

How to Safely Feed Your Baby Extra Milk



Occasionally breastfed babies may need to be given extra milk (also called a supplement) in addition to breastfeeding. A health care professional will tell you how much extra milk or supplement to offer. It is important to get help with breastfeeding if you need to give a supplement.

Disclaimer: *The terms breast milk/breastfed/breastfeeding are widely used, but human milk/ chestfed/chestfeeding can be used interchangeably.

Your baby may need a supplement of expressed milk or infant formula if:

- They are having trouble latching well
- They are not able to remove enough milk from the breast
- Your milk supply is low
- They are premature or ill, or cannot feed directly at the breast
- They are not having the expected number of wet or dirty diapers for their age
- You and your baby have been separated or direct breastfeeding has been interrupted and/or medically advised by your health care provider
- Your health care professional is concerned that your baby is not growing as expected



DO NOT give water to babies under 6 months of age



It is important to follow-up with a health care professional and infant feeding expert when you are giving your baby extra milk. They will monitor your baby's growth and help you work toward your infant feeding goals.

What to feed your baby

If a health professional has told you that your baby needs to supplement breastfeeding, you may be wondering what to feed them.

Expressed human milk

- When available, your own, freshly expressed milk is the recommended supplement
- Freshly expressed milk will provide your baby with all of the protective factors human milk offers
- If freshly expressed milk isn't available, thawed, previously frozen or refrigerated human milk can also be given

Human milk from a donor milk bank

- At this time in Ontario, this is only available to hospitalized or ill babies

Cow's milk-based infant formula

- If your own expressed milk is not available, or if you are not able to produce enough milk to meet your baby's needs, **commercial cow's milk-based infant formula** should be offered (unless your health care professional has recommended a specialized formula for your baby)
- Soy, lactose-free and other specialty formulas should only be given on the advice of your health care professional
- Follow the instructions on the label when preparing infant formula
- To learn more about preparing infant formula, including accessing a video on preparation steps, visit www.smdhu.org/FormulaFeeding

The following are NOT appropriate for babies as a substitute for human milk:

- Cow's or goat's milk
- Raw or unpasteurized milk
- Other plant-based beverages such as soy, oat, almond or rice
- Evaporated or condensed milk
- Other toddler supplements or toddler milks
- Homemade infant formula

How to feed your baby safely

Your baby needs to feel secure and comfortable when feeding. Babies should never have milk pushed or poured into their mouth. Your baby should not choke, gag or dribble while feeding. It is important to watch your baby's cues and stop or slow down the feeding when your baby shows signs of stress or fullness. Babies should look relaxed while feeding, with a calm face and relaxed hands and arms. Hold your baby skin-to-skin as much as possible while working on breastfeeding. Skin-to-skin contact will help your baby feel safe, calm and secure, and will help baby learn to breastfeed.

Signs of stress during feeding:

- Swallowing quickly without taking a breath after each swallow
- Making smacking or squeaking noises
- Squirming or struggling during the feed
- Pushing feeding device away with hands or tongue

- Breathing fast or working hard to catch breath
- Milk leaking or dribbling out of mouth

If signs of stress are shown, give your baby a break and watch for signs of hunger (known as feeding cues) to resume. Feeding cues include hand to mouth movements, turning head from side to side and sucking sounds and movements. If feeding cues are present, continue feeding. If they do not resume, end the feeding.

If your baby is having difficulty feeding, is unable to feed by any other method, and is not having the correct number of wet and dirty diapers, contact your health care professional or visit the nearest emergency room immediately.

Ways to supplement your baby

- Lactation aid at the breast
- Finger feeding
- Cup, spoon
- Bottle

Lactation Aid

A lactation aid is a tube that is placed at the nipple which allows your baby to receive extra milk while they breastfeed. It works like a straw. This is a helpful method because the baby will get milk from the breast as well as the extra milk that is needed. This can help increase your milk supply and may be less confusing to your baby than other methods of feeding. Commercial feeding tubes or lactation aid systems are available to purchase in the community.

You will need:

- Feeding tube (36 inch #5 French) or commercial lactation aid system
- Container with expressed milk or infant formula
- Medical tape to hold the tube in place at the breast (optional)
- Syringe to clean the tube

Getting Started:

- Place the large end of the tube into the container of extra milk
- Place the container on a table that is level with your baby's head
 - if the container is too high, the milk will flow too fast
 - if the container is too low, the milk will flow too slowly

There are several ways to position the tube: Place the tube on your breast so that the end of the tube lines up with the tip of your nipple. You can use a small piece of tape to keep the tube in place or you can hold it while baby latches at the breast. Or, after your baby latches to your breast, slide the tube into the corner of your baby's mouth about 1-2 cm.

Once you have positioned the tube at the breast: Listen or watch for swallows. You can see the milk go up the tube and see the amount of milk in the container go down.

Finger Feeding

This method is effective for a short period of time when the baby needs a small volume of supplement. It allows baby to practice sucking on your finger while receiving milk through a feeding tube. As your baby needs larger volumes of milk, other methods, such as cup or bottle feeding, may be more effective.

You will need:

- 36 inch #5 French feeding tube or syringe with a long curved tip
- Medical tape (optional)
- Container with expressed milk or formula
- Syringe to clean the tube

Getting Started:

- Trim your fingernail on your index (pointer) finger
- Wash your hands thoroughly
- Place the large end of the tube into the container with milk
- Place the container on a table level with your baby's head
 - if the container is too high, the milk will flow too fast
 - if the container is too low, the milk will flow too slowly

Place the tube on the side of your finger so that it is not rubbing on the roof of your baby's mouth – you can use tape to hold the tube in place. With the baby sitting upright, gently touch your baby's lips with your finger until your baby's mouth opens. Your finger should be straight, pad side up, and inserted into your baby's mouth to a length between the first and second knuckle. As your baby drinks, you will hear swallows, as well as see the milk go up the tube and the level of milk in the container go down.

Cup or Spoon Feeding

Spoon or cup feeding can be helpful when your baby is drinking smaller volumes of milk in the first few days. As your baby begins drinking larger volume of milk (more than 15 ml) cup feeding may be more appropriate.

These methods are inexpensive and easy to learn.

Some spilling of milk is normal while you and your baby are learning this method of feeding. Any small cup that is easy to clean, such as a medicine cup can be used.

You will need:

- Medicine cup, small cup or small glass
- Or a small spoon (teaspoon)

Getting started

CUP OR SPOON FEEDING

- Make sure your baby is awake and alert and ready to feed
- Sit baby upright

Fill the cup or spoon with a small amount of milk. Place the rim of the cup or spoon gently on the baby's lower lip. Tip the cup or spoon just enough for the milk to touch your baby's lips and let your baby sip or lap up the milk. **Do not pour the milk into your baby's mouth**, follow your baby's cues and take short breaks as needed.



Bottle Feeding

Babies suck differently on a bottle nipple than on the breast and they can get used to the feel of the artificial nipple in their mouth. Milk flows differently from an artificial nipple than it naturally would from the breasts. This flow difference may make feeding difficult for your baby. It is important to bottle feed your baby correctly and follow their feeding cues.

If you decide to use a bottle:

- Choose a bottle which has a wide-based nipple with a round tip
- Your baby should have a good seal around the base of the nipple
- The nipple should not cause your baby to gag — if this happens, use a nipple with a shorter tip
- If it's difficult for your baby to feed using a wide-based nipple, consider using a smaller-based nipple. Signs of difficulty may include milk leaking from mouth or inability to stay latched
- Choose a slow flow nipple



Getting started

- Sit with baby in your lap and hold them almost fully upright. Support their head and neck allowing head to tilt back slightly
- Hold the bottle horizontally, in line with the floor, so that the tip of the nipple is full of milk and the wider part is only half full. This air pocket allows your baby to take the milk slowly and safely
- Touch your baby's upper lip with the nipple and wait for your baby to open their mouth wide
- Put the bottle into your baby's mouth so that the lips seal around the wide base of the nipple and not the smaller tip

During the feeding

- Your baby's lips should be turned out
- Watch your baby's cues to see how they are handling the flow
- If your baby appears stressed or is gulping rapidly, lower the bottle, or take the bottle away and give your baby a break
- If you hear your baby swallowing air, tip the bottle slightly upwards
- If you need to tip the bottle as it empties, make sure there is still an air pocket in the wider part of the nipple
- It is normal for babies to take in some air during a feeding, which can be removed by burping
- Burp your baby part way through the feed and afterwards. If you think your baby needs to burp more often, follow their cues

Safety Tips

- Never prop a bottle or feed baby unattended
- Never feed baby while strapped in a car seat or stroller
- Never feed baby while they are laying flat
- Ensure all caregivers feeding baby follow the same safe bottle feeding practices

NOTE: The side-lying position may be used in special circumstances. Your health care provider will provide information about this position should it be necessary.

How Much to Feed Your Baby

Baby's age	Minimum number of feeds in 24 HOURS	Amount PER FEEDING		Approximate Total Amount in 24 Hours	
		Ounces (oz)	Millilitres (ml)	Ounces (oz)	Millilitres (ml)
Birth to 24 hours	8	0.25 to 0.5 oz	2 to 10 ml	1.5 to 2 oz	40 to 60 ml
24 to 48 hours	8	0.25 to 0.5 oz	5 to 15 ml	2.5 to 4 oz	80 to 120 ml
48 to 72 hours	8	0.5 to 1 oz	15 to 30 ml	4 to 8 oz	120 to 240 ml
72 to 96 hours	8	1 to 2 oz	30 to 60 ml	8 to 16 oz*	240 to 480 ml*
4 to 7 days	8	1 to 2 oz	30 to 60 ml	10 to 20 oz	300 to 600 ml
1 to 4 weeks	8	2 to 3 oz	60 to 90 ml	15 to 25 oz	450 to 750 ml
1 to 6 months	8	3 to 5 oz	90 to 150 ml	25 to 35 oz	750 to 1035 ml

These volumes are ranges. Please follow the direction provided by your health care provider. Follow-up with your health care provider is important. Volumes are approximate (1 oz = 28.5 ml).

* Based on approximate per feeding amount and minimum number of feeds per day.

Cleaning Feeding Equipment

Feeding Tube (lactation aid or finger feeding) Used with Healthy Term Infants	
Human milk or Infant formula used	
<ul style="list-style-type: none"> • After each feed, fill a syringe with warm soapy water • Connect the syringe to the tube, and push the plunger of the syringe to run the soapy water through the tube • Repeat several times • Repeat with clean warm water a few times until the tube is rinsed well • After rinsing, draw air into the syringe by pulling back on the plunger in mid-air. Push this through the tube to clear the water out of the tube. Repeat several times • Store the tube in a clean container or bag • Replace the tube at least every 7 days or sooner if the tube becomes stiff, brittle or discolored <p>**If using a commercial supplementary feeding device, please follow the manufacturers instructions for cleaning and use**</p>	
CUP OR SPOON	
Human milk used	Infant Formula used
<ul style="list-style-type: none"> • Wash with hot soapy water, rinse well and leave to dry on the counter on a clean towel or cloth 	<ul style="list-style-type: none"> • Plastic cups or spoons are single use only if using infant formula For steel/glass cups or spoons: <ul style="list-style-type: none"> • Wash in warm soapy water and rinse well • Place in pot of water, cover pot, bring to a boil for at least two minutes • Allow to cool in covered pot until needed or place on clean cloth or towel on counter to dry • Follow manufacturer's instructions if using a sterilization unit or kit
BOTTLE AND NIPPLES	
Human milk used	Infant Formula used
<ul style="list-style-type: none"> • Wash with hot soapy water, rinse well and leave to dry on the counter on a clean towel or cloth 	<ul style="list-style-type: none"> • Wash in warm soapy water and rinse well • Place in pot of water, cover pot, bring to a boil for at least two minutes • Allow to cool in covered pot until needed or place on clean cloth or towel on counter to dry • Follow manufacturer's instructions if using a sterilization unit or kit

For more information

Visit www.smdhu.org/BreastfeedingHelp

Contact [Health811](https://www.health811.ca), 24 hours, 7 days/week. Call 811 (TTY1-866-797-0000) or via [live chat](#).

911 is always the first number you should call during emergency situations. If you're worried for your health or that of your child, call 911 or visit your nearest emergency room.



Tel: 705-721-7520
Toll free: 1-877-721-7520
www.smdhu.org
Your Health Connection

Dec 2024