



Breastfeeding after cesarean birth is a joyful way for you and baby to get to know each other. It can also help heal feelings of disappointment if birth did not go as planned. Breastfeeding can give you the satisfaction of knowing that you are giving your newborn the very best—something no one else can do—despite the fact that you are recovering from major surgery.

Whether you give birth vaginally or by cesarean, family, friends, or a La Leche League Leader can be of great assistance and support when you are beginning the breastfeeding experience.

## **Choosing a Hospital**

Choose a health care facility with flexible policies on breastfeeding. Any restrictions on breastfeeding will have a greater effect on you if you have a cesarean birth because the hospital stay is usually longer after surgery.

Ideally, your baby will begin breastfeeding within the first hour after birth. Speak to your doctor about keeping baby with you until the first nursing. Often a family member can hold baby skin to skin until baby shows interest in breastfeeding. Then a family member or nurse can assist baby to your breast. This is the time that babies generally show the most interest in breastfeeding. Sometimes the doctor will need to write an order for this if it's not the usual practice in the hospital where you deliver.

You can also speak to the nurses when you come in before your birth and ask them to help you achieve your goal of early breast-

feeding. Ask them to postpone the first bath until you have had a chance to see your baby and begin breastfeeding. If all is going well with both you and your baby, there is no reason that the bath, measurements, and physical assessments have to be done before your first nursing.

## **Rooming-In**

Ask your doctor if 24-hour rooming-in is available. Getting started with breastfeeding goes more easily when mother and baby can nurse unrestrictedly while rooming-in:

- Your milk will increase sooner, baby will be less likely to lose weight, baby will be less likely to be prescribed supplements, and you can ensure that baby isn't given bottles in the nursery to interfere with your efforts to interest him in breastfeeding.
- Many moms find that unrestricted nursing on baby's cue helps to prevent nipple soreness and engorgement in the early days.

Often a baby born by cesarean is sleepy (although babies born vaginally are sometimes sleepy, too). A sleepy baby will need to be encouraged to nurse at least every two hours. Rooming-in offers many advantages:

- You can be more aware of baby's sleeping and waking cycles and take advantage of the times he is most alert.
- Holding baby skin to skin between feedings is a good way to encourage him to begin breastfeeding. Baby is also more accessible when on your chest because you can respond to his cues more quickly.

If 24-hour rooming-in is not available, you can arrange in advance for the baby's doctor to leave written orders that your baby is to be brought to you whenever he awakens and that bottles and artificial nipples should not be used.

### **Use of Artificial Nipples**

The early use of bottles with artificial nipples can interfere with baby's efforts to learn how to latch onto your nipple and suck effectively. Liquid tends to flow rapidly through a bottle nipple whether baby sucks or not, but drawing your nipple far back into his mouth and latching on well to breastfeed takes a coordinated effort on baby's part. Baby may begin to prefer the bottle and refuse to take the breast. Pacifiers used in the early days have also been known to interfere with baby's ability to learn how to breastfeed.

The mother who has her baby with her has more control over what her baby is given. Communication with the hospital staff is very important; specify that no bottles, pacifiers, or formula should be given to your baby. If supplemental fluids must be given, request the hospital staff give them to baby using a cup.

## **Types of Anesthetic**

The type of anesthetic that is used during a cesarean can directly affect your opportunity to initiate breastfeeding. Unless a cesarean is performed in an emergency situation, a mother is often given the choice of a general or regional anesthetic. If a regional (spinal or epidural) is used, you can be awake for your baby's birth and may be able to nurse in the operating room or in the recovery room although, of course, you will need help in positioning the baby. You may have to breastfeed while lying on your back and one or both arms may be restrained because an IV and blood pressure cuff will still be in place. With assistance, babies can breastfeed lying across your chest or by your side if you can be assisted to a side-lying position.

If a general anesthetic is used, it may be several hours before you are alert enough to hold and nurse your baby, but that shouldn't prevent you from making up for lost time once you and baby are able to be together.

## **Breastfeed Soon after Birth**

Breastfeeding as soon as possible after birth offers benefits:

- It brings you and your baby emotionally closer.
- It releases hormones to contract the uterus more quickly
- It's a pain-free opportunity to enjoy baby's first nursing without discomfort in the area of your incision since your regional anesthetic will not have worn off yet.

Some hospitals require that a baby born by cesarean spend a certain amount of time in the nursery for observation. This policy can often be waived with written orders from baby's doctor, assuming baby has no health problems. If baby must be separated from you due to health problems:

- Ask the hospital staff for an automatic electric breast pump. If one is not available on the maternity floor, an LLL Leader or lactation consultant may be able to help you locate one.
- Pumping soon after birth and every couple of hours thereafter will stimulate your milk to come in, prevent engorgement, and collect valuable colostrum, which can be given to your baby when he's ready to be fed.
- Look at a photo of your baby while pumping—it's a positive reminder of your breastfeeding goal.

### The Use of Medication

Medications used for pain relief after cesarean birth are usually not a problem, and neither are antibiotics, which may also be prescribed. If there is any question about a particular medication, a doctor can almost always prescribe a substitute that has been found safe to use while breastfeeding. Most medications pass into a mother's milk to some degree. However, the colostrum a baby receives in the first few days, although high in protein and antibodies, is small in quantity. A baby is not likely to be affected by the very small amount of medication he may receive.

A mother does not usually begin to produce large quantities of milk until two to five days after birth, and many mothers find they no longer need strong medication for pain relief by that time. However, it is not necessary to avoid taking pain medication if you need it to be comfortable.

# **Comfortable Breastfeeding Positions**

At first, it may be difficult to find a comfortable position that allows baby to breastfeed without hurting your incision. Have your partner or other helper stay nearby to help move and position your baby during the early days.

Many mothers find breastfeeding while lying on their side the most comfortable during the first day or so. It's also an easy way to nurse and rest at the same time.

- You and baby lie on your sides facing each other. Use pillows under your head, behind your back, and behind or between your knees to help get comfortable. Have a rolled up towel or baby blanket within reach.
- Baby's feet should be close to your body, and his head slightly away from your breast with his nose in line with your nipple. (Your bodies should make a "V.")
- Lean back into the pillow behind you until your lower nipple is clear of the surface you're lying on and at the height of baby's mouth.
- Guide baby onto the breast using the hand of your upper arm on the baby's upper back. Avoid pushing on the back of his head.
- Once baby is latched on, wedge the rolled up towel or blanket behind his back to keep him in place.

Another position that mothers find comfortable to use after a cesarean birth is called the football or clutch hold.

- Tuck baby's body along your side under your arm.
- Support the breast with the other hand. If you're nursing on the right breast, your left hand will be supporting the breast with the thumb above and well back from the nipple and the fingers below.
- Support baby's head with your palm on baby's upper back (not head),

- thumb behind one ear and index and other fingers behind the other ear.
- Rest baby's upper back along your forearm with his body on a pillow near your elbow and his hips against the back of the chair, sofa, or against the wall. His legs and feet go up against whatever surface is behind you.
- Baby's body should be supported so that he is high enough and his nose is aligned with your nipple. He shouldn't have to bend his neck forward to latch on—his head, neck, and hips should be in a straight line.

It is best to offer both breasts at each feeding, especially in the early days. Do not limit baby's time at the breast. Breastfed babies cannot overfeed. He will let go of the breast or fall asleep when satisfied. When baby seems to be finished on one breast, whoever is available to help can burp him, change his diaper if necessary, and get baby positioned at the other breast.

For more information on various breastfeeding positions, see www.llli.org or talk with an LLL Leader.

#### While You Recover

It is important for your loved ones to realize that you need time to recover from childbirth and surgery, and to learn to breastfeed your baby.

While in the hospital, ask the nurse for a sign to put on your door several times a day to tell visitors that you are resting so that you do not have to entertain guests in your room all day long.

In the early weeks after arriving home, don't be afraid to ask for and accept help from family and friends. Also remember to drink to thirst and eat nutritious foods to help regain your strength.

Breastfeeding should not hurt. Learning a new skill often takes time, no matter how your baby arrived! If for any reason breastfeeding is not going smoothly or you find it painful to breastfeed, ask a La Leche League Leader or lactation consultant for help.



La Leche League Leaders are accredited volunteers who are available to help with breastfeeding questions in person, over the phone, and online. Locate an LLL Leader near you @

www.llli.org.

photo submitted by Anna Martin