When to use cup feeding

- · Baby and mom are separated due to illness
- · Mom needs to rest painful nipples to give them time to heal.
- · Baby is not latching at the breast e.g. a very sleepy baby with a weak latch in the first three (3) to four (4) days of life.
- · To help preterm babies save energy and increase interaction and eye contact with parents.

Contact Information

PRHC Pediatric Outpatient Clinic Breastfeeding Clinic 705-743-2121 x 2735

References:

McKinney, C.M., Glass, R.P., Coffey, P. et al. Feeding Neonates by Cup: A Systematic Review of the Literature. Maternal Child Health J (2016) 20:1620.

Flint A. New K. Davies M. Cup feeding versus other forms of supplemental enteral feeding for newborn infants unable to fully breastfeed. Cochrane Database Syst Rev. 2016.

The UNICEF/WHO Ontario Baby Friendly Initiative www.bfiontario.ca

Cochrane Reviews www.cochranelibrary.com

REMEMBER THESE **GUIDELINES**

- · Feed your baby. If your baby is not latching, feed her by cup, spoon, syringe or eye dropper.
- · Protect your milk supply by pumping or manually expressing eight (8) or more times per day.
- · Enjoy your baby and spend a lot of time together skin-to-skin.
- · Follow up. Within one (1) to two (2) days of leaving the hospital, follow up with a Lactation Consultant, community breastfeeding support worker, LaLeche League Leader, Public Health Nurse, or Midwife. It will take time and patience, but follow these guidelines and your baby should soon be latching.

After 72 hours, your milk supply will start to increase and your baby will need more than 5 - 10ml. Most likely, your baby will now be breastfeeding. In some circumstances, if your baby is still not latching or requires supplementation, there are other methods that can help.

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What is cup feeding?

Cup feeding is a way of feeding baby using a small cup (usually a medicine cup) when a new baby is having trouble latching. Cup feeding is less likely than bottle feeding to confuse the baby as he learns to breastfeed.

Cup feeding is most effective in the first three (3) to four (4) days with small amounts of expressed colostrum or breastmilk (5 - 10ml). (If used much longer, the baby can start favouring the cup over the breast).

Why choose cup feeding?

When the goal is to breastfeed the baby, bottles and pacifiers should not be used with full-term babies as they may cause confusion in the early days.

Some babies have difficulty learning the appropriate mouth action of breastfeeding after birth. Cup feeding helps the baby learn to bring her tongue forward, an important skill for breastfeeding.

Cup feeding has been shown to significantly improve the number of exclusively breastfeeding babies leaving the hospital, compared with alternative feeding methods.

How to cup feed your baby

- · Start when your baby is calm and awake.
- **Wrap** the baby to restrain his hands so he can't knock the cup with hands.
- Hold baby in an upright sitting position on your lap supporting her head and neck.
- **Put** a bib or towel under your baby's chin to catch the dribbles.
- **Rest** the medicine cup lightly on the lower lip.
- Gently tilt the cup allowing baby just a tiny sip. Somtimes babies pull their head back and then come forward, wanting more.
- **Tip** the cup just enough to allow her to sip some more. She will start to swallow quickly in a rhythm or continue to lap it up with her tongue.
- Do not take the cup away when the baby pauses, unless he pulls away. Let him set his own pace, allowing him to breathe after swallowing.
- · Burp your baby afterwards.

Take note

- Sometimes babies will quickly swallow, just as they do when breastfeeding as the milk lets down.
- There will be a certain amount of spillage during cup feeding.
- · You and your baby will improve with practice.
- Don't be afraid to ask for more help if you feel uncomfortable. There are other methods of supplementing that we can show you.
- To protect your milk supply when your baby is not yet latching, start manually expressing or pumping with an electric pump eight (8) or more times each day. (Read pamphlet "When your baby will not latch"). Your Lactation Consultant or Nurse can help you with this process.

