This booklet was developed and endorsed by:

Healthy Start Coalition of Hillsborough County
Hillsborough County WIC & Nutrition Services
Hillsborough County Breastfeeding Taskforce
Tampa General Hospital
Tampa General Hospital Pediatric Center at Healthpark
and Genesis Women’s Center at Healthpark
University of South Florida Department of Pediatrics & OB/GYN
REACHUP, Inc.
Breastfeeding after six months

Should I still breastfeed after my baby starts eating other food?
- You can still continue breastfeeding when you start feeding other food.
- It is up to you and your baby to decide when to stop breastfeeding.
- Breast milk is still a very important food after six months. Even after six months, it still contains the nutrition babies need and helps fight infection.
- Some babies decrease the number of breastfeeds as they begin to be able to digest solid food.
- Babies weaned from breast milk prior to their first birthday need to be given infant formula until their first birthday.
- You can breastfeed during teething. The only effect most mothers notice is a small groove on the breasts where the teeth press during nursing.
- Weaning off the breast is no more difficult if you continue to breastfeed after six months.

Does my baby need vitamins if I keep breastfeeding after six months?
- The AAP recommends all breastfed babies get Vitamin D supplementation. Your baby gets all other vitamins from breast milk.
- Your baby should not need extra iron. The iron in breast milk is better absorbed than the iron in formula and other foods.
- You should discuss vitamin supplements with your baby’s doctor.

• The American Academy of Pediatrics (AAP) recommends that babies be exclusively breastfed for the first six months of life and then as long as mother and baby want to.
• At six months, your baby may be ready to start solid foods like cereal, vegetables and fruit. Ask your baby’s doctor to find out when you should start solid foods.
• Babies show they are ready to start solids when they:
  - Start showing interest when others are eating.
  - Start making gestures that seem to say “feed me too.”
  - Stop pushing out any food put in their mouth.
  - Are able to hold their head up and sit without support.

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To learn more, visit: www.womenshealth.gov/breastfeeding/
Congratulations on your pregnancy!

This is an exciting time and you will soon be a parent. As a parent, you will have to make many decisions including how you will feed your baby.

All moms deserve to make an informed decision regarding feeding and feel good about that decision! Now is the time to gather information and learn all you can so you can make your feeding decision for you and your baby.

Your body will go through many changes during pregnancy. You may have noticed your breasts are tender and your bra is tighter. The area around your nipples may become darker. These are all normal changes as your body prepares to make the perfect first food for your baby – breast milk.

We strongly recommend exclusive breastfeeding for the first 6 months of your baby’s life. “Exclusive” means nothing but breast milk. You may continue to breastfeed with complementary baby foods beyond 6 months if you so desire.

This booklet contains information on several topics that will help you be successful with breastfeeding. Be sure to talk to your obstetrician, midwife or pediatrician. You can also talk to someone you know who has had a positive breastfeeding experience. We want to make sure you get all the facts to make the right decision. For additional accurate and dependable information, you can contact:

- Tampa General Hospital Lactation Services ........................................... (813) 844-7613
- Pediatric Center at Healthpark ......................................................... (813) 236-5114 opt. #3
- Genesis Women’s Center at Healthpark .............................................. (813) 236-5168
- Hillsborough WIC Breastfeeding Help Line ........................................... (813) 307-8015
- Healthy Start Coalition’s Baby Café ...........................................(813) 356-1293 ext.1127 or text (813) 892-8990
- REACHUP, Inc. Central Hillsborough Healthy Start Project ....................... (813) 712-6300
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Congratulations! You are providing the best nutrition for your baby!

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Benefits for baby
• Breast milk provides the ideal nutrition for your baby. It has the perfect mix of vitamins, protein and fat to help your baby grow. It is very easy to digest which means less spit up and gassiness.
• Breast milk contains antibodies that help your baby develop a strong immune system to fight infection. Formula provides no antibodies to fight infection.
• Breastfeeding is a gift you give your baby that lasts a lifetime. Breastfeeding helps decrease the risk of diseases or illnesses such as asthma, allergies, diabetes, obesity and certain cancers. Formula provides no disease protection.
• Skin-to-skin touching, eye contact and physical closeness during breastfeeding all help your baby bond with you and feel secure.
• Breastfeeding safeguards against over feeding your baby. This means that he/she is less likely to be overweight later in life.

Benefits for mom
• Breastfeeding burns extra calories so you lose pregnancy weight more quickly.
• Breastfeeding helps your uterus go back to its pre-pregnancy size more quickly.
• Women who breastfeed have decreased rates of ovarian and breast cancer, osteoporosis and depression.

Breastfeeding saves you money
• You miss less work because your baby is not sick as often. Your baby has less sick visits to the doctor.
• Breastfeeding is free! You do not have to buy formula (average spent on formula is $1,700/year). WIC does not cover the complete cost of formula for bottle fed infants.
• Breastfeeding mothers get larger WIC food packages. When breastfeeding babies start solid food they also receive more baby food.

Breastfeeding is convenient
• No midnight runs to the store because you ran out of formula.
• No bottles and nipples to sterilize.
• No bottles to prepare and warm up in the middle of the night.
• Don't have to pack bottles when you go out with your baby.
• Breast milk is always available at just the right temperature.

What fathers and other family members can do
• Support the breastfeeding relationship by being kind and encouraging.
• Make sure mom has enough to drink and gets enough rest.
• Help around the house and with other children.
• Burp baby, change diapers, give a bath.
• Run errands; go shopping; take care of pets or prepare a meal.
• Play and cuddle with baby.

Getting a Good Latch
“Latching” is the way your baby takes your nipple and areola (the pinkish-brown flat circle around your nipple) into his/her mouth to suckle. A good latch is very important to successful breastfeeding. Without a good latch it is difficult for your baby to get enough milk.

First start with positioning baby’s nose near your nipple. Use one hand to cup your breast using a “C” hold and the other to support the baby’s head.

Step 1: Gently stroke your baby’s lips with your nipple. Be patient and wait until baby opens mouth wide like a yawn.

Step 2: Quickly bring the baby’s mouth up onto your breast, chin first. His/Her lower jaw and chin should touch your breast first. More of the top of the areola will be showing than the bottom of the areola.

Step 3: The baby’s lips should make a good seal around the breast resembling a fish with lips rolled outward and visible.

You have a good latch if:
• The chin is pressed against the breast with the head tilted back slightly. You will not see the baby’s bottom lip.
• The nose can be lightly touching the breast. It is not necessary to press down on the breast to make breathing space. The baby will pull away from the breast if they can’t breath.
• The feeding starts with little sucks that become deep and slow when the milk begins to flow. There should be at least 10-20 minutes of deep and slow sucking each feed.
• You should hear your baby swallow.

You have a poor latch if:
• You feel nipple pain while nursing. This means your baby is likely chewing on your nipple and does not have enough of the areola in his/her mouth. The fix: Unlatch (break the suction by putting your finger into the corner of the mouth) and try again.
• You hear clicking noises, which indicate your baby’s not latched.
• If you can’t get your baby to latch properly, ask for help from a breastfeeding professional.
There are many positions to breastfeed. In the beginning, you may want to find a position that works best for you and stick with it. As you get more experienced, you can try other positions. Good positioning and latch will help prevent sore nipples. Your nipples may be a little tender at first, but breastfeeding should not be painful.

Tips for good positioning:

- Try to breastfeed in a quiet environment if possible.
- Select a comfortable chair, preferably one with armrests.
- Get into a comfortable position first. Use pillows to support your back and arms. A footstool or more pillows for your feet will keep you from bending towards your baby.
- Make sure your baby’s ear, hip and shoulder are in a straight line, so that the baby does not have to turn his head to nurse.
- Try using different breastfeeding positions. This may prevent clogged milk ducts and sore nipples.
- Try thinking calm thoughts and taking deep breaths before breastfeeding. Keep a glass of water, milk or juice nearby, which will help keep you hydrated to produce more milk.

Colostrum is the first milk. Colostrum is liquid gold!

- Colostrum is stored in your breasts during pregnancy and is in your breasts when you deliver. Colostrum lasts for about 2-3 days. After 2-3 days, colostrum is replaced by thinner breast milk called “mature milk”. You want to make sure your baby gets plenty of colostrum!
- Colostrum acts like a laxative and helps your baby have his/her first stool.
- Colostrum helps your baby fight infection.
- Colostrum feedings are just the right size for your baby’s stomach. Your baby’s stomach is the size of a small marble at first. It holds about 1-2 tablespoons on day three.

Do not give your baby a bottle or pacifiers in the early days.

- This can lead to your baby having problems attaching to the breast correctly. When this happens your breasts are not emptied properly. This can cause:
  - Breast engorgement (painful swollen breasts) and plugged milk ducts.
  - Your baby to not get enough breast milk and lose too much weight.
  - You to give up on breastfeeding.
- Pacifiers or bottles can be used when breastfeeding is well established. This usually takes about four weeks.

Latch and positioning

Exclusive breastfeeding means not giving your baby any formula in the hospital after you deliver. Exclusive breastfeeding in the beginning is important for the following reasons:

- It boosts your confidence in your ability to breastfeed
- Your baby gets as much colostrum as possible
- Giving your baby a bottle may make it difficult for your baby to breastfeed correctly.
- Helps you make more milk.
- Helps keep your baby’s blood sugar levels stable.

The cherry is the size of the baby’s stomach on day one; walnut on day three and ping pong ball on day seven.

What to expect at first

- Your baby will want to nurse a lot in the beginning. This is normal. It does not mean you do not have enough milk to feed your baby. Breast milk and colostrum are easy to digest. Also remember that your baby’s stomach is very small so they need small, frequent feeds.
- Babies are born with extra fluid stores. This extra fluid is used in the first few days when their stomach is small and does not hold much fluid.
- Feed your baby when he/she is hungry, not on a schedule. Healthy babies know when to start and stop feeding so they get exactly what they need. They usually feed about 8-12 times in a 24 hour period.

Breastfeeding Positions

- The **cradle hold** is the most basic breastfeeding position. It is very easy. Place a pillow in your lap, turn baby towards your tummy and breast. The baby’s head can then be supported with the arm on the side you are breastfeeding.
- The **cross cradle hold** is ideal if your baby is small or has difficulty latching. Hold your baby across your lap, using the opposite arm as the breast he is feeding from to support your breast.
- The **football hold** is ideal if you have large breasts or have had a cesarean section and would like to avoid placing the baby on your tummy. Hold your baby under your arm and support your baby’s head while you bring him/her to your breast.
- The **side-lying position** allows you and your baby to lie on your sides during feeding. It is especially useful during nighttime feedings. This position is also great if you have had a cesarean section.

Exclusive breastfeeding in the hospital

Colostrum is stored in your breasts during pregnancy and is in your breasts when you deliver. Colostrum lasts for about 2-3 days. After 2-3 days, colostrum is replaced by thinner breast milk called “mature milk”. You want to make sure your baby gets plenty of colostrum!

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  - Breast engorgement (painful swollen breasts) and plugged milk ducts.
  - Your baby to not get enough breast milk and lose too much weight.
  - You to give up on breastfeeding.
- Pacifiers or bottles can be used when breastfeeding is well established. This usually takes about four weeks.
What is feeding “on cue”?  
• Feeding your baby “on cue” means feeding your baby whenever he/she is hungry.  
• Feeding cues are the signs your baby gives you to let you know he/she is ready to eat.  
• Some examples of “early feeding cues” are mouth movements, sticking out tongue, moving hands to mouth and rooting (head moves rapidly side to side with mouth open).  
• Let your baby nurse whenever he/she wants and as long as he/she wants.  
• Empty the breast you start with first before switching to the other breast. Start feeding on the opposite breast the next feeding.

What are the benefits of feeding “on cue”?  
• The more your baby nurses and empties your breasts, the more milk you will make.  
• It is normal for your baby to breastfeed often. Your baby’s stomach is very small at first and breastmilk is digested easily. The small amount of colostrum a mother makes in the first days is perfect for a small stomach!  
• Crying is a late sign. Feeding will be more successful if you begin when you see “early feeding cues” and before your baby starts crying.  
• Breastfeeding is for comfort as well as nutrition. Frequent feedings comfort your baby.  
• You will have less breast engorgement (painful, swollen breasts). Your baby will gain weight better and have less jaundice.

Avoid pacifiers and bottles at first
• Your baby prefers you over a pacifier or bottle. Avoid pacifiers and bottles until your baby is doing well at the breast. This usually takes about four weeks.  
• Your body does not get the signal to increase milk supply when your baby is sucking on a pacifier or bottle.  
• Pacifiers also cover up feeding cues and you may miss when your baby is most ready to eat!

Labor is a normal healthy process. Each contraction brings you closer to meeting your baby!  
• Women experience pain differently during labor and childbirth. Each labor and childbirth experience is different. It is difficult to predict what your experience will be in advance. You may find out that labor is not as bad as you thought it would be.  
• Research shows you will have a better labor experience the more confident you are in your ability to cope with labor pain. You should learn as much as you can about all your choices to increase your confidence level.  
• Discuss all your options with your obstetrician or midwife.

Women choose childbirth without medications or epidural for many reasons. Some of the benefits are:  
• Mother and baby are more alert making it easier to breastfeed the first day. More breastfeeding the first day makes breast milk come in faster.  
• Some women feel more in control. This helps many women manage their pain better.  
• Some women feel a great sense of accomplishment giving birth without medications.  
• You are more alert and have better sensation. This helps when it is time to push the baby out.  
• Your partner can be involved as you work together to manage the pain.  
• The pain management techniques you used during labor can help you manage pain and stress anytime.

Benefits of childbirth without medications or epidural
• Take a childbirth class with your labor partner so you get education and practice with breathing and relaxation exercises. It is great to have a coach to encourage you and help you during labor.  
• Stay out of bed as much as possible. Walking helps bring the baby down in the birth canal.  
• Change positions often. Try sitting up, side lying and hands and knees positions.  
• Use a birthing ball to sit on or lean over. This helps with back pain and helps you stay upright. It also helps open your pelvis for the baby to come down.  
• Take a shower or use a Jacuzzi tub if available. The motion and warmth of the water is relaxing and helps with pain.  
• Have your labor partner give you a back massage.  
• Play music and create a calm, quiet labor environment to help with relaxation.  
• It is important to remember that no matter how prepared you are, sometimes you may need medical interventions that you did not plan on. This is OK. Do not be disappointed with yourself.

To learn more, go to:  
Bradley Method: www.bradleybirth.com  
Lamaze International: www.lamaze.org  
The International Childbirth Education Association: www.icea.org
What is rooming-in?
Rooming-in is when your baby stays with you in your room throughout your hospital stay. Your baby will go to the Procedure Room for circumcision. He/she may need to go to the Procedure Room for other procedures, but most things can be done in the room.

What if I am sleepy?
- Mom’s have the same amount and quality of sleep rooming-in with their baby as when their baby is out of the room.
- Moms and babies get more rest when they are together.
- Daytime is for sleeping too. Take a nap while your baby sleeps.
- Limit your visitors. Research shows your rest is disturbed more often by visitors than by your baby.

What do I do when I want to take a shower?
- Roll the crib into the bathroom with you. Or you can let your family watch your baby while you shower.

What are the benefits of rooming-in with your baby?
- More chances to breastfeed so you have fewer breastfeeding problems and your breast milk comes in faster.
- More chances to bond with your baby. You get to know your baby better before going home.
- Babies cry less and are easier to calm down.
- Mom and baby get more rest.
- You begin to recognize when your baby is hungry so you can feed them when they are hungry, not on a schedule.
- Baby develops less jaundice and gain weight better because they breastfeed more often.

What is skin-to-skin?
- Skin-to-skin care is when your baby is placed bare-skinned onto your bare chest and covered with blankets to stay warm. Your baby will have a diaper and a hat on.

When should you start skin-to-skin?
- Ideally, skin-to-skin should start right after birth. This is called ‘early’ skin-to-skin.
- Most babies can skin-to-skin with their mothers after birth. There are some situations when this is not possible. In these situations, skin-to-skin can begin as soon as it is safe.

How long and how often should I do skin-to-skin?
- Skin-to-skin should last for at least one hour after birth AND through the first breastfeeding as long as you and your baby are both stable.
- Usually your baby will want to breastfeed within an hour of birth.
- You can skin-to-skin as often and as long as you want to promote breastfeeding and comfort your baby.

What are the benefits of skin-to-skin?
- Early skin-to-skin after birth benefits ALL newborn babies and their mothers regardless of feeding choice.
- Improves bonding between you and your baby.
- Baby feels safe and secure, is calmer and cries less.
- Helps to steady baby’s heartbeat and breathing.
- Helps keep baby warm.
- Uses less energy so blood sugar is more stable.
- Gets breastfeeding off to a good start.

How does skin-to-skin help breastfeeding?
- Babies are born with natural instincts to breastfeed. Your baby can smell colostrum and will be drawn to the breast.
- Your baby is more awake to feed.
- Your baby has more opportunity to breastfeed and will breastfeed more often. Practice makes perfect!
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Breastfeeding Positions

The cradle hold is the most basic breastfeeding position. It is very easy. Place a pillow in your lap, turn baby towards your tummy and breast. The baby’s head can then be supported with the arm on the side you are breastfeeding.

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The football hold is ideal if you have large breasts or have had a cesarean section and would like to avoid placing the baby on your tummy. Hold your baby under your arm and support your baby’s head while you bring him/her to your breast.

The side-lying position allows you and your baby to lie on your sides during feeding. It is especially useful during nighttime feedings. This position is also great if you have had a cesarean section.

Colostrum is the first milk. Colostrum lasts for about 2-3 days. After 2-3 days, colostrum is replaced by thinner breast milk called “mature milk”. You want to make sure your baby gets plenty of colostrum!

- Colostrum is stored in your breasts during pregnancy and is in your breasts when you deliver. Colostrum lasts for about 2-3 days. After 2-3 days, colostrum is replaced by thinner breast milk called “mature milk”. You want to make sure your baby gets plenty of colostrum!
- Colostrum acts like a laxative and helps your baby have his/her first stool.
- Colostrum helps your baby fight infection.
- Colostrum feedings are just the right size for your baby’s stomach. Your baby’s stomach is the size of a small marble at first. It holds about 1-2 tablespoons on day three.

What to expect at first

- Your baby will want to nurse a lot in the beginning. This is normal. It does not mean you do not have enough milk to feed your baby. Breast milk and colostrum are easy to digest. Also remember that your baby’s stomach is very small so they need small, frequent feeds.
- Babies are born with extra fluid stores. This extra fluid is used in the first few days when their stomach is small and does not hold much fluid.
- Feed your baby when he/she is hungry, not on a schedule. Healthy babies know when to start and stop feeding so they get exactly what they need. They usually feed about 8-12 times in a 24 hour period.

Do not give your baby a bottle or pacifiers in the early days.

- This can lead to your baby having problems attaching to the breast correctly. When this happens your breasts are not emptied properly. This can cause:
  - Breast engorgement (painful swollen breasts) and plugged milk ducts.
  - Your baby to not get enough breast milk and lose too much weight.
  - You to give up on breastfeeding.
- Pacifiers or bottles can be used when breastfeeding is well established. This usually takes about four weeks.

There are many positions to breastfeed. In the beginning, you may want to find a position that works best for you and stick with it. As you get more experienced, you can try other positions.

Good positioning and latch will help prevent sore nipples. Your nipples may be a little tender at first, but breastfeeding should not be painful.

Tips for good positioning:

- Try to breastfeed in a quiet environment if possible. Select a comfortable chair, preferably one with armrests.
- Get into a comfortable position first. Use pillows to support your back and arms. A footstool or more pillows for your feet will keep you from bending towards your baby.
- Make sure your baby’s ear, hip and shoulder are in a straight line, so that the baby does not have to turn his head to nurse.
- Try to use different breastfeeding positions. This may prevent clogged milk ducts and sore nipples.
- Try thinking calm thoughts and taking deep breaths before breastfeeding. Keep a glass of water, milk or juice nearby, which will help keep you hydrated to produce more milk.

Breastfeeding Positions

The cradle hold is the most basic breastfeeding position. It is very easy. Place a pillow in your lap, turn baby towards your tummy and breast. The baby’s head can then be supported with the arm on the side you are breastfeeding.

The cross cradle hold is ideal if your baby is small or has difficulty latching. Hold your baby across your lap, using the opposite arm as the breast he is feeding from to support your breast.

The football hold is ideal if you have large breasts or have had a cesarean section and would like to avoid placing the baby on your tummy. Hold your baby under your arm and support your baby’s head while you bring him/her to your breast.

The side-lying position allows you and your baby to lie on your sides during feeding. It is especially useful during nighttime feedings. This position is also great if you have had a cesarean section.

Colostrum is the first milk. Colostrum is liquid gold!

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Benefits of breastfeeding

Benefits for baby
- Breast milk provides the ideal nutrition for your baby. It has the perfect mix of vitamins, protein and fat to help your baby grow. It is very easy to digest which means less spit up and gassiness.
- Breast milk contains antibodies that help your baby develop a strong immune system to fight infection. Formula provides no antibodies to fight infection.
- Breastfeeding is a gift you give your baby that lasts a lifetime. Breastfeeding helps decrease the risk of diseases or illnesses such as asthma, allergies, diabetes, obesity and certain cancers. Formula provides no disease protection.
- Skin-to-skin touching, eye contact and physical closeness during breastfeeding all help your baby bond with you and feel secure.
- Breastfeeding safeguards against over feeding your baby. This means that he/she is less likely to be overweight later in life.

Benefits for mom
- Breastfeeding burns extra calories so you lose pregnancy weight more quickly.
- Breastfeeding helps your uterus go back to its pre-pregnancy size more quickly.
- Women who breastfeed have decreased rates of ovarian and breast cancer, osteoporosis and depression.

Breastfeeding saves you money
- You miss less work because your baby is not sick as often. Your baby has less sick visits to the doctor.
- Breastfeeding is free! You do not have to buy formula (average spent on formula is $1,700/year). WIC does not cover the complete cost of formula for bottle fed infants.
- Breastfeeding mothers get larger WIC food packages. When breastfeeding babies start solid food they also receive more baby food.

Breastfeeding is convenient
- No midnight runs to the store because you ran out of formula.
- No bottles and nipples to sterilize.
- No bottles to prepare and warm up in the middle of the night.
- Don’t have to pack bottles when you go out with your baby.
- Breast milk is always available at just the right temperature.

What fathers and other family members can do
- Support the breastfeeding relationship by being kind and encouraging.
- Make sure mom has enough to drink and gets enough rest.
- Help around the house and with other children.
- Burp baby, change diapers, give a bath.
- Run errands; go shopping; take care of pets or prepare a meal.
- Play and cuddle with baby.

Getting a Good Latch

“Latching” is the way your baby takes your nipple and areola (the pinkish-brown flat circle around your nipple) into his/her mouth to suckle. A good latch is very important to successful breastfeeding. Without a good latch it is difficult for your baby to get enough milk.

First start with positioning baby’s nose near your nipple. Use one hand to cup your breast using a “C” hold and the other to support the baby’s head.

Step 1: Gently stroke your baby’s lips with your nipple. Be patient and wait until baby opens mouth wide like a yawn.

Step 2: Quickly bring the baby’s mouth up onto your breast, chin first. His/Her lower jaw and chin should touch your breast first. More of the top of the areola will be showing than the bottom of the areola.

Step 3: The baby’s lips should make a good seal around the breast resembling a fish with lips rolled outward and visible.

You have a good latch if:
- The chin is pressed against the breast with the head tilted back slightly. You will not see the baby’s bottom lip.
- The nose can be lightly touching the breast. It is not necessary to press down on the breast to make breathing space. The baby will pull away from the breast if they can’t breath.
- The feeding starts with little sucks that become deep and slow when the milk begins to flow. There should be at least 10-20 minutes of deep and slow sucking each feed.
- You should hear your baby swallow.

You have a poor latch if:
- You feel nipple pain while nursing. This means your baby is likely chewing on your nipple and does not have enough of the areola in his/her mouth. The fix: Unlatch (break the suction by putting your finger into the corner of the mouth) and try again.
- You hear clicking noises, which indicate your baby’s not latched.
- If you can’t get your baby to latch properly, ask for help from a breastfeeding professional.
Congratulations on your pregnancy!

This is an exciting time and you will soon be a parent. As a parent, you will have to make many decisions including how you will feed your baby.

All moms deserve to make an informed decision regarding feeding and feel good about that decision! Now is the time to gather information and learn all you can so you can make your feeding decision for you and your baby.

Your body will go through many changes during pregnancy. You may have noticed your breasts are tender and your bra is tighter. The area around your nipples may become darker. These are all normal changes as your body prepares to make the perfect first food for your baby – breast milk.

We strongly recommend exclusive breastfeeding for the first 6 months of your baby’s life. “Exclusive” means nothing but breast milk. You may continue to breastfeed with complementary baby foods beyond 6 months if you so desire.

This booklet contains information on several topics that will help you be successful with breastfeeding. Be sure to talk to your obstetrician, midwife or pediatrician. You can also talk to someone you know who has had a positive breastfeeding experience. We want to make sure you get all the facts to make the right decision. For additional accurate and dependable information, you can contact:

- Tampa General Hospital Lactation Services ............................ (813) 844-7613
- Pediatric Center at Healthpark ................................. (813) 236-5114 opt. #3
- Genesis Women’s Center at Healthpark ................................. (813) 236-5168
- Hillsborough WIC Breastfeeding Help Line ......................... (813) 307-8015
- Healthy Start Coalition’s Baby Café ............................. (813) 356-1293 ext.1127 or text (813) 892-8990
- REACHUP, Inc. Central Hillsborough Healthy Start Project ............................. (813) 712-6300

Did you know?
- Your baby only needs breast milk for the first six months of life. This is called exclusive breastfeeding. He/she does not need cereal, juice, water or any other foods. Breast milk is complete nutrition for your baby during the first six months. The only vitamin your baby should need while you are breastfeeding is Vitamin D.
- The American Academy of Pediatrics (AAP) recommends that healthy term infants should be exclusively breastfed until six months and then as long as mother and baby want.

Why delay formula or other food until after six months?
- The more breast milk your baby gets, the more health benefits he/she gets from your breast milk.
- Gives baby greater protection from illness.
- Gives baby’s digestive system time to mature.
- Decreases the risk of food allergies.
- Helps to protect baby from future obesity.
- Helps maintain your milk supply. Giving your baby formula or other food may cause your baby not to want as much breast milk. Less breastfeeding means you will make less breast milk.
- Helps to space out babies, however you can still get pregnant while breastfeeding. You should discuss birth control choices that are okay to use while breastfeeding with your health care provider.
- Makes starting solid food easier.
- WIC provides a larger nutrition package for mothers and babies who exclusively breastfeed.

How to continue breastfeeding after returning to work
- Get a breast pump to express milk while you are away from your baby to keep your milk supply.

WIC programs offer free breast pump loaners for exclusive breastfeeding mothers who are working
- Insurance companies are required by federal law to provide a breast pump (go to http://www.usbreastfeeding.org).
- Employers are required by federal law to provide a space and time for you to pump. Talk with your employer and plan for where you can pump while at work and discuss the breaks you will need.
- Get help for planning your return to work. Call your local lactation support.
  - Tampa General Hospital (TGH) Lactation Support Help Line ................................. (813) 844-7613
  - Pediatric Center at Healthpark ................................. (813) 236-5114 opt. #3
  - Genesis Women’s Center at Healthpark ................................. (813) 236-5168
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Congratulations! You are providing the best nutrition for your baby!

To learn more, visit: www.womenshealth.gov/breastfeeding/
Breastfeeding after six months

Should I still breastfeed after my baby starts eating other food?
- You can still continue breastfeeding when you start feeding other food.
- It is up to you and your baby to decide when to stop breastfeeding.
- Breast milk is still a very important food after six months. Even after six months, it still contains the nutrition babies need and helps fight infection.
- Some babies decrease the number of breastfeeds as they begin to be able to digest solid food.
- Babies weaned from breast milk prior to their first birthday need to be given infant formula until their first birthday.
- You can breastfeed during teething. The only effect most mothers notice is a small groove on the breasts where the teeth press during nursing.
- Weaning off the breast is no more difficult if you continue to breastfeed after six months.

Does my baby need vitamins if I keep breastfeeding after six months?
- The AAP recommends all breastfed babies get Vitamin D supplementation. Your baby gets all other vitamins from breast milk.
- Your baby should not need extra iron. The iron in breast milk is better absorbed than the iron in formula and other foods.
- You should discuss vitamin supplements with your baby’s doctor.

• The American Academy of Pediatrics (AAP) recommends that babies be exclusively breastfed for the first six months of life and then as long as mother and baby want to.

• At six months, your baby may be ready to start solid foods like cereal, vegetables and fruit. Ask your baby’s doctor to find out when you should start solid foods.

• Babies show they are ready to start solids when they:
  - Start showing interest when others are eating.
  - Start making gestures that seem to say “feed me too.”
  - Stop pushing out any food put in their mouth.
  - Are able to hold their head up and sit without support.

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To learn more, visit: www.womenshealth.gov/breastfeeding/
This booklet was developed and endorsed by:

Healthy Start Coalition of Hillsborough County
Hillsborough County WIC & Nutrition Services
Hillsborough County Breastfeeding Taskforce
Tampa General Hospital
Tampa General Hospital Pediatric Center at Healthpark
and Genesis Women’s Center at Healthpark
University of South Florida Department of Pediatrics
& OB/GYN
REACHUP, Inc.

Prenatal
Breastfeeding
Education