. For the first several bottles, try first breastfeeding for a while to ease hunger, so baby is calm and ready to learn a new skill. Then give the bottle. It is best if someone other than mom introduces the first several bottles.

## Introducing Formula

For baby's health, it is better to bottle-feed breast milk than to feed formula. Especially if you have a family history of food allergies, it is recommended to delay formula as long as possible. If at some point, you do choose to introduce formula, ask your pediatrician for recommendations. You can also look at websites from the manufacturers to find out more, but remember that information may have a bias. For more information of formula, see PCN page 461.

It is usually best to start with a cows' milk based formula, and only use soy if nothing else has worked. Formula comes in three forms: powdered is cheapest and takes the least storage space,

but you must mix it with the correct amount of water. If you buy concentrated, that's also mixed with water. Ready-to-serve is the most expensive, and the bulkiest, but requires no preparation. It is generally possible to mix breastfeeding, expressed milk, and formula. For example, mom nurses whenever she and baby are together, baby is bottle-fed expressed milk at other times, and formula on occasion. Another example: breastfeeding twice a day, formula at other feedings.

## Cleaning Bottles

Before using them for the first time, you should sterilize bottles and nipples by placing them in boiling water for five minutes. After that, it is generally not necessary to sterilize, you need only wash them in hot, soapy water. Buy a bottle brush for cleaning milk out of the bottom of the bottles, and out of the crevices in the nipple. Squeeze water through the nipple holes to make sure they are cleared out. Rinse well, and let bottles and nipples stand in a rack to dry.

When babies drink from a bottle, their saliva can contaminate the milk remaining in the bottle, so plan to use that bottle only for the next hour or so, then dump out the remaining milk.

## How Much to Bottle Feed

If your newborn is only getting an occasional bottle, plan on offering 2 – 4 ounces. If a baby is bottle-fed fulltime, he would take in 2 – 3 ounces of breast milk or formula per day for every pound he weighs (e.g. 20 – 30 ounces a day for a 10 pound baby.)

## Burping a breastfed baby

Breasted babies don't always need to burp after nursing, as they may not take in as much air as a bottle-fed baby. When baby is done with the first breast, try burping him. If baby does not burp within a few minutes, try again at the end of the feeding. If he is drowsy and seems relaxed and on the verge of sleep, he may not need to burp, so just try for a little while. On the other hand, if a baby is really gassy, you can tell by these cues: baby's belly is taut and round, he is grimacing and making faces, his body is stiff, and he may arch his back. This baby needs burping!

Babies almost always need to burp after a bottle.

To burp a baby, the goal is to put some pressure on his belly at the same time you put pressure on his back. You can lay him so his belly is resting on your shoulder or on your leg, then rub his back in firm, slow circles to bring up the gas bubbles. For more on burping, see PCN page 440.

## Spitting Up

When your baby burps, he may spit up milk, especially after a feeding. The spit-up may look like milk, or may have curds in it, like cottage cheese. Generally, spit up looks like a larger quantity of milk than it is. As long as your baby is gaining weight adequately, there is no need to worry.

If your baby spits up frequently, try sitting him up during feedings, and just after eating.

Call your baby's medical provider if the spit-up seems to be associated with pain, or if it is projectile vomiting more than twice in one day. Call the doctor if baby is not growing well, does not have frequent BMs and wet diapers, or seems sick.