

Bottle Feeding your Baby

Breastfeeding may not be the preferred choice of feeding for every mother and baby. Your decision to bottle feed your baby will be respected and supported.

During your stay, you will have access to pre prepared formula, feeding bottles and teats.

- All bottle-feeding equipment during your stay in hospital is one use only.
- Pre prepared formula once opened must be discarded after 1 hour.
- Staff will guide you on the amount your baby will be feeding when in hospital.

How to prepare a feed during your hospital stay

1. Pour required amount of pre-prepared infant formula into sterilised provided infant feeding bottle.
2. Replace lid and teat onto bottle.
3. The pre-prepared infant formula is ready to use at room temperature, you can now feed your baby.
4. Dispose of all equipment.

Normal DAILY REQUIRMENTS FOR FEEDING (first week only)

The maternity staff will help you calculate the correct amount

- Day 1 - 30 mls / kg/ day
- Day 2 - 60 mls / kg/ day
- Day 3 - 90 mls / kg/ day
- Day 4 - 120 mls / kg/ day
- Day 5+ - 150 mls / kg/ day

The following information will assist you in learning the skills required to bottle feed your baby once you are home.

WHAT FORMULA TO CHOOSE

When choosing your formula, consider

- Availability of formula
- The cost of the formula, as you will be purchasing this for twelve months.

WHAT TO PURCHASE:

- Tin of preferred Formula.
- Six large bottles, teats (newborn) and caps.
- A bottlebrush.
- Sterilisation equipment - The choices include:
 - Antibacterial solution unit
 - Steam-Electric/ Microwave.
 - Boiling method.
- Discuss each of these with a member of staff and decide which will best suit you and your baby's needs.

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- Plastic Knife.
- Tongs.
- Equipment for transporting formula and bottles.

METHODS OF STERILISATION AT HOME

Before commencing the sterilisation process, ensure you:

1. Wash hands.
2. Separate components of the bottle and rinse well with cold water immediately after use.
3. Using a bottlebrush, wash utensils with warm water and detergent. Squeeze soapy water through teat holes. NEVER use salt to clean teats.
4. Rinse all items well again in cold water.

Items are now ready for sterilisation and the following three methods are available to you:

Antibacterial Solution

Antibacterial solution is available from chemists and supermarkets:

1. Fill a sterile container large enough to hold all feeding utensils with the required amount of antibacterial solution and water. Instructions on the bottle will tell you how much solution and water is required.
2. Completely immerse washed equipment in solution, squeeze made up solution through teat holes. Eliminate all air bubbles. Cover container, ensure all teats and bottles are submerged.
3. Equipment will be sterile in a minimum of 15 minutes after placing items in solution.
4. NEVER put metal articles in antibacterial solution.
5. Always wash hands before removing equipment. Drain equipment NEVER RINSE equipment.
6. Every 24 hours wash container holding feeding equipment with warm water and detergent and rinse well with cold water. Renew solution as directed.

Steam Method

There are electric and microwave steamers available. These steamers are available from most chemists or baby shop outlets.

1. Place washed feeding equipment in the steamer, and steam according to the manufacturer's recommendations.
2. Once items have been steamed, bottles, teats and caps may be placed into the fridge and remain sterile for 24 hours.
3. Store teats and bottles in a closed container

Boiling Method

1. Place all washed items to be sterilised in a large saucepan of cold water. Ensure all items are covered; place a lid on the saucepan.
2. Bring water to boil and boil for FIVE minutes. Turn off heat, do not allow to boil dry. Remove items with tongs.
3. Store bottles and teats in a covered container. Items will remain sterile for 24 hours.

PREPARING A FEED USING POWDERED INFANT FORMULA (PIF)

It is best to make PIF fresh for each feed and to consume immediately, as reconstituted PIF provides ideal conditions for the growth of harmful bacteria. The steps below outline the safest way to prepare individual feeds of PIF in bottles or in feeding cups for immediate consumption.

Read the instructions on the formula tin. These instructions will tell you how much water and powder to use

Microwaves should never be used in the preparation of PIF as uneven heating may result in 'hot spots' that can scald the infant's mouth.

1. Clean and disinfect a surface on which to prepare the feed.
2. Wash hands with soap and water, and dry using a clean cloth or a single-use napkin.
- 3a. In hospital- Use the Boiled water 'Zippy' hot water machine to supply boiled water (do not use distilled water as not treated under high temperatures)
- 3b. At home- Boil a sufficient volume of safe water. If using an automatic kettle, wait until the kettle switches off; otherwise make sure that the water comes to a rolling boil. Note: bottled water is not sterile and must be boiled before use.
4. Taking care to avoid scalds, pour the appropriate amount of boiled water into a sterile bottle and allow cooling to a safe temperature-lukewarm or around room temperature. (To achieve this temperature, the water should be left for no more than 30 minutes after boiling.)
5. To the water, add the exact amount of formula as instructed on the label of tin. Adding more or less powder than instructed could make infants ill.
- 5a. Using a bottle: assemble the cleaned and sterilized parts of the bottle according to the manufacturer's instructions. Shake or swirl gently, mixing the contents thoroughly, taking care to avoid scalds.
- 5b. Using a feeding cup: mix thoroughly by stirring with a cleaned and sterilized spoon, taking care to avoid scalds.
6. Immediately after preparation, quickly cool feeds to feeding temperature by holding the bottle or feeding cup under running tap water, or by placing in a container of cold or iced water. Ensure that the level of the cooling water is below the top of the feeding cup or the lid of the bottle.
7. Dry the outside of the feeding cup or bottle with a clean or disposable cloth.
8. Because very hot water has been used to prepare the feed, it is essential that the feeding temperature be checked before feeding to avoid scalding the infant's mouth. If necessary, continue cooling as outlined in step 6.
9. Discard any feed that has not been consumed within one hour.

Preparing feeds in advance for later use

It is best to make PIF fresh for each feed and to consume immediately, as reconstituted PIF provides ideal conditions for the growth of harmful bacteria. For practical reasons, however, feeds may need

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to be prepared in advance. The steps below outline the safest way to prepare and store feeds for later use. If refrigeration is not available, feeds should be prepared fresh and consumed immediately rather than prepared in advance for later use.

1. Follow steps 1 to 7 of Steps for Preparing Feeding Bottles. If using feeding cups, a batch of formula should be prepared in a clean, sterile jar that is no larger than 1 litre, with a lid. The prepared PIF can be refrigerated and dispensed into cups as needed.
2. Place cooled feeds in a refrigerator. The temperature of the refrigerator should be no higher than 5 °C. In hospital, please ask a staff member to store it in the dedicated locked fridge in the well-baby nursery, ensure it is correctly labelled with your details or infants ID.
3. Feeds can be stored in the refrigerator for up to 24 hours.

Re-warming stored feeds

1. Remove stored feed from the refrigerator just before it is needed.
2. Warm to room temperature. To ensure that the feed heats evenly, periodically shake the covered jar or container. There is a bottle warmer available if warming up in hospital.
3. Microwave ovens should never be used to re-warm a feed as uneven heating may result in 'hot spots' that can scald the infant's mouth.
4. Check feeding temperature to avoid scalding the infant's mouth.
5. Discard any re-warmed feed that has not been consumed within one hour.

Transporting feeds

Because of the potential for growth of harmful bacteria during transport, feeds should first be cooled to no more than 5 °C in a refrigerator and then transported.

1. Prepare the feed and place in the refrigerator, as outlined in “Steps for Preparing Feeding Bottles”
2. Ensure feed is cold before transporting.
3. Do not remove feed from the refrigerator until immediately before transporting.
4. Transport feed in a cool bag with ice packs.
5. Feeds transported in a cool bag should be used within two hours as cool bags do not always keep foods adequately chilled.
6. Re-warm at the destination, as in Steps for Preparing Feeding Bottles.
7. If you reach the destination within two hours, feeds transported in a cool bag can be placed in a refrigerator and held for up to 24 hours from the time of preparation.
8. Alternatively, if you are going out for the day, individual portions of PIF can be transported in washed and sterilized containers. At the destination, hot water no less than 70 °C can be used to prepare the feed, using washed and sterilized feeding and preparation equipment.

When using liquid formulas scald the top of the tin with boiling water prior to opening it, measure out directed quantity and store in the fridge with the top covered with plastic wrap.

FEEDING YOUR BABY

Feeding your baby can be an enjoyable experience for both parents. Love, warmth and safety are conveyed during feeding by the way you hold your baby. The ideal way is to hold baby close against your chest so he/she can hear your heartbeat, feel you breathing and see your face. These sensations are very important for your baby's development. The following link is also a useful resource and technique for paced bottle feeding your baby.

<https://www.youtube.com/watch?v=UH4T70OSzGs>

Encourage eye to eye contact with the baby during the feed. Research shows visual stimulation is enhanced when the baby's feeding position is alternated (i.e. swapping sides for bottle feeds).

Make sure baby is comfortable, i.e. clean nappy.

Assume a comfortable position and a relaxed atmosphere for the feed.

Hold the bottle so that the teat is full of milk to prevent your baby swallowing air. Allow 20-30 minutes for your baby to feed.

Never leave your baby unattended or propped up in a bassinet or cot whilst feeding with bottle.

Pause halfway through the bottle to allow your baby to bring up any wind. Some babies may need regular intervals during a feed to bring up their wind.

After feeds wash all feeding utensils, rinse with cold water and using a bottlebrush with warm soapy water pay particular attention to teats and lips of bottles, squeeze water through teats, rinse well and sterilise all feeding equipment.

SUPPRESSION OF LACTATION

There are some instances when breast milk production is to be suppressed. This could be before lactation is established or after any length of successful breastfeeding. If lactation has been established, weaning should be done gradually, by reducing the frequency of feeds over several days or weeks, usually by omitting one feed during a day per week.

This is slow gradual weaning by expressing for comfort, grading down the volume of breast milk expressed, and the number of times of expressing or feeding.

Thus, breast stimulation is gradually reduced, and milk production will gradually drop. By suppressing lactation in this manner, there is minimal discomfort in the breast and no damage to breast tissue; hormone production declines gradually, antibody levels rise and protect the breast tissue.

<https://raisingchildren.net.au/newborns/breastfeeding-bottle-feeding/bottle-feeding/formula-making-storing-transporting> Breast feeding should not stop abruptly as this will lead to engorgement, mastitis or even breast abscess, this is particularly relevant if you have nipple trauma or mastitis.

If you do not or cannot put the baby to the breast you should express your breast milk. You can gradually express less frequently and remove less milk. The comfort and state of your breasts will be your guide. If you try to cut down too quickly, the breasts will become lumpy, painful and engorged.

If Lactation has not been established, avoiding breast stimulation as much as possible is the only treatment or advice needed to suppress lactation. Even when there is breast stimulation, milk will continue to be produced until the back pressure in the alveoli, and ducts inhibit the production of prolactin. This may last from a few days to a week or so.

SYMPTOMATIC RELIEF

- Breasts should be handled gently as they will bruise easily when engorged.
- Ice packs or cabbage leaves (washed and stored in refrigerator) will decrease oedema (swelling).
- Analgesia (Panadol).
- Breast support-firm bra or crop top

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- Restricting fluids does not affect or reduce milk production, only causing thirst and concentrated urine.
- Small amounts of milk can be expressed for comfort and will not prolong lactation.
- Your Obstetrician may prescribe you Dostinex to suppress your lactation.

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References

Information adapted from Infant Feeding Handout (Milton) "How TO STAY SANE IN THE FIRST YEAR OF LIFE". (Tresillian) and World Health Organisation "How to prepare formula for bottle feeding at home" (2012)

NHMRC (2012) Eat for Health. Infant Feeding Guidelines Information for Workers.

<https://raisingchildren.net.au/newborns/breastfeeding-bottle-feeding/bottle-feeding/formula-making-storing-transportin>



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