

Giving a Bottle to Your Breastfed Newborn

Many parents have heard that giving even one bottle to a baby under 3 weeks will make breastfeeding difficult. However, it is possible to use bottles safely, even in the first week. If your baby's doctor is suggesting you use a bottle while resolving some problem, or if you would like to give a relief bottle of pumped milk, here are some tips:

How to support breastfeeding skills with a bottle:

- 1. Upright approach.** Place your baby comfortably upright in your lap, well supported against your chest. This position will encourage active feeding as the milk will flow only when your baby sucks. In contrast a baby who is supine may be overwhelmed by the flow and develop a passive feeding habit which would not work for breastfeeding. If mother is giving the bottle, she can hold the bottle against her bare breast to provide a positive association.

On-side approach. If you are struggling with the upright feeding position, you may enjoy the “on-side” approach for your little one. Lay your baby on his/her side on a pillow in your lap such that your newborn's bottom is against your abdomen and head will be on your knees. If you are right-handed you will be holding the bottle in your right hand and your left hand will support your baby's head. Continue the feed as described below. This position makes it very easy for you to “pace” the bottle by rotating your baby slightly downward or slightly upward to slow down or speed up the flow.
- 2.** If you allow your baby's head to tip back a little (same position we hold our heads when drinking from a cup) it will be easier for him/her swallow and will help the next step.
- 3.** Touch the bottle nipple to the center of your baby's upper lip and **wait until your baby opens wide**, as if yawning, before starting the feed. This way you're supporting your baby's gape (open wide) reflex for breastfeeding.
- 4. Hold the bottle as flat as possible.** A little air in the nipple is okay!
- 5.** Your baby's lips should be close to the collar that holds the nipple in place on the bottle. Sucking onto only the end of the nipple might cause your baby to try the same shallow position on the breast.

Pacing

This refers to slowing down a bottle to make the flow more closely mimic breastfeeding. There are moments when this is an excellent idea, but there are also moments when you will want the bottle to flow easily to maximize intake. **If your baby is small or early, and your baby's doctor is worried about his or her weight, or jaundice, you will want to rely on an easy flow of milk until goals have been met.** If at that point you still need to give a bottle then you may want to adopt some pacing techniques:

1. Breasts usually don't flow at baby's first suck. Start out with the bottle dipped down so that the nipple is empty for about 10 seconds.
2. Breasts may not flow consistently. Instead milk releases in pulses. You may want to dip the bottle down again after a couple of minutes and give your baby a pause of about 5 seconds. Repeat from time to time such that the feed takes about 20 minutes.

Avoid pacing the feed so much that your baby gives up, falling asleep before taking a complete feed. Ideally pick a nipple that is slow enough that you do not have to worry about pacing.

For more information look here: nurturedchild.ca/index.php/2010/12/10/baby-led-bottle-feeding/Breastandbottlefeeding.com

Choosing an appropriate bottle

Your baby should take a 2-3 ounce feed (60 to 90 milliliters) in about 20 minutes (not including burping). Ask for help if the feeds are slower than this.

Dr. Brown's standard (not wide-neck) bottle is an excellent starter bottle for most newborns and it comes with the Level 1 slow-flow nipple. The four-ounce size is ideal. This nipple is soft with a gently flaring shape, and the vent system eliminates vacuum problems that might prevent a proper flow of milk. The Preemie nipple is the slowest nipple for the Dr. Brown's bottle. You should switch to this nipple only if your baby is feeding too fast despite your careful technique (holding the bottle flat, doing a little pacing).

Many of the so-called wide-neck bottles may be a problem for newborns as the transition between the nipple portion and the wider base is too abrupt. Baby ends up on the narrow portion only. These bottles may be fine when your baby is bigger. **Examples to avoid** initially are:

- BornFree
- Tommee Tippee
- Avent
- Playtex VentAire
- Dr. Brown's wide-neck
- Playtex NaturaLatch
- ComoTomo

When should I burp my baby?

If your baby is feeding contentedly, there is no need to interrupt the feed in order to burp. At the end of the feed support your baby upright against your chest and pat gently for a few minutes. Babies do not always burp.

How much milk should I feed my baby?

Put at least half an ounce (15 milliliters) more milk in the bottle than you expect your baby to drink. Room-temperature milk is fine. Your baby's doctor will give you an intake goal, often 16 to 20 ounces (500 to 600 milliliters) daily starting on day four. Do not limit your baby's intake. Continue feeding until your baby refuses to suck and is content.

Book

Balancing Breast and Bottle: Reaching Your Breastfeeding Goals by Peterson and Harmer