FREQUENTLY ASKED QUESTIONS ABOUT BREASTFEEDING

MANY MOMS HAVE QUESTIONS ABOUT BREASTFEEDING. HERE ARE SOME QUESTIONS THAT MARYLAND WIC STAFF ARE OFTEN ASKED.

1. I’ve heard breastfeeding hurts. Is that true?
2. I think I would be embarrassed to breastfeed in public. What can I do?
3. Why is exclusive nursing important in the first month?
4. How do I know I am making enough milk?
5. My breasts are so much softer now than they were the first week. Am I losing my milk?
6. It seems like my baby nurses all the time. Why does my baby nurse so often?
7. When my baby is fussing, does it mean he/she is hungry?
8. How can I increase my milk supply?
9. Can I breastfeed if I am sick?
10. I hear I need a breast pump. Is it necessary?
11. I have to go back to work or school. Can I continue to breastfeed?
12. How long should I continue to breastfeed?
13. My baby was diagnosed with Thrush...
14. Will my baby be spoiled if I breastfeed?
15. My mom didn’t make milk. Will I have problems?
16. Can I breastfeed twins?
17. Can I nurse while I am pregnant?
18. I want to do both — breastfeed and use formula.
19. When do I use the formula the hospital gave me?
20. I am going to a party. Can I have a drink (alcohol)?
21. If I smoke cigarettes, can I breastfeed?
22. I was told to put my baby skin-to-skin. What is that?
23. My baby is feeding all the time. Am I making enough milk?
24. I’m going to pump my breast milk and put it in a bottle rather than put the baby to my breast.
25. Can I breastfeed and take birth control?
26. What is a growth spurt?
27. My doctor says my baby isn’t gaining enough weight...
28. Who is a good person to talk to about breastfeeding?
1. I’ve heard breastfeeding hurts. Is that true?

Breastfeeding should not hurt if your baby is latched and positioned correctly. Some women have a small amount of discomfort at the very beginning of breastfeeding during the early weeks, but this goes away within the first minute. If it does not or if you feel pain, call your peer counselor or breastfeeding specialist.

2. I think I would be embarrassed to breastfeed in public. What can I do?

Many mothers have this concern. Ask your peer counselor or WIC staff to share tips and show you what has worked for other moms.

3. Why is exclusive nursing important in the first month?

The first month is an important time for you and your baby to learn to breastfeed. Exclusive breastfeeding in the first month helps you make the most milk. You and your baby need to work on just the skills of breastfeeding and learn them well before trying a feeding method that uses different skills. Ask your peer counselor or WIC staff about other reasons it is important.

4. How do I know I am making enough milk?

Watch your baby. There are simple signs to tell if your baby is getting enough, including the number of wet and dirty diapers, amount of weight gain and how often the baby is feeding. Your peer counselor or WIC staff can explain in more detail.

5. My breasts are so much softer now than they were the first week. Am I losing my milk?

No. This is normal. A soft breast does not mean an empty breast. Your body has set the amount of milk you make to what your baby needs at this time. You make most of the milk for your baby while you are nursing, so your breasts often won’t feel full. If you have concerns, call your peer counselor or WIC staff.

6. It seems like my baby nurses all the time. Why does my baby nurse so often?

It’s normal for babies to nurse frequently. Babies’ tummies are small, about the size of a walnut shell, so they can only take a small amount at once. Most newborns nurse 10 to 12 times or more in 24 hours. Babies may nurse more often during growth spurts. Ask your peer counselor or WIC staff for more information about feeding your baby.
7. When my baby is fussing, does it mean he/she is hungry?

Babies fuss for many reasons. They may be too warm or cold, have a dirty diaper, be tired, want to be held, be hungry or too full. This is one way babies let us know what they need. Your peer counselor or WIC staff can help you figure out what your baby is trying to tell you.

8. How can I increase my milk supply?

The more you nurse, the more milk you will make, so try nursing more often. There are also other reasons that cause mothers to make less milk. If you are concerned about your milk supply, talk to your peer counselor or WIC breastfeeding specialist.

9. Can I breastfeed if I am sick?

Yes, you can breastfeed your baby when you are sick. In fact, breastfeeding will protect your baby from getting sick, because your breast milk has antibodies that help your baby fight the illness. Contact your peer counselor or WIC staff if you have more questions or concerns.

10. I hear I need a breast pump. Is it necessary?

Feeding at the breast is best for you and your baby. Breast pumps are tools that are useful in some situations. Many moms never need one. Call your peer counselor or WIC breastfeeding specialist for more information.

11. I have to go back to work or school. Can I continue to breastfeed?

Yes, you can! Many moms continue to exclusively breastfeed their babies when they return to work or school. Your peer counselor or WIC staff can help you develop a plan that works with your own situation. If you need a breast pump, WIC can help.

12. How long should I continue to breastfeed?

The American Academy of Pediatrics recommends that mothers breastfeed at least one year or more. The longer you breastfeed, the more benefits both of you receive. If you have questions, ask your peer counselor or WIC staff.

13. My baby was diagnosed with Thrush...

Thrush is a yeast infection that both breastfed and non-breastfed babies may get. When a baby is breastfed, it is commonly passed between baby and mother.
Thrush is treated with medicine. It is important that both mother and baby be treated, even if one is not showing symptoms. The medicines prescribed for Thrush are safe to take while breastfeeding. Contact our WIC breastfeeding specialist if you have any questions.

14. Will my baby be spoiled if I breastfeed?

The act of feeding a baby does not spoil that baby. Holding babies close and providing for their needs gives them a sense of safety and security. Studies show that breastfed babies become toddlers who are more likely to separate from their mothers. Ask your peer counselor or WIC staff about the parts of breastfeeding that concern you.

15. My mom didn’t make milk. Will I have problems?

Many people have this concern. Your ability to make milk is not inherited. WIC will give you information, support, and help with anything you need to know. Reach out to WIC to speak with a peer counselor or breastfeeding staff to help you meet your breastfeeding goals.

16. Can I breastfeed twins?

Yes! Many women have done so. Since you have two breasts, you can save time by learning to breastfeed both babies at the same time. Call your breastfeeding peer counselor or WIC staff to learn more.

17. Can I nurse while I am pregnant?

Yes. It is safe to nurse when you are pregnant. If you are at risk for premature labor or if you are pregnant with more than one baby, your doctor may suggest you stop breastfeeding around your third trimester. Nipple stimulation can cause premature labor at that time. Call your peer counselor or WIC staff for more information.

18. I want to do both—breastfeed and use formula.

WIC encourages moms to exclusively breastfeed, at least during the first month. You and your baby are both learning how to breastfeed. By exclusively breastfeeding during these early weeks, you allow yourself and your baby to focus on and master the skills of breastfeeding. These skills are different when feeding from a bottle. Also, each time your baby breastfeeds, your body makes more milk. Giving formula instead of breast milk sends a message to your body to make less milk. It is important not to do this during the first month, when the goal is to build up your milk supply to the amount that your baby needs.
After the first month when breast milk volume has been set and both you and your baby have learned how to breastfeed well, your baby can more easily learn to switch between taking feedings from both breast and bottle. Consider pumping and putting your breast milk in the bottle. Ask your peer counselor or WIC staff for more information or about how you can get a breast pump.

19. **When do I use the formula the hospital gave me?**

Just because free formula was given to you, doesn’t mean that you have to use it. WIC suggests that you exclusively breastfeed, especially in the first few weeks. Formula sent to you and provided from the hospital is meant to advertise that formula. Giving it to your baby actually interferes with learning to breastfeed. Talk to your peer counselor or WIC staff if you have more questions.

20. **I am going to a party. Can I have a drink (alcohol)?**

Alcohol (beer, wine, liquors) passes easily into your breast milk. You can have a small amount of alcohol on a special occasion. Call a WIC breastfeeding specialist to find out how to do so without affecting your baby.

21. **If I smoke cigarettes, can I breastfeed?**

Yes. WIC recommends that you cut down on smoking as much as possible. You are encouraged to breastfeed even if you are not able to stop smoking. Did you know that breastfed babies of smokers are healthier than formula fed babies of smokers? Plan smoking times when you are not feeding your baby and, if possible, when not in the same room as your baby. Many moms who smoke do so outside, so the smell does not linger in the house, which can affect your baby. Ask your peer counselor or WIC staff for more information.

22. **I was told to put my baby skin-to-skin. What is that?**

Skin–to-skin is a way to put mom and baby in touch with each other. It helps soothe your baby and keep him/her warm, while helping mom bring in her mature milk. Skin-to-skin is easy! Simply undress baby down to a clean, dry diaper and place him/her upright, facing mom, in the center of mom’s bare chest. Put a blanket over baby’s back to keep both baby and mom comfortable. Moms may hold babies skin-to-skin for 20 to 30 minutes several times a day. Dads, grandparents, and others can also hold baby skin-to-skin, if they want to, although their doing so does not bring in milk supply. Ask your peer counselor or WIC staff to show you how to place your baby skin-to-skin.
23. **My baby is feeding all the time. Am I making enough milk?**

Many mothers feel this way. The baby’s tummy is about the size of his/her fist, so we only expect the baby to eat a small amount at each feeding. Breast milk is well digested, so your baby is ready for more quite soon—usually in 1½ to 3 hours. It is typical for breastfed babies to feed 8 to 12 times during 24 hours. If your baby is feeding more often, this may also be quite normal. Babies go through growth spurts—periods when they need more. They feed more often during these times (usually every 1 to 2 hours) to build up their mother’s milk supply to meet their growth needs. Within two days, they reset the milk supply to the level needed and go back to the feeding pattern that they had been doing before. Speak with a peer counselor or WIC staff if you have more questions.

24. **I’m going to pump my breast milk and put it in a bottle rather than put the baby to my breast.**

It’s great you plan to feed your baby your breast milk! WIC encourages moms to nurse their babies. Putting babies to breast not only provides the food they need but also nurtures the baby while doing so. Feeding your milk only from a bottle will supply your baby with the perfect food and benefits it contains, yet you and your baby miss out on the extras that nursing assures. Babies suckling on their mothers’ breasts set the needed milk supply level better than any breast pump. Babies’ skin touching mothers’ skin helps mothers release the breast milk better than any breast pump. Pumping milk to put in a bottle and later feed to the baby takes twice as much time (time for pumping, then time for feeding) as putting a baby to breast to get milk. It also adds work in preparing bottles, warming the milk, cleaning the bottles, and cleaning the breast pump. Talk with your peer counselor or WIC staff about any concerns you have.

25. **Can I breastfeed and take birth control?**

Yes. It is great that you’re thinking about this. As you discuss with your doctor the choices that you have, keep in mind that some birth control methods may affect breastfeeding by lowering your milk supply. It is best to use a barrier method rather than pills, as these do not affect breastfeeding at all. If you’d rather use a medication, ask your doctor to recommend a “progestin only” option. This contains only one hormone rather than two, and will not affect your milk supply as much. It is not recommended to take a birth control pill that contains both progestin and estrogen, as these hormones together have been shown to lower mothers’ ability to make the amount of milk needed to feed their babies. Wait until your 6 week check-up to get your Depo-Provera (Depo) shot if Depo is your choice so that it will not interfere with building up your milk supply during the first month. Contact your WIC breastfeeding specialist for more information.
26. What is a growth spurt?

All babies go through growth spurts—periods when they want to nurse more often. They feed more often during these times (usually every 1 to 2 hours) to build up their mothers’ milk supply to meet their growth needs. Within two days, they reset the milk supply to the level needed and return to the feeding pattern that they had before. Speak with a WIC peer counselor or WIC staff if you have more questions.

27. My doctor says my baby isn’t gaining enough weight...

Breastfed babies’ growth slows down around four months of age. If your baby’s weight is plotted on a growth chart, one would expect your baby to fall to a lesser growth curve. This is normal. Ask your doctor if he is using the World Health Organization (WHO) growth charts. These charts were developed based on the growth of breastfed babies. If your doctor is using a different growth chart, your baby is being compared to many formula fed babies and, as a result, may look like he is has slow weight gain when he is growing just fine. Call your WIC breastfeeding specialist to find out where your baby is on the WHO growth charts.

28. Who is a good person to talk to about breastfeeding?

It is always best to talk to someone who had a good experience with breastfeeding. You may have a friend or family member who you can rely on. Lactation consultants are breastfeeding experts. You might find them at your doctor’s office or at the hospital where you deliver. They can provide good information to help you succeed with breastfeeding. Also, turn to WIC peer counselors—moms, like yourself—who enjoyed breastfeeding, were able to succeed with it, and want to share their enthusiasm with you! They can even tell you what they did when things didn’t seem to go right. They have learned a lot about breastfeeding since joining WIC and can even let you know what to expect as your baby grows.

PICK UP THE PHONE AND CALL A WIC BREASTFEEDING PEER COUNSELOR TODAY!