



STERLING GREY-SIMMONS



# BOOBIE TRAPS

COMMON HOSPITAL PRACTICES  
AND HOW THEY INTERFERE  
WITH SUCCESSFUL  
BREASTFEEDING

It's important to recognize that some well-intentioned hospital practices can create challenges for mothers who want to successfully initiate and maintain breastfeeding.

These practices, which I affectionately refer to as "Boobie Traps," may inadvertently make the breastfeeding journey a bit more challenging for new moms, and it's okay to seek help and guidance to overcome them.

Through this e-book, my aim is to offer support, understanding, and guidance. I want to create awareness about these common challenges and help empower you with the knowledge and tools needed to navigate and overcome these hurdles, making your breastfeeding experience as smooth and fulfilling as possible. You're not alone on this journey, and I'm here to support you every step of the way.

# SEPERATION OF MOTHER & BABY

In many hospital maternity wards, it's a common practice to separate a mother and her newborn shortly after birth for various procedures, including cleaning and assessments. However, this separation can inadvertently become one of the most significant "Boobie Traps" that hinder successful breastfeeding and the crucial mother-infant bond. In this section, I will mention three practices that should take place immediately after birth in place of the standard hospital practice.

## **Promoting Skin-to-Skin Contact**

To enhance your chances of successful breastfeeding, it's vital to encourage and advocate for skin-to-skin contact between you and your newborn immediately after delivery. This practice not only helps initiate breastfeeding but also strengthens the essential bond between you and your baby.

## **Communicate Your Preferences**

Make sure to communicate your preferences to your birth team. Let them know that you would like to have at least one hour of uninterrupted, precious alone time with your baby right after they are born. During this time, all necessary newborn assessments can be conducted while your baby rests on your chest. Be sure to include this in your birth plan and let your doula & spouse aware so they can advocate for you as well.

## **"Wait on Weighing Your Baby Weight" After IV Fluids**

If you received IV fluids during labor, you can also instruct your healthcare team to "wait on the weight." Recent studies suggest that the most accurate time to weigh a newborn is approximately 24 hours after birth. This delay allows your baby to pass fluids that have been transferred during labor which could play a role in determining baby's weight gain/loss at the pediatrician.

# FORMULA SUPPLEMENTATION

In some hospital settings, it's a common practice to offer formula supplementation to mothers, even if they have chosen to breastfeed their newborns. This well-intentioned but potentially counterproductive protocol can become another "Boobie Trap" that hinders the successful initiation and maintenance of breastfeeding. It's crucial for both healthcare providers and mothers to be well-informed about the implications of this practice and the benefits of exclusive breastfeeding.

Unnecessary formula supplementation can interfere with the breastfeeding relationship and undermine the mother's confidence in her ability to nourish her baby naturally. To promote successful breastfeeding, hospitals should avoid routinely offering formula unless there are valid medical indications, such as a specific health concern for the baby.

Mothers should receive thorough education about the benefits of exclusive breastfeeding and the potential consequences of early formula use. By understanding the advantages of exclusive breastfeeding, such as enhanced immunity, bonding, and optimal nutrition, mothers are better equipped to make informed decisions about their feeding choices.

A great way to combat unnecessary supplementation is by being aware of what constitutes normal newborn output. Hospitals can provide guidance to mothers on how to monitor their baby's feeding patterns and diaper output. When mothers are informed about what to expect in terms of breastfeeding frequency and diaper changes, they can gain confidence in their ability to meet their baby's needs without resorting to formula supplementation.

By promoting awareness and education, hospitals can help mothers feel empowered in their choice

to breastfeed and provide the best possible start for their infants. This approach not only enhances the breastfeeding experience but also contributes to the overall health and well-being of both mother and baby.

## How big is a newborn's stomach?



A newborn's stomach size and its breakdown play a crucial role in understanding how to feed and nourish an infant during their early days of life. Here's an explanation of a newborn's stomach size and how it evolves over time:

At birth, a newborn's stomach is very small and can typically hold about 5-7 milliliters (mL) or

roughly the size of a cherry. It's essential to recognize that a newborn's stomach is tiny, and their capacity for intake is limited.

### **Stomach Size Breakdown:**

**1. Day 1-3:** In the first few days of life, a newborn's stomach is at its smallest. It can hold around 5-7 mL of milk. Colostrum, the first milk produced by the mother, is rich in essential nutrients and antibodies perfectly suited to this tiny stomach.

**2. Day 3-5:** By the third to fifth day of life, a newborn's stomach capacity increases to approximately 22-27 mL, about the size of a walnut. This is when the transitional milk, a mixture of colostrum and mature milk, starts to become the primary source of nutrition.

**3. 1-2 Weeks:** As the baby continues to grow and develop, their stomach gradually expands. By the end of the first or beginning of the second week, it

can hold around 60-80 mL or roughly the size of a ping pong ball. This coincides with an increase in milk supply from the mother.

**4. 3-4 Weeks and Beyond:** Over time, a baby's stomach continues to grow in size. By the end of the first month, it can hold approximately 80-150 mL or the size of a large chicken egg. Its important to note that once baby is drinking 5oz that amount does not have to be increased as they get older like formula fed infants. That is because breastmilk is everchanging and always exactly what your baby needs.

Understanding the size and development of a newborn's stomach is crucial for both breastfeeding and bottle-feeding. It highlights the importance of feeding in small, frequent amounts during the early days and ensures that the infant receives an appropriate volume of milk at each feeding. It also emphasizes the significance of responsive feeding practices to accommodate the evolving needs of the growing baby as their stomach capacity increases with age.

# ROUTINE USE OF PACIFIERS

The practice of providing pacifiers in hospitals to newborns is a subject of discussion among healthcare providers and parents. It's important to note that pacifiers themselves are not inherently harmful to breastfed babies, but their usage can have both advantages and disadvantages.

Pacifiers can provide comfort and soothing for babies. Many infants have a strong sucking reflex, and a pacifier can help satisfy this need between feedings. They have been associated with a reduced risk of sudden infant death syndrome (SIDS) when used during sleep or naps, which is a notable benefit for infant safety. Pacifiers can be helpful during medical procedures or when a baby needs to remain calm for a short period.

One common concern is that the use of pacifiers in the hospital setting can sometimes interfere with the establishment of breastfeeding.

When infants are given a pacifier, they might spend more time pacifying themselves and, as a result, nurse less frequently. Pacifiers can mask hunger cues. If a baby is given a pacifier when they are actually hungry, it may delay or reduce the frequency of breastfeeding.

Healthcare providers need to strike a balance between promoting infant comfort and safety, such as reducing the risk of SIDS, and supporting successful breastfeeding. Communication and education are key elements in addressing this balance.

Parents should be informed about the potential impact of pacifier use on breastfeeding and be encouraged to be attentive to their baby's cues. Using a pacifier sparingly and only after breastfeeding is well-established can be a practical approach to enjoy the benefits while minimizing potential interference with breastfeeding.

When infants are given a pacifier the parents will more than likely miss their baby's early hunger cues. This usually results in a "hangry" baby and a mama feeling like her milk must not be enough.

Early Hunger Cues include smacking lips or opening and closing mouth. Sucking on tongue, lips, hand or other objects. Rooting (turning their head and opening their mouth to anything touching near their mouth. As your baby's hunger gets more intense. They will usually start showing active cues. They may start fussing, squirming or acting unsettled, trying to move their body into position for nursing while being held, or bobbing their head in search of the breast.

If your baby is extremely upset, try to calm them before feeding. Crying or screaming are late hunger cues and make it much more difficult for your baby to latch.

Identifying these hunger cues are critical to your breastfeeding success and Healthcare providers need to strike a balance between promoting infant comfort and safety, such as reducing the risk of SIDS, and supporting successful breastfeeding. Communication and education are key elements in addressing this balance.

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# LIMITED SUPPORT

As an expectant mother, it's essential to prepare for the journey of breastfeeding and anticipate the support you may need during your hospital stay and beyond. Many new moms express concerns about their limited one-on-one time with hospital lactation consultants (LCs) due to high demand, which can leave them with unanswered questions or a less comprehensive understanding of breastfeeding. To ensure a smoother and more informed breastfeeding experience, consider the following suggestions:

## **Hospital Lactation Support:**

It's true that hospital LCs often have a significant caseload, making it challenging to provide extensive one-on-one guidance to every new mother. While they offer invaluable assistance, their time with each mother may be limited.

To make the most of your hospital stay, consider seeking out prenatal breastfeeding classes. These classes offer an excellent opportunity to gain fundamental knowledge about breastfeeding before your baby's arrival. You can also ask questions, benefiting from a more relaxed setting compared to the hustle and bustle of the hospital.

### **The Power of Prenatal Education:**

Enrolling in a breastfeeding class during pregnancy is highly recommended. These classes are designed to prepare expectant mothers for the breastfeeding journey ahead. They cover essential topics such as latching, positioning, milk supply, and common challenges. By taking a breastfeeding class before delivery, you can build a solid foundation of knowledge, allowing you to ask specific, informed questions and participate actively in discussions with hospital LCs. This can help you make the most of your limited time with them.

## **Planning for Post-Hospital Support:**

Be proactive about securing additional lactation support after your hospital discharge. Consider identifying a lactation professional whom you'd like to work with in advance. This step can ensure you have a dedicated resource to turn to when you need further guidance.

Many lactation professionals offer postpartum home visits or telehealth consultations. Having one in mind before you leave the hospital can be reassuring, as you'll know where to turn if you encounter breastfeeding challenges after returning home.

In summary, while hospital lactation support is invaluable, taking a proactive approach by attending prenatal breastfeeding classes and planning for post-hospital support can empower you with the knowledge and resources you need for a successful and confident breastfeeding

experience. Preparing in advance ensures that you're well-equipped to navigate the initial stages of motherhood and breastfeeding with greater ease.

# SCHEDULED FEEDINGS

In many hospitals, the practice of recommending scheduled feedings every 2-3 hours is still prevalent. This approach can sometimes lead to confusion and concerns for new mothers who may find their babies seemingly hungry more frequently than these predetermined intervals suggest.

## **Challenges of Scheduled Feedings:**

Scheduled feedings can inadvertently pose challenges for both mothers and babies. New moms may wonder why their infants appear hungry between these set feeding times, which can be perplexing and worrisome.

To foster the establishment of successful breastfeeding and provide more flexibility for

mothers and babies, hospitals should consider shifting towards an on-demand breastfeeding approach. This approach encourages feeding whenever the baby displays hunger cues, regardless of a fixed schedule.

### **"Watch Your Baby, Not the Clock!"**

A valuable piece of advice to remember is "watch your baby, not the clock." Your baby's cues and signals are the most accurate indicators of when they need to feed. The breastmilk supply adjusts to meet your baby's demands, so you can't overfeed a baby who is nursing directly from the breast.

Emphasizing the importance of observing and responding to your baby's cues can help alleviate confusion and stress for new mothers. This approach empowers moms to tune into their baby's unique feeding patterns and allows for a more relaxed and responsive feeding experience. It also aligns with the principles of establishing successful breastfeeding and bonding with your newborn.

# USE OF BREASTPUMPS TOO SOON

In the hospital setting, the use of breast pumps during the early days after childbirth can significantly impact the success of breastfeeding. Timing and context are crucial when introducing this practice to new mothers. Many hospitals encourage new mothers to begin pumping shortly after giving birth. While this practice has merits, it can pose challenges for both mothers and their breastfeeding goals.

One significant issue that arises is the perception of very little milk being expressed through the pump. This can be disheartening and may lead to concerns about milk supply. In response, mothers might resort to supplementing with formula, which can hinder exclusive breastfeeding. To support successful breastfeeding, hospitals should balance the potential benefits of breast pumps with the need to minimize early supplementation. The approach should be tailored to each mother's unique situation, considering medical requirements and individual preferences.

In many cases, hand expression can be a better option in the early stages. It empowers mothers by allowing them to feel the milk coming out and initiate milk flow. Hand expression can be especially beneficial for colostrum as it is often thicker and may not respond as well to pump suction. Trying to pump colostrum is like trying to drink honey through a straw.

Colostrum is highly concentrated with essential nutrients and antibodies, providing vital protection and nourishment for the newborn. Colostrum serves as the perfect first food for the infant and should not be underestimated for its significance in early feeding.

Always remember that when introducing breast pumps in the early postpartum period, it's vital to consider the timing, individual needs, and the nature of colostrum. Hand expression, in particular, is often a better choice during this crucial stage as it empowers mothers and supports the successful initiation of breastfeeding, especially when dealing with the unique properties of colostrum.

# MATERNAL MEDICATIONS

As we conclude this e-book, it's crucial to address one more common practice in hospitals that can influence breastfeeding – the administration of medications to mothers during labor and the postpartum period. Some of these medications, while necessary for medical reasons, can inadvertently affect the breastfeeding journey in various ways.

Certain medications administered to mothers during labor and postpartum can have side effects that impact both the mother and the newborn. One of the common concerns is that these medications can make both mom and the infant too tired to initiate or maintain breastfeeding effectively.

In situations where the mother is too fatigued to breastfeed due to the effects of medications, there are strategies to help bridge this gap.

A family member can engage in skin-to-skin contact with the baby, fostering that crucial bond and keeping the infant close until the mother is alert enough to breastfeed. For instances where the mother cannot breastfeed directly, hand expression can come to the rescue. The expressed milk can be used to feed the baby via a cup, spoon, or syringe, ensuring that the baby still receives the valuable nutrients and antibodies found in breast milk.

If the baby is too tired to breastfeed, it's important to maintain skin-to-skin contact as much as possible. This not only promotes bonding but also encourages the baby to nurse when they're more alert and ready. In the meantime, regular hand expression can help maintain the milk supply.

In conclusion, as you embark on your breastfeeding journey, it's essential to be aware of the potential effects of medications used during labor and postpartum. By understanding

these challenges and employing alternative feeding methods and skin-to-skin contact, you can navigate these hurdles and continue to provide the best nourishment and care for your newborn. Remember that breastfeeding is a dynamic process, and with the right support and knowledge, you can overcome common obstacles and cherish the beautiful bond that it fosters between you and your baby.

Successful breastfeeding is crucial for the health and well-being of both mothers and babies.

Being aware of these common Boobie Traps in hospital practices can help you ensure the best start for breastfeeding.

## **CHEERS TO AVOIDING THE BOOBIE TRAPS!**



*Sterling Grey-Simmons*  
*Certified Breastfeeding Specialist*  
*Full Spectrum Doula*

# BREASTFEEDING SUPPORT

Work with me during your breastfeeding journey. Book a session with today.

# 1

## LATCHED & LOADED HOME VISIT

Breastfeeding mothers whom reside within a 45-minute radius of McDonough, Georgia, our breastfeeding home visit is tailored just for you. The Latched & Loaded Home Visits offer personalized, in-person support from a specialist, ensuring you have a dedicated ally by your side.

# 2

## LATCHED & LOADED VIRTUAL MEETING

If you're a breastfeeding mother residing outside our breastfeeding home visit service area, the Latched & Loaded Virtual Meetings provide an ideal online connection with a specialist, ensuring you have dedicated support and guidance throughout your breastfeeding journey.

[www.loyallactation.org](http://www.loyallactation.org)