

Feeding Therapy in the NICU

Keeping your baby safe and interested in feeding

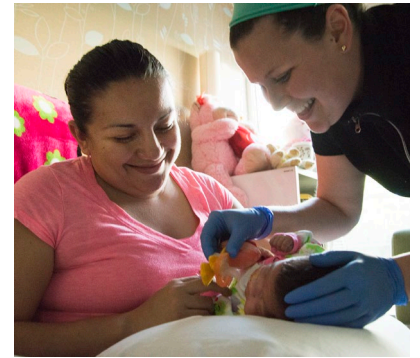
This handout explains how your baby progresses with both breastfeeding and bottle feeding.

How does a baby in the NICU “learn” to feed?

While your baby was in mom’s belly, they swallowed *amniotic fluid* (the fluid inside the uterus). This helped them practice swallowing while still in the womb. Now that your baby is born, you can help them build on the skills they have already started to use.

What are pre-feeding activities?

Pre-feeding activities are things you can do with your baby before they are ready to eat by mouth. These activities help your baby get used to the smell, touch, taste, and feel of eating before they are actually breastfeeding or bottle feeding. You can do these activities even when your baby needs respiratory support. Pre-feeding activities should be done during care times. (See *clustering care* on page 5 of the chapter “Getting to Know Your Baby in the NICU.”)



Pre-feeding activities help your baby prepare for feeding by breast or bottle.

Pre-feeding activities include:

- Keeping a *scent cloth* in your baby’s bed. A scent cloth is a piece of material that smells like mom. (See the section on “Smell” on page 4 of the chapter “Developmental Care in the NICU.”)
- Holding your baby skin-to-skin
- Holding your baby during tube feedings
- Giving oral care with breastmilk or sterile water
- Giving your baby a pacifier during care times or tube feedings
- Giving your baby tastes of milk on a pacifier or a clean finger
- Letting your baby “explore” at your breast, without eating

When will my baby be ready to eat by mouth?

Your baby will begin to show signs when they are ready to eat. These signs are called *feeding cues*. (See “Behavior Cues” on page 3 of the chapter “Getting to Know Your Baby in the NICU.”)

If babies are breathing well without respiratory support:

- They may start breastfeeding as early as 32 weeks of age.
- They may start bottle feeding as early as 33 to 34 weeks of age

Each baby is different and may start eating at different times. Your doctor may ask you to wait to feed your baby if your baby still needs breathing support, even if they are older than 32 to 34 weeks of age. If this occurs, you can keep doing pre-feeding activities with your baby.

Doctors sometimes allow babies to feed when they are on breathing support, if they are showing feeding cues and other signs that they are ready to eat. Nurses, lactation consultants, and feeding therapists will help you know when your baby is ready to eat by mouth.

To help your baby grow, we will keep feeding your baby with a feeding tube even after you start breastfeeding or bottle feeding. As your baby learns to feed, they won't need the feeding tube as much.

What do feeding cues look like?

When your baby is ready to eat, they may:

- Wake up before or during their care time
- Search for something to suck on, such as their hands, fingers, pacifier, or mom's breast
- Lick their lips or begin sucking

Breastfeeding in the NICU

Because your baby is in the NICU, they need support to breastfeed. Nurses, lactation consultants and feeding therapists will help you and your baby figure out the best position and breastmilk flow.

We have muscles around our head, neck, and mouth, just like other areas of the body. Babies in the NICU are still developing their muscle strength. This means they may need a nipple shield to help them stay latched to mom's nipple. As babies get stronger, they may not need the nipple shield to breastfeed.

Babies are also developing their ability to coordinate swallowing with breathing. Sometimes mom's breastmilk flows too fast for a baby to

manage. There are ways that moms can slow their milk flow, to better match their baby's skills.

To help slow the flow of breastmilk:

- Use a nipple shield
- Lean back or lie on your side while feeding
- Pump some of the milk before feeding your baby
- Try *pacing* while breastfeeding:

When pacing, you stop the flow of milk so your baby can breathe. To do this, remove your nipple from your baby's mouth and give them a break.

Bottle Feeding in the NICU

Babies can start bottle feeding between 33 and 34 weeks of age, if they are showing feeding cues. Nurses and speech pathologists will help you figure out which type of bottle works best for your baby.

If you have a specific bottle from home that you plan to use with your baby, please bring it to the hospital so we can make sure it is a good match. As babies learn to coordinate breathing and swallowing, we want to make sure that the milk flows at the right pace for them. If your bottle from home flows too fast, it may not be a good match for your baby at first. Your bottle might be used later, as your baby's feeding skills develop.

Here are some ways to help your baby feed safely while they are learning to eat from a bottle:

- **Use a side-lying position:** Place your baby on their side to bottle feed. This is similar to how you might hold your baby to breastfeed. When a baby is on their side, it helps slow the flow of milk and makes it easier for them to breathe while eating.
- **Reduce flow in the nipple:** Change to a different bottle nipple or fill the nipple only half full to help slow the milk flow. This makes it easier for your baby to coordinate. Some babies can handle a full nipple of milk, but others may not. Talk with your nurse and speech pathologist to find out what has worked best for your baby.
- **Try *pacing* while bottle feeding:** Tip the bottle down so no milk is in the bottle nipple, but do not take the nipple out of your baby's mouth. Pacing helps your baby stay organized. It also gives them a breathing break while feeding.

What is my baby telling me about eating?

- Signs that your baby enjoys eating:
 - Relaxed face and body
 - Eyes may be open or closed
 - Easy breathing
 - Active, strong sucking
 - Regular swallowing
- Signs that your baby may be stressed while eating:
 - Grimacing
 - Arms or legs waving or kicking
 - Fingers splayed out like a “stop” sign
 - Milk spilling out of their mouth
 - Tense body or bearing down
 - Holding their breath
 - Gulping or other “squeaky” noises
 - Gagging
 - Pulling away from the breast or bottle
 - Changes in their heart rate or breathing pattern

What can I do if my baby is showing signs of stress?

- Make sure your baby is well-supported while you hold them. You can also swaddle your baby. This helps them organize their body and keep their arms and legs calm.
- Give your baby a pacifier before offering them your breast or a bottle. This helps them “warm up” and prepare for eating. It may also help lessen sensitivity in your baby’s mouth and keep them from gagging.
- Slow the flow of milk, either by changing the flow rate through the bottle or breast, or by pacing your baby.
- Provide burp breaks if your baby seems uncomfortable.

Common Questions

Will using a pacifier interfere with my baby breastfeeding?

Using a pacifier helps your baby stay calm. It also saves their energy while they are in the NICU. Sucking on a pacifier is called *non-nutritive sucking*. It helps your baby get ready to breastfeed or bottle feed.

Will sucking on a pacifier make my baby too tired to breastfeed or bottle feed?

No. Non-nutritive sucking does not use as much energy as breastfeeding or bottle feeding. Sucking on a pacifier can also help organize your baby.

Can I ONLY breastfeed my baby?

This depends on you and your baby. Some things to consider:

- Can you be at the bedside throughout the day and night to offer your breast if your baby is awake and wanting to feed?
- How much milk do you have?
- How much does your baby need to grow?
- What are your baby's sucking and swallowing skills?

The NICU team will help you answer these questions.

If I start bottle feeding, will my baby still want to breastfeed?

Yes. Breastfeeding success is often related to:

- Introducing your baby to breastfeeding before bottle feeding
- Keeping up an adequate breastmilk supply
- Ongoing work with breastfeeding once home as baby matures

Breastfeeding helps bottle feeding and bottle feeding helps breastfeeding. Both ways of feeding help your baby build stamina and feeding skills that will improve their ability to breastfeed.

How do I know my baby is done eating?

When babies are getting too tired to feed, they will no longer look for the bottle or breast. Or, they may hold the nipple in their mouth without actively sucking. Your baby may purse their lips or push your nipple out with their tongue to tell you they are finished. Some babies need a "half time," where you allow them to rest for a few minutes to build up energy to complete their feed.

A feed should not last longer than 30 minutes. Babies start using too much of their energy if they feed for more than a half hour at a time.

Is it OK to tap or twist the bottle to get my baby to keep eating?

No. Doing this triggers your baby's response system to suck, whether they are ready to swallow or not. Your baby may start sucking, but if they're not ready for milk, it could be stressful or cause choking.

When will my baby's feeding tube come out?

The feeding tube stays in while your baby is learning to eat. As your baby starts to breastfeed or bottle feed, the amount they eat will be subtracted from what goes in their feeding tube. Most times, the tube is removed a few days before a baby goes home.

Does the feeding tube keep my baby from learning to eat?

You may wonder what would happen if we stopped using the feeding tube. You might expect that being hungry would help your baby "learn to eat." But, most babies in the NICU don't have the energy and strength it takes to learn to eat on their own, even if they are hungry.

The feeding tube helps us meet your baby's nutritional needs while they are learning to feed. With good nutrition, your baby will build strength and stamina. When they are strong enough, they will be able to eat for themselves and will no longer need a feeding tube.

Will I have to feed my baby this way forever?

No. But while your baby builds their feeding skills, they will still need your help.

Your baby will go home feeding how they are eating in the NICU. Before you leave the NICU, the nurses, lactation consultants, and feeding therapists will make sure you are prepared to feed your baby at home. As your baby gets stronger, they won't need as much help coordinating their swallowing and breathing.

Over time, you will be able to feed your baby as you would a typical newborn. Keep watching your baby for any signs that you need to change their feeding plan.

Questions?

Your questions are important. Talk with your NICU doctor or nurse if you have questions or concerns.

Neonatal Intensive Care
Unit: 206.598.4606