

Early Pregnancy and Breastfeeding - First trimester

A half year from now, you may be holding your baby and nurturing your baby by breastfeeding! The breast tenderness you may be going through now is a sign that the alveoli, or “Milk Factories” are growing and preparing for breastfeeding.

Breastfeeding is natural but not always easy. We hope that you will take advantage of all the resources UCSF has to offer, such as classes on breastfeeding and postpartum groups for breastfeeding mothers. We are here to support you in learning about breastfeeding during your pregnancy.

Benefits of breastfeeding for mother:

Please consider the many health advantages for yourself and your baby if you give nothing but your breastmilk during the first six months. Some of the advantages for the mother include a lower risk of:

- Heart disease
- Diabetes
- Ovarian and breast cancer

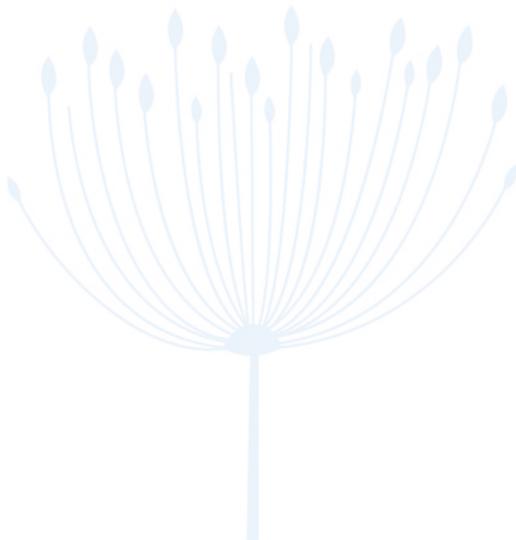
Benefits of breastfeeding for baby:

Babies who are breastfed will:

- Have half the doctors' visits for ear infections
- Suffer less allergies
- Have less need for orthodontic braces later.

Please refer to [Caring for Yourself During Pregnancy and Beyond, page 26](#), for a complete discussion of breastfeeding advantages.

Because of the many health advantages for you and your baby, the American Academy of Pediatrics recommends that you exclusively breastfeed your baby (only breastmilk) for the first six months and that you continue breastfeeding while solid foods are introduced, for a total of at least one year, or as long thereafter as you and your baby want.



Successful Breastfeeding - Second Trimester

It's good to know practices that help make breastfeeding successful. Two practices which are known to help your baby successfully breastfeed include feeding babies when they show signs of hunger, and having your baby remain near you during the day and night.

Feeding based on cues:

There was a time, when formula feeding was the norm that we fed babies by a schedule, such as feeding every four hours. We now know that, whether formula or breastfed, babies feed when they show signs of hunger or by their cues. Breastfeeding babies are less likely to be over-fed and therefore can gain weight better. They also cry less.

Early cues that show that your baby is wanting to be fed include:

- Fluttering their eyes
- Opening their mouth
- Putting their hands in their mouth

Cues are so important to follow that we also avoid using pacifiers in term babies during the early weeks. When we don't use pacifiers, we observe cues sooner, and feed babies more frequently.

Rooming-in:

Keeping your baby with you in your hospital room is another way to ensure breastfeeding success. Some of the advantages of rooming-in include:

- You will be able to recognize your baby's early feeding cues
- You can learn to handle your baby during the night as a team
- We can teach you safe positions for breastfeeding when you are tired, so you can rest while breastfeeding.
- Babies are safer when sleeping in the same room as you.

Please refer to [page 28 in Caring for Yourself During Pregnancy and Beyond](#) for more information on cue-based feeding and rooming-in. You will also see positions for breastfeeding on this page.

Preparing for Birth:

In addition to signing up for breastfeeding classes, we highly recommend that you and your support person or partner prepare for childbirth by attending classes. Classes are available through our Great Expectations Pregnancy Program. You may call (415) 514-2670 to register. Scholarships are also available.

UCSF has many options for coping with labor pain. You can learn more about pain options on page 51 of [Caring for Yourself During Pregnancy and Beyond](#). Regardless of which pain-relief options that you choose, breastfeeding can be very successful. Studies show that babies can be particularly alert and ready to breastfeed after natural childbirth. Some of the options that UCSF provides for women wanting un-medicated or minimally medicated births include:

- Warm baths during labor
- Cordless fetal monitoring that allows for movement
- Midwifery care
- Nitrous Oxide

The Golden Hour - Third trimester

Your amazing newborn is hardwired to breastfeed during the first hour after birth. (The Golden Hour). Ideally your newborn will have uninterrupted skin-to-skin care until The Golden Hour is completed.

Skin-to-skin:

Keeping your baby skin-to-skin helps with many things:

- Stabilizes your baby as she/he transitions from an in-utero to an outside-the-uterus life.
- Keeps your baby warm
- Helps regulate your baby's breathing and heart rate.

Your baby will also go through nine behaviors which culminate in breastfeeding. To read about these stages and more about The Golden Hour, please refer to [pages 27-28 in Caring for Yourself During Pregnancy and Beyond](#).

Consider this a very special once-in-a-lifetime experience, when you and your close friends and/or family meet your baby. You may want this to be a small, intimate experience. You may want to ask your extended family to wait to meet your baby until after that first hour.

If you have a cesarean birth, The Golden Hour can occur both in the operating room and during the first hour of recovery. Your nurses will help you position and feed your baby.

Special Situations:

There may be situations when the first skin-to-skin time with your baby must be delayed to provide medical support for your baby. If that happens, know that your first special skin-to-skin time will happen later. In the meantime, importantly, you can support your baby and protect your milk supply by hand expressing your early milk, or colostrum, for your baby.

Ask your nurse to show you how to do this during the first hour. We have special kits to collect your milk, and if your baby is in the Newborn Intensive Care Nursery for special support, the drops that you hand-express will be swabbed on your baby's mouth as a protection against infection. Remember that your milk is medicine for your baby.

