In most cases, breast milk is the best food for your baby. Breast milk improves the immune system, which fights off illness and disease. It also helps the baby’s digestive tract develop. In the long-term, babies fed breast milk have a lower risk of asthma, ear infections, diarrhea and vomiting, lung infections, and type 2 diabetes.

**My baby was premature. Can I still breastfeed?**

Babies can almost always benefit from breast milk. However, a premature baby may not be ready to breastfeed. The ability to coordinate sucking, swallowing, and breathing doesn’t usually develop until 34 to 36 weeks’ gestational age.

In the meantime, your baby often can have breast milk though a feeding tube. If so, talk to the NICU team about the best way to pump and store your milk.

For more information about feeding tubes, ask for the sheet titled “Understanding Feeding Tubes.”

**My baby is sick. Can I still breastfeed?**

The answer depends on your baby’s health. If your baby is being fed by bottle or tube, you may be able to breastfeed or pump breast milk for the baby. Talk with the NICU team about your options.

If your baby needs TPN (total parenteral nutrition), then the baby may or may not be ready for breast milk. If not, it is likely that you will be able to pump and store your breast milk for later. Talk to the NICU team about what’s best for your baby.

For more information about TPN, ask for the sheet titled “Understanding Nutrition in the NICU.”
What if I can’t breastfeed or don’t produce enough milk?

Most women can breastfeed (or pump breast milk) successfully. But it often takes time, practice, and help. If you haven’t breastfed before (or are having problems now), ask the NICU team about a lactation consultant.

However, there are some women who cannot breastfeed. These women may have breast problems or have had breast cancer, breast surgery, or another health problem. Other women should not breastfeed because their milk may contain something harmful to the baby (like a virus, medicine, or street drug).

In these cases, ask the NICU team if donor milk is available for your baby. Donor milk comes from mothers who have extra milk and are willing to share it. But you should only use donor milk from a milk bank that screens the milk for diseases and processes it to kill germs. Raw milk from a friend or an internet group may harm your baby.

I don’t want to miss bonding with my baby while breastfeeding. What can I do?

Talk to the NICU team. You may be able to hold your baby during tube feeding. Ask about alternatives, such as skin-to-skin contact (also called “kangaroo care”). Both mothers and fathers can participate in kangaroo care.

For more information about kangaroo care, ask for the sheet titled “Understanding Developmental Care.”

Glossary

Digestive tract – series of organs in the body that process food and eliminate waste

Immune system – complex system that helps protect the body from germs

Kangaroo care – beneficial skin-to-skin contact between an infant and parent

Lactation consultant – person who is an expert on helping women breastfeed successfully

Total parenteral nutrition – receiving nutrition through a vein instead of through the digestive tract

Ask the health care team when you have questions—they are there to help.

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