



HAND to HOLD
Fragile Babies. Strong Support.

NICU Nurturing and Nutrition

You and your baby already share a special connection. While you were pregnant your baby heard your voice and felt your movements. Soon they will learn your touch and your smell. These are powerful ways to communicate with your baby. They are also the first steps in your baby's feeding journey.

- **Sound** – Babies may remember the sound of your voice from the womb. Soft lullabies, gentle reading, and your quiet, familiar voice can be very comforting to your newborn and are great ways to bond during feeding.
- **Smell** – Smell is one of our most fundamental senses. **It connects mothers and babies to each other.** The amniotic fluid that your baby was in had smells that were unique to the two of you. Being close by, your baby will begin to learn your unique scent.
- **Touch** – Whether your baby is being fed by a tube, a bottle, or at the breast, touch can make feeding time more relaxing. Ask your care team about safe and supportive ways to touch and hold your baby so that your baby will associate feeding time with feelings of connection.



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Kangaroo Care As soon as your baby is stable, they might be ready to start skin-to-skin or “kangaroo care.” **This is holding your baby's unclothed body against your bare chest.** Skin-to-skin time is an excellent way to increase your milk supply and helps your baby practice pre-feeding behaviors. During skin-to-skin care, your brain releases a hormone that helps with milk production. If you are both ready, your baby can practice finding your nipple and suckling. While it can be intimidating at first, the NICU staff will teach you how. You will quickly discover why kangaroo care is so special.

READING YOUR BABY'S FEEDING CUES

Learning your baby's cues is important because premature and sick infants can't always be fed on demand like other babies. They might not yet recognize what it means to feel hungry. Sometimes they get too tired and fall asleep during a feeding. You can use this time with your baby to help them build up their strength and stamina. Talk with your lactation consultant or NICU staff for gentle ways to keep your baby awake during feedings.

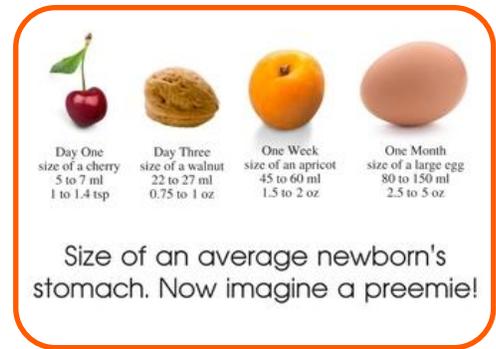
Most babies do not develop the brain maturity to coordinate suck, swallow, and breathing until around 34 weeks. Even then, often babies are not ready or interested in eating, or may take several swallows and be done – for the day! For babies, especially those born preterm, it is **WORK** to them. It burns significant calories. Many parents feel disappointed when their baby won't eat, or when they eat one day and not the next. Preterm babies have other jobs to do, important ones, such as growing brain cells or developing their immune system, and need to use their energy for that. If your baby isn't ready to eat, just know they are growing in other ways that you cannot see and very soon, eating will take priority!

NICU babies need special nutrition and nurturing. Every family's feeding journey will be different. Learning what your baby needs will take time and flexibility. Fortunately, there are many ways for babies to get the nutrition they need. With support from your NICU team, you will find a feeding strategy that works best for you and your baby.



YOUR BREAST MILK

No matter how long or short your pregnancy was, your body has already started preparing to breastfeed. During the first few days postpartum, your breasts will make colostrum, a sort of “liquid gold” full of nutrients and natural antibodies that makes it your baby’s ideal first meal. Even if your baby is not “eating” yet, colostrum can be gently swabbed in your baby’s mouth. The immune-balancing benefits of colostrum can help fight infection as well as supply some early nutrition. Your baby doesn’t need a lot of milk right away. Their stomachs are very tiny! Even a small amount will help develop your baby’s immune and digestive systems.



DONOR BREAST MILK

While in most cases it is preferred to use your own milk supply, there can be circumstances in which milk production may not be possible. Delivery complications, your health, stress from having your baby in the NICU and other factors may limit or prohibit your milk production. Donor breast milk is donated by healthy, carefully-screened, breastfeeding mothers and processed to ensure safety. Many moms who have had babies in the NICU donate their milk because they know how important it is for babies and what a struggle it can be for some moms to make enough.

HUMAN MILK FORTIFICATION

Your premature baby has extraordinary nutritional needs as they are continuing the vital work of developing all of their body organs, particularly their brain. Their body systems are very fragile and human milk is as important as any other medication they receive. The American Academy of Pediatrics recommends human milk fortification for all infants less than 1500 grams or 3 pounds 5 ounces. And for those very low birth weight babies less than 1,250 grams (roughly 2.5 pounds), it is vital for parents to understand that there are two types of fortifiers available. Optimally, these very small preemies need a fortifier that is 100% human milk-based rather than non-human milk-based. As the best advocate for your baby, it is important for you to discuss these options with your NICU care team.

PUMPING AND PUMPING BLUES

While your milk is best for your baby, the commitment to pumping can be challenging and tiring. Make pumping a priority by setting a routine and using the time to talk/read to siblings or enjoy a healthy beverage or snack. Consider reading, meditating, or listening to audio books or podcasts as a way to associate caring for your baby with caring for yourself. Bring your baby’s recently used blanket to hold. Their scent can help stimulate milk production. Look at photos or videos of your baby as you pump to increase your connection to your baby and increase your milk supply. Ask if pumping at your baby’s bedside is an option. To ease some of the pumping burden, try to have a place set up at home to pump or have two kits, if possible, to cut down on the number of things to carry to the hospital. Ask for support, meet regularly with lactation, and allow friends and family to help you keep the equipment washed and to encourage you.

IF PUMPING OR DONOR MILK IS NOT AVAILABLE

There may be times when formula is an option for your baby. If your baby is over 32 weeks, and donor milk is not available, formula will nourish your baby well. Talk with your baby's doctor about options for your baby.

Emotional Impact It is not uncommon to grieve if complications keep you from being able to pump or breastfeed. This change in expectations can be frustrating and often leads to feelings of guilt and inadequacy. These feelings are normal and reflect your strong desire to care for your baby. They are proof of your natural instinct to give your child the very best start in life. If pumping or breastfeeding is not for you, there may a sense of relief to be able to move beyond that hurdle and begin focusing on other things. Embrace your feelings and feel confident in sharing them openly with your spouse, friends, family, peer mentor and care team. They can provide the support you need to navigate the challenges associated with a NICU stay. **Remember your love is the most vital gift you can give your baby.**

