



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

***Early breast feeding  
In the first hour after birth***



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# ***Golden Hour***



*Delivery and the immediate postpartum period  
is a vulnerable time  
for both the mother and infant*

# *Elements of golden hour interventions*

Delayed cord  
clamping

Skin to skin  
contact

Breastfeeding

Providing Evidence-Based Care During the Golden Hour  
Jennifer L. Neczypor, 2017

# *Delayed cord clamping*



WHO: clamping the umbilical cord 1-3 min after birth

# ***Skin-to-skin contact***

The first hour after birth are crucial for mother and baby in terms of:

Their **wellbeing**,

The opportunity to **bond** with each other and,

The **first breastfeed**.

## ***Skin-to-skin contact***

Promotes all three of these things.

# ***Ten steps to successful breast feeding***

**Step 4. Help mothers initiate breastfeeding within a half-hour of birth**

A joint WHO/UNICEF statement (1989)

## ***New interpretation of step 4 in the revised criteria (2006)***

*“Place babies in skin-to-skin contact with their mothers immediately following birth for at least an hour and encourage mothers to recognize when their babies are ready to breastfeed, offering help if needed.”*

## ***Skin-to-skin contact***

An important point to note is that Step 4, while referring to the ‘initiation of breastfeeding’, carries no stipulation that the baby must feed.

There is no need to hurry either the baby or the mother or to try to force the baby on to the breast – indeed, this may prove counter-productive and hinder the baby’s ability to attach effectively later on.

If there are concerns about the baby’s need for feed, the mother can be encouraged to express some colostrum to give to him.

# *Skin-to-skin contact at birth and early breastfeeding*



Direct skin-to-skin contact with mothers

Immediately after delivery

Until the first feeding is accomplished and encouraged  
throughout the postpartum period.

# ***Benefits of skin-to-skin contact***

- Helps maintain **temperature**
- Facilitates metabolic adaptations especially **sugar levels** and **acid-base balance**
- Results in **less crying**
- **More quiet sleep periods**
- Serves as a **pain analgesic**
- Causes oxytocin release in the mother and **facilitates bonding**
- Lowers stress levels in mothers and baby
- Improves immediate and long term breastfeeding success

# Breastfeeding: The 1<sup>st</sup> Hour

Early initiation and  
exclusive breastfeeding  
for six months can

# Save

more than



# ONE

# 1,000,000 babies!

# World Breastfeeding Week (WBW) 2007

# دستور العمل کشوری

برقراری تماس پوست با پوست مادر و نوزاد

و

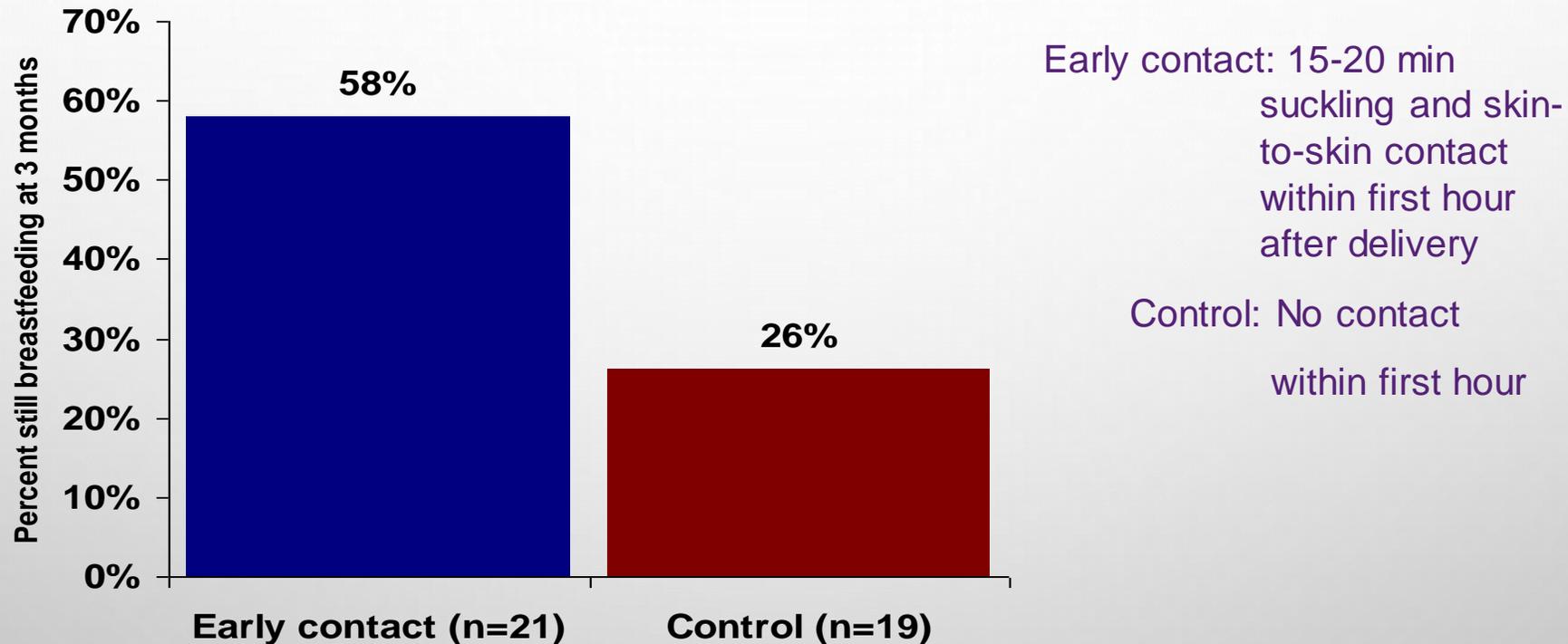
تغذیه با شیر مادر طی ساعت اول تولد

مصوب کمیته کشوری ترویج تغذیه با شیر مادر اردیبهشت ماه 1392

# Early initiation of breast feeding *why?*

- Increases duration of breastfeeding
- Allows skin-to-skin contact for warmth and colonization of baby with maternal organisms
- Provides colostrum as the baby's first immunization
- Takes advantage of the first hour of alertness
- Babies learn to suckle more effectively
- Improved survival & developmental outcomes

# *Impact on breastfeeding duration of early infant-mother contact*



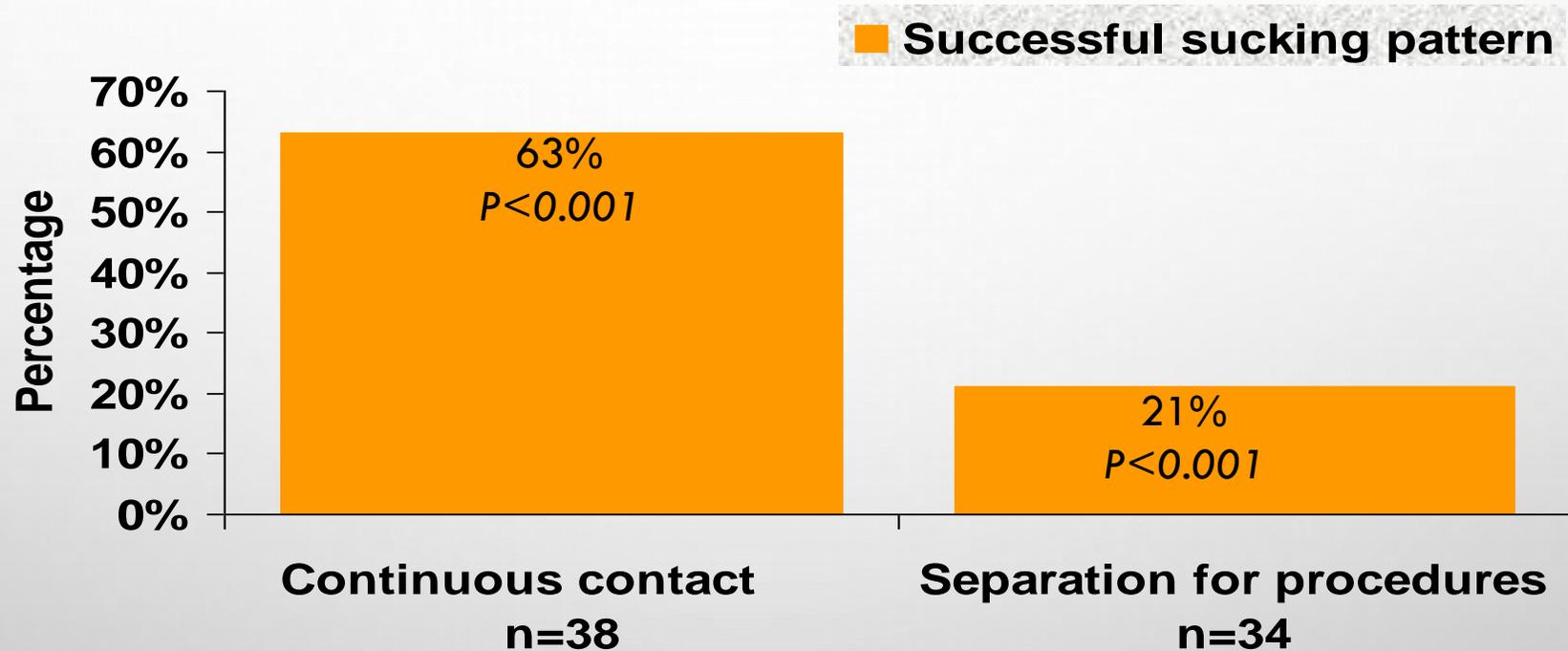
Adapted from: DeChateau P, Wiberg B. Long term effect on mother-infant behavior of extra contact during the first hour postpartum. *Acta Paediatr*, 1977, 66:145-151.

## *Composition of human colostrum and mature breast milk (per litre)*

Constituent	Measure	Colostrum (1-5 days)	Mature Milk (>30 days)
Total protein	G	23	9-10.5
Casein	mg	1400	1870
$\alpha$ -Lactalbumin	mg	2180	1610
Lactoferrin	mg	3300	1670
IgA	mg	3640	1420

From: Worthington-Roberts B, Williams SR. *Nutrition in Pregnancy and Lactation, 5th ed.* St. Louis, MO, Times Mirror/Mosby College Publishing, p. 350, 1993.

# *Effect of delivery room practices on early breastfeeding*



Adapted from: Righard L, Alade O. Effect of delivery room routines on success of first breastfeed. *Lancet*, 1990, 336:1105-1107.

# Risk of neonatal mortality according to time of initiation of breastfeeding



Dr.Ravari

*Pediatrics 2006;117:380-386*



***Early initiation of breastfeeding  
for the normal newborns  
how?***

- Place baby on mother's chest
  - Let baby start suckling when ready
  - Do not hurry or interrupt the process
  - Delay non-urgent medical routines for at least one hour
- 

# ***Normal progression of breastfeeding***

In the first hours and days postpartum, the mother and baby learn to breastfeed together.

Normal breastfeeding progresses through two initial phases:

first phase, called *self-attached breastfeeding*, the baby latches to the breast without assistance and self-attaches to the breast using the stepping– crawling reflex

Second phase, called *collaborative breastfeeding*, the mother and baby work together to achieve the latch and feeding.

# *The magical hour*



*Nine instinctive stages*

# A baby's 9 instinctive stages the breast in the first hour of life

**Birth cry**

**Relaxation** when there are no mouth movements and hands are relaxed

**Awakening** when small twitches and movements are seen in the head and shoulders

**Activity** where mouth and sucking movements and rooting reflexes begin and increase

**Crawling** the baby approaches the breast with short periods of crawling types of movements

**Resting** in between periods of activity

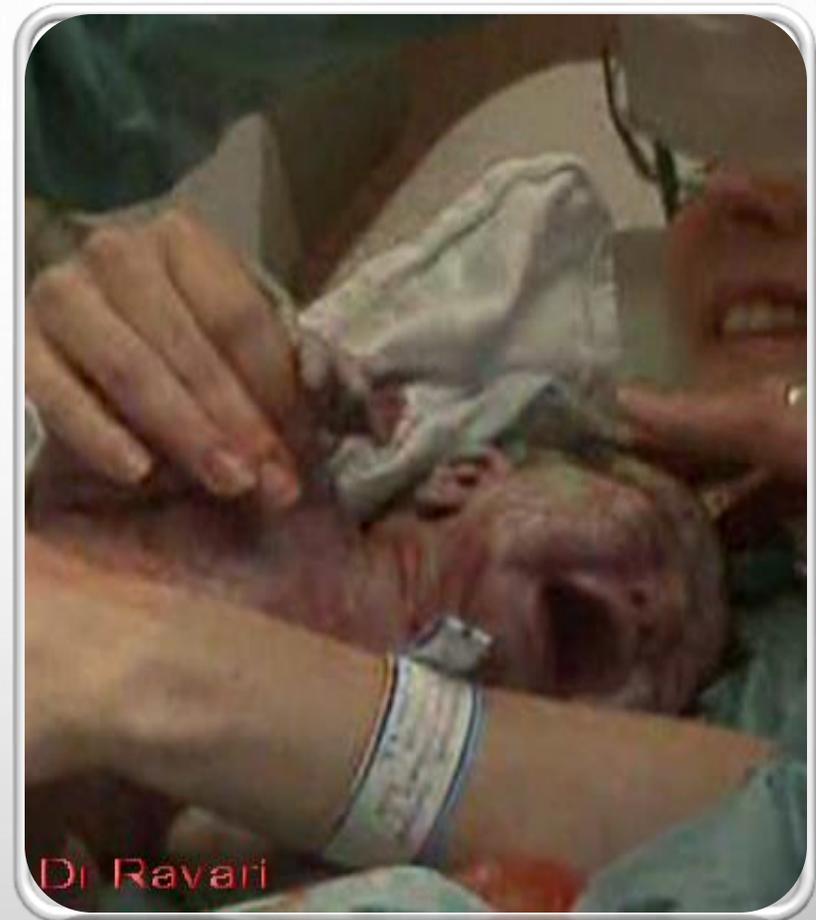
**Familiarization** where the baby becomes acquainted with the breast by liking and touching

**Suckling** where the baby begins to feed and finally

**Sleeping** after the baby has satisfied its natural desire to suckle

# *1. Birth cry*

Occurs immediately after birth as the baby's lungs expand but usually ends abruptly when the baby is placed onto the mother's chest



## ***2. Relaxation***

Begins when the birth cry stops and usually lasts 2–3 minutes during which the baby is very quiet and still.

When there are no mouth movements and hands are relaxed



### ***3. Awakening***

This stage usually begins  
about 3 minutes after birth

Begins with  
small head & shoulders movements,  
as the infant opens his eyes and  
shows some mouth activity.



## ***4. Activity***

This stage usually begins  
about 8 minutes after birth

the baby has

more stable eye opening,

increased mouthing & suckling

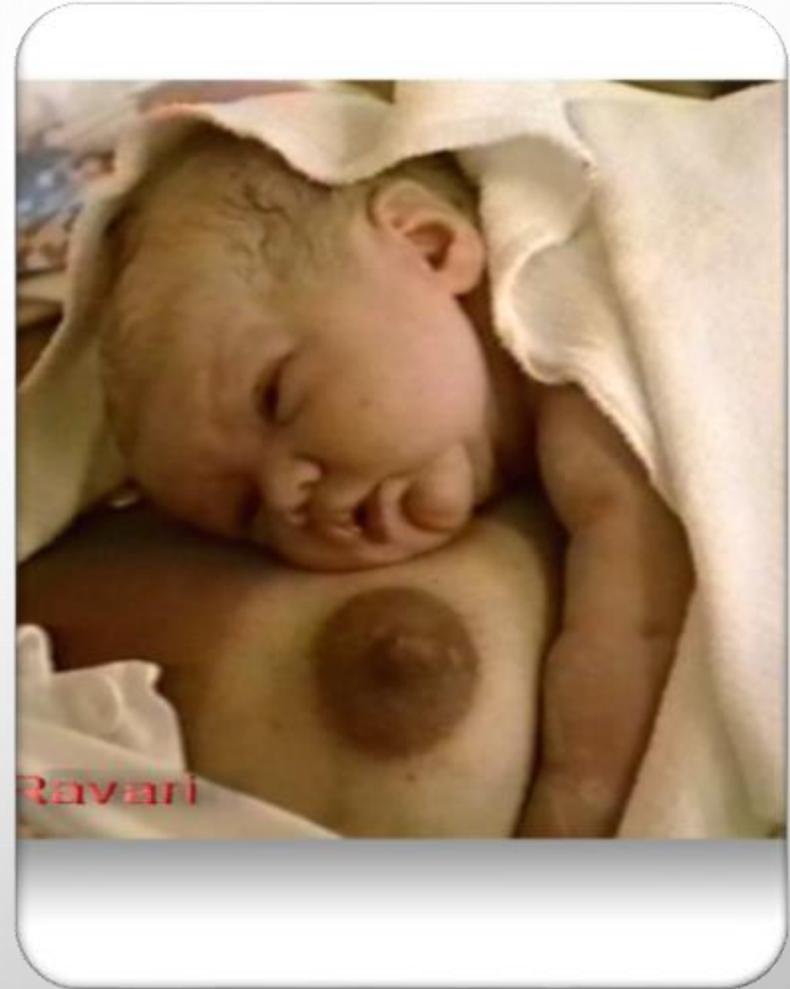
movements & often some rooting.



Dr Ravall

## *5. Resting*

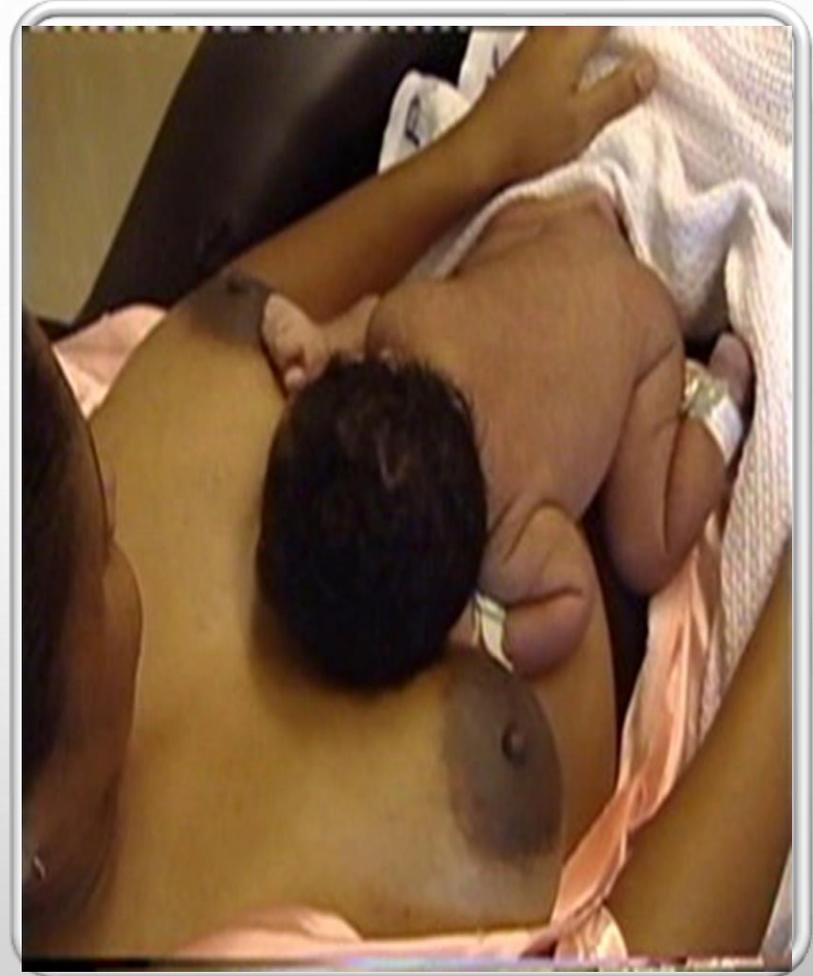
Can occur at any time  
between the other stages



## *6. Crawling*

The baby makes short pushing exertions with his feet or slides his body towards one of the mother's breasts.

This stage usually begins about 35 minutes after birth



## ***7. Familiarization***

After reaching the breast, familiarization begins.

This stage usually begins around

**45 minutes after birth &**

**may last up to 20 minutes**

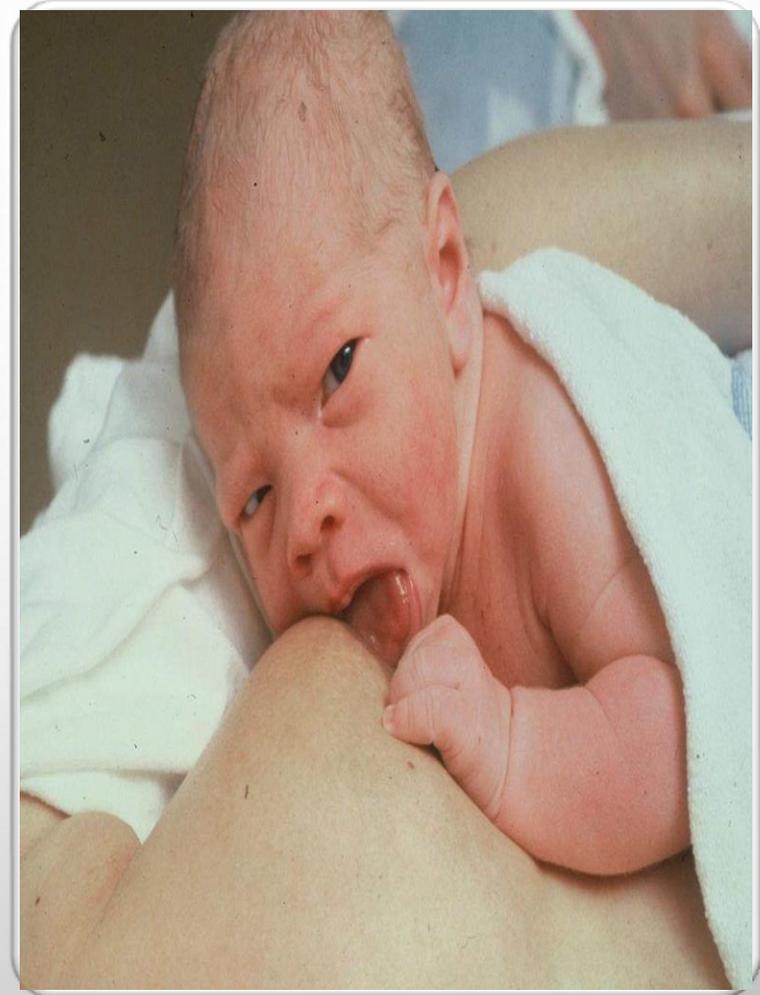
while the baby becomes acquainted with the nipple by

**licking, touching and massaging.**



## *8. Suckling*

After adequate familiarization with the new environment and mother's nipple, the newborn **opens his mouth wide**, cupping the tongue which is now low in the bottom of the mouth, grasps the nipple in a correct latch and begins to suckle. This usually occurs about **an hour after birth**.



***First latch-on  
is critical!***

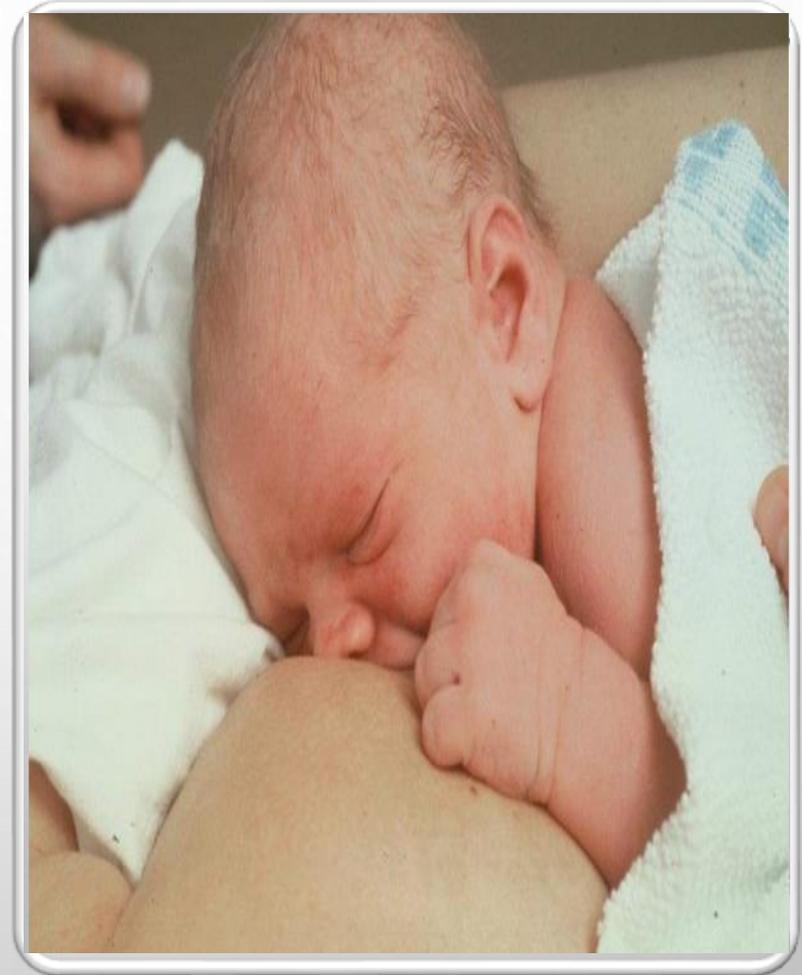
**Latch-on**

**The heart of successful  
breastfeeding**



## ***9. Sleeping***

Follows usually between 1.5 and 2  
hours after birth



# *Breastfeeding after a cesarean*



# ***Breastfeeding after a cesarean***

- Babies may be **drowsy & lethargic**,
- This doesn't mean that breastfeeding won't be successful, as soon as they are **fully conscious & alert**, they can begin breastfeeding
- The baby may need some extra encouragement and stimulation to stay alert during feedings
- **Urgent cesarean** births have been associated with delayed milk production, possibly related to the stress involved
- Often in elective cesareans, regional anesthesia is an option and mothers are able to breastfeed sooner

## *Immediate or early skin-to-skin contact after a caesarean section*

- Increase breastfeeding initiation,
- Decrease time to the first breastfeed,
- Reduce formula supplementation in hospital,
- Increase bonding and maternal satisfaction,
- Maintain the temperature of newborns and
- Reduce newborn stress.

# *Breastfeeding after Spinal or Epidural cesarean*



1. نوزاد را از طرف زیر بغل یا شانه مادر در تماس پوست با پوست مادر قرار دهید طوری که قفسه سینه نوزاد در تماس با زیر بغل و قفسه سینه مادر و دهان نوزاد در تماس با نوک پستان مادر باشد

## *Breastfeeding after Spinal or Epidural cesarean*



سزارین با بی حس ناحیه ای و تماس پوستی  
مورب در عرض قفسه سینه مادر در اتاق عمل

2. نوزاد را به طور مایل و دمر به روی قفسه سینه مادر بگذارید به طوری که ضمن تسهیل تماس چشم در چشم مادر و نوزاد، سرش در نزدیک پستان طرف مقابل باشد و دهان نوزاد در تماس با نوک پستان مادر قرار گیرد.

# ***Integrated delivery care practices for long-term maternal and infant nutrition, health & development***

- *Delayed umbilical cord clamping,*
- *Early mother to newborn skin-to-skin contact, and*
- *Early initiation of exclusive breastfeeding,*

*Are three simple practices that,  
in addition to providing immediate benefit,  
can have long-term impact on the nutrition and health of both mother and child.*

*WHO and pan american health organization, 2014*



***Thanks for your attention***