

Module 1C - Questions



Can I get a tattoo
while I am breastfeeding?



Module 1C - Questions



Can I eat spicy foods
while breastfeeding?
Will it make the baby
gassy or mean?



Module 1C - Questions



Can I breastfeed
after the baby has teeth?



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My breasts are large-
could I suffocate the baby
while breastfeeding?



Module 1C - Answers



You can eat spicy foods. It is true that some babies cry or fuss after breastfeeding if the mother eats spicy hot foods BUT don't stop any foods until you see how your own baby reacts. The baby may get gas (which is normal) from some foods. What you eat flavors your milk but will not change your baby's personality (does not make him or her mean). Also, remember babies cry for lots of reasons - crying does not mean there is something wrong with your milk!



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Yes you can- it will not affect your milk or milk supply. It makes common sense not to get the tattoo on your breast or on areas where you are skin-to-skin with the baby while breastfeeding so you don't get skin irritation.



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No. When your baby latches on to the breast in the way that is comfortable for you, the baby's nose protects his or her breathing and lets air in and out no matter how big the breast is. But remember that a rollover accident while sleeping can suffocate the baby so you need a safe sleep place for the baby. The baby can sleep right next to you BUT in a Pac-N-Play or bassinette or even a dresser drawer.



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Yes. Babies can breastfeed and not bite because they use their lips and tongue and jaws to pump the milk. If the baby does bite while breastfeeding, take him or her off the breast right away and say: "No, ouch!" It is not recommended to bite back or pop the baby. Your baby is smart and will soon learn that biting is not part of breastfeeding. You can offer a biting biscuit (maybe the baby is teething) or a play time instead (maybe the baby is just saying "done").



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What is “let-down” anyway?



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What makes a woman have a lot of milk? Is it breast size or areola size?



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If I have postpartum depression, does it change my milk?



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What is colostrum ?



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Breast size and breast shape do not have anything to do with amount of milk. Milk amount depends on the baby sucking well and often at the breast. To make a lot of milk feed often (every 2-3 hours) and let the baby empty the breast as much as possible (nurse till he/she drops off around 15 minutes on each side). Giving formula gets in the way of making milk because the baby's sucking does not get a chance to "tell" the breast how much milk he/she needs.



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That is when a hormone called oxytocin (say "Ox- ee - tow -sin") acts to squeeze the milk pillows in the breast and let the milk come spurting out at the beginning of nursing. Then you will hear the baby gulping and may feel "pins and needles" in your breast. The baby sucking on the breast, or any "reminder" about the baby (smell, hearing a cry) start oxytocin. (Pitocin is what the doctor gives; oxytocin is what your body gives.)



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Colostrum (Co- LOS-trum) is the very first milk your breast makes in the first 2-5 days. It is small in amount (1-2 teaspoons per feeding- really!) and all he or she needs to drink, and is very powerful in immune protection for the baby. Some people call it the first immunization. It might look like butter not milk, but do not let that worry you. Giving your baby colostrum is a great gift. (Colostrum is not cholesterol- many people mix up the two words).



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No. Your milk is good for your baby even if you are depressed. The milk does not change depending on your mood. It is really important to get help if you think you might be depressed. If your mental health worker says you should take medicines, there are several (Zoloft™ for example) that are FINE with breastfeeding, and of course counseling is safe with breastfeeding.



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Everyone talks about the areola
and I don't know what that is.

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What are all these
breastfeeding "holds"?
Can I see a picture?

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Can every woman breastfeed?

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What is "milk coming in"?

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Yes- see the hand out. There is football, cradle, cross-cradle and side-lying holds (put the baby back in his/her sleep place when done). Some women have nursed with the baby sitting upright on their leg. There is not a “wrong” way- just make sure the baby’s knees are facing you.



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It is the darker colored skin around your nipple. Some people say “Ah- REE- oh-la” and others say “Ah – ree- OH-la” and either is correct. The size of the areola can be large or small- women are different and the size does not have to do with latch or milk. Usually a comfortable (for you) latch includes much of the areola in the baby’s mouth.



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Really your milk is already there, it’s just that about 2-5 days after you deliver, your milk “factory” suddenly makes WAY more milk- up from about 2 ounces per day to about 16 ounces per day. That is why some women get engorged (breasts so full milk cannot come out without some help, often best done with hand expression). The “milk coming in” is often slower or delayed (waits a few more days) if you had a slightly premature baby, or diabetes, Cesarean section, pitocin for labor or were very sick. Keep the faith – get help from the nurse and begin pumping if recommended.



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In general YES. Breastfeeding is “natural” but most women need some help. If you have had breast surgery or if you have inverted nipples (nipples go back in not out) you need to get help from a lactation counselor. Women who are on methadone can breastfeed, but any woman who is using street drugs should not breastfeed (even more importantly she needs HELP). If you have HIV you will also be asked not to breastfeed.

