Do not give your baby any food or drink other than breast milk unless specifically advised by a healthcare professional. Likewise, avoid using bottles or pacifiers during this early stage. Over time, both mother and baby will mutually adapt to breastfeeding, but it is natural for there to be uncertainties, challenges, and the need for support in the first stages of this process.

What if I cannot or do not want to breastfeed?

In these situations, it may be necessary to **suppress lactation**, a process that can take several days. In addition to taking medications that reduces milk production, you should avoid nipple stimulation and wear a firm, supportive bra. If breast tension becomes uncomfortable, you may take pain-relieving medication.

Where can I obtain more information?

SNS 24 Breastfeeding
https://www.sns24.gov.pt/pt/tema/saude-da-mulher/amamentacao/

UNICEF
https://www.unicef.pt/aleitamento-materno/

E-lactancia
www.e-lactancia.org

SOS Breastfeeding Helpline
21 3880915 (week days from 10:00 to 18:00)

UNIDADE LOCAL DE SAÚDE
SANTA MARIA

BREASTFEEDING

UNIDADE LOCAL DE SAÚDE SANTA MARIA

Av. Prof. Egas Moniz—1649-035 Lisboa

SNS SERVIÇO NACIONAL DE SAÚDE

Breastfeeding offers numerous benefits for both mother and baby, when compared with formula feeding. It is recommended by all major national and international scientific and health organizations, beginning **within the first hour of life** and continuing for **at least the first six months**.

Advantages for the baby:

- Breast milk is nutritionally adapted to the baby's needs, which change as the baby grows.
- It is easily digested and absorbed, and is better tolerated, reducing the risk of cramps diarrhoea, dehydration, regurgitation, and constipation.
- It lowers the risk of childhood obesity.
- It contains protective substances against infections and allergies, and strengthens the immune system.
- It reduces the risk of developing certain chronic diseases in adulthood, such as diabetes, cardiovascular disease, and inflammatory bowel disease.
- It decreases the likelihood of infant hospitalization.
- It strengthens the emotional bond between mother and child.
- It contributes to the proper development of the infant's facial muscles.

Advantages for the mother:

- It promotes uterine contraction, reducing the risk of postpartum haemorrhage.
- It facilitates postpartum weight loss.
- It promotes bonding with the baby and generally enhances maternal self-esteem.
- Reduces the risk of breast cancer, ovarian cancer, and osteoporosis.
- It is cheap and environmentally friendly. It is readily available and at the right temperature.

Breastfeeding is protected by Portuguese law. When you **return to work**, consider the possibility of having your baby brought to you for breastfeeding during working hours. If this is not possible, you may extract breast milk in advance, store it in the refrigerator, and ask someone to feed it to your baby in your absence. At the workplace, you should express milk using a manual or electric breast pump as frequently as your baby would normally do.

Is it always possible to breastfeed?

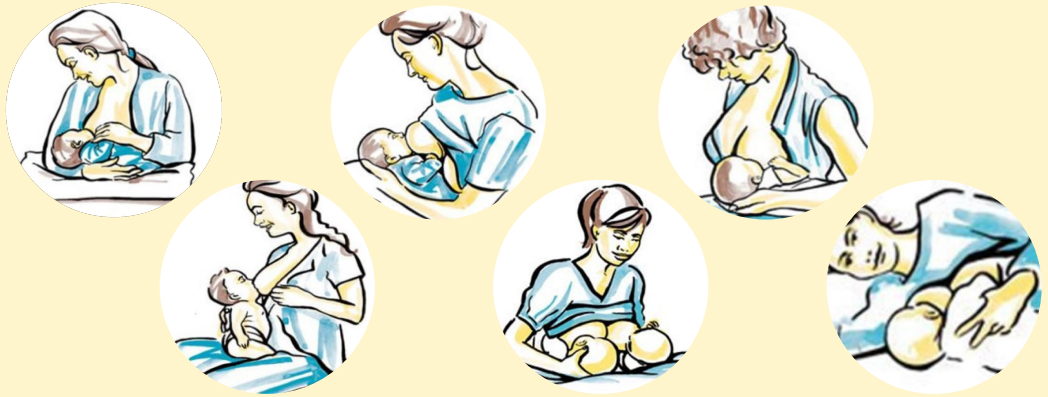
In some situations, breastfeeding is **contraindicated**. This includes mothers with HIV/AIDS or human T-cell lymphotropic virus (HTLV) infections, mothers who need to take medications that pass into breast milk, and may be harmful to the baby, and infants with galactosemia (a rare disorder in which they are unable to digest sugar present in breast milk). Rarely, it is necessary to **temporarily suspend breastfeeding**, due to health problems affecting either the mother or the baby. During such interruptions, milk production can usually be maintained by expressing breast milk with a manual or electric breast pump, allowing breastfeeding to be resumed at a later stage.

How should I breastfeed?

Many people assume that breastfeeding is instinctive; however, it is common for a few questions to arise and challenges to occur during the first days. In hospitals, keeping the mother and baby together after birth is encouraged whenever possible, as it promotes breastfeeding and facilitates the establishment of successful feeding practices.

If you have decided to breastfeed your baby and there are no contraindications, you should do so **on demand**, that is whenever the baby wishes and without fixed intervals between feeds. The number of daily feeds may vary between 8 and 12, corresponding to average intervals of about 3 hours, but some intervals may be longer and others shorter. Choose a quiet place, avoiding excessive light stimulation, and unpleasant smells whenever possible.

Before each feed, wash your hands, but there is no need to wash the breasts, except during your regular bath or shower. Sit or lie down in a comfortable, well-supported position, placing the baby at the breast with his abdomen touching yours, and ensuring that the baby does not need to turn his head to start feeding.



Signs that breastfeeding is progressing well include the baby's chin touching the breast, more of the areola (the darker area surrounding the nipple) visible above the baby's mouth than below it, the baby's lower lip is turned outward and pressed against the breast, and the baby is heard swallowing slowly, deeply, and rhythmically. Try as much as possible to empty one breast before offering the other one, and always start with the opposite breast from the one used last. You may experience some discomfort in the nipples with the baby's first few sucks, but it is not normal to feel intense pain after this initial period. If after a feed, in which the baby has sucked adequately and appears to be calm, you feel an uncomfortable breast fullness or tension, express some milk with your hands until you feel relief, and then apply cold compresses to the breasts. If you have any questions or concerns, please seek advice from the nursing team, even after hospital discharge.

During the first few days after birth, a thin form of breast milk called **colostrum** is produced. This contains all the nutrients a newborn needs and is particularly rich in antibodies (substances produced by the mother that help protect the baby against infections). A thicker breast milk begins to be produced a few days later, a process commonly known as milk let-down. When this occurs, breasts may become fuller, firmer, heavier, and under more tension.