



NURSING AFTER A CESAREAN

There is no reason why a Cesarean birth should necessarily keep you from breastfeeding your baby. If your baby is early or having health problems, providing breastmilk for your baby is the best thing you can do to help. If you are having some health problems, nursing or pumping can be delayed briefly until you are ready and able.

If you have a regional anesthesia (a spinal or epidural) during surgery, you should be able to view your baby shortly after your baby emerges. Feel free to ask to touch your baby before he/she is taken to the nursery for newborn exams.

Many women are ready to nurse - or have important skin-to-skin contact - while still in the recovery room. If your baby is stable, your partner may bring your baby to you. Don't worry if you need help to hold your baby at this time. Your baby will love being close to you.

Lay your baby skin-to-skin on your chest near your breasts. Place one hand on your baby's bottom and the other on baby's shoulders. Let your baby nuzzle and lick. Given enough time, your baby may latch and suckle.

Research has shown that skin-to-skin contact keeps a baby just as warm as being in an incubator.

Once in your postpartum room, you may have someone help you position your baby in the clutch hold under one of your arms. Again, don't worry if you need assistance positioning and holding your baby. You have not only just had a baby, but you are recovering from major abdominal surgery.

This early contact will stimulate the release of oxytocin, which helps the uterus to contract back to non-pregnant size and stop bleeding. It is also the hormone that causes milk to let down. Suckling will also help release prolactin, which promotes milk supply. These hormones are also beneficial in creating a calm and relaxing feeling.

During the first 24 hours you will probably have an IV for patient controlled analgesia. This usually results in good pain control. But it also means that one hand will have tubing attached to it.

Just take your time getting baby situated so that the tubing is not in the way. Every 2-3 hours, have someone (your nurse or partner) help you position baby to nurse. Many women find the football position (see latch information) easiest in the first couple days before you are mobile and moving around easily. It is possible to nurse in the football position while semi-reclining in bed to minimize pressure on your abdominal stitches. Other women prefer to nurse lying on their side.

Do not be afraid to take pain medication. You must be comfortable to even feel like nursing and to promote let down. You can taper your medications as your pain level decreases.

If your baby is unable to nurse, seek assistance to start pumping ASAP. Again, your nurse or a lactation consultant can help you the first time if you are tired and weak. Use a Medela Symphony to double pump every 3 hours for 10 minutes – working towards 8 x a day as soon as physically possible. Early pumping may produce just a small amount of colostrum-hand expression often is more effective. You can feed this to baby in a syringe. Stimulation of your breasts is important for long-term milk supply. If your baby is premature, ask for the “premie” programmed Symphony to optimize milk production. See video at <http://newborns.stanford.edu/Breastfeeding/MaxProduction.html> for the latest research in this area. It is important to bring in a FULL milk supply now, even if your baby is small and not eating very large amounts. Your goal should be at least 800ml each 24 hours by the end of the first week.

As soon as you can collect any amount of colostrum and baby is able to ingest it, you or the nursery will give it to your baby. If your baby cannot eat it, it can be stored. If your baby is full term and will be going to your breast fairly soon, you may want to finger feed your baby. This may help your baby transition to breast more easily. (*See Finger Feeding*)

When your baby does go to breast, please ask for help to obtain a good latch. A deep attachment will result in a good milk supply and good weight gain for your baby (see *Latching Well* information). It is important to be patient with both yourself and your baby.

As you recover from surgery, it is important that you rest frequently, eat a balanced diet, and drink plenty of fluids to aid in healing. Seek assistance from anyone in your support system to do laundry, cook meals, run errands, and help with other children. Your main job should be healing and feeding your new baby.

MilkWorks is a Comprehensive Resource to Help You Breastfeed Your Baby

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