Breastfeeding and Weight Loss in Newborns Transcript

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Newborn Weight Loss Basics

Hello, it's Dr. Ott with the Doc and the Fam. I'm here to share with you some tips about breastfeeding and weight loss in your newborn. It's important to know at the beginning that all newborns are likely to lose some weight.

Up to 10% is considered normal. What? 10%, I know it is a lot. If you're not prepared for that, then your new born losing weight can be quite distressing.

So I am telling you hopefully ahead of time. 10% normal, more than 10%. We get a little bit nervous about making a feeding plan, talking about supplementation, et cetera.

Lactation Support and Feeding Frequency

If it is your first time, if you had a C-section or if did not have a great supply, you may have some anxiety about breastfeeding, about is my baby getting enough, etc.

We have incredible expertise in our lactation consultants. So I invite you to avail yourself of the lactating consultants around you in your community.

Um, get their hands on your baby, let them look at your latch, Let them Look at Your Angle. When I was breastfeeding my daughter, I Was amazed at how just the tiniest little adjustment from this expert Lactation consultant would make my experience go from a very painful latch that was kind of stressful.

to like, Oh, this is fine. I could do this all day. So big, big difference. The way we try to get ahead of baby's weight gain is we make sure that we're feeding every three hours.

And I count from the beginning of a feed, not the middle, the end of the feed. We're like if we started a feet at 8 AM, we are going to start the next one at least by 11 AM.

All right. If they want it sooner, they're giving you cues like smacking and putting their fist in their mouth and kind of looking around for it like that.

Those are cues. You're going to be reading those cues for that baby. They are saying, I'm ready to try to eat again. Okay, so doesn't matter how long you feed.

I mean, it kind of matters, but like anything from 15 to 30 minutes is probably normal.

Managing Pain, Supply, and Diaper Output

Beyond that, you might be getting used as a human pacifier or it's possible that your baby might not be transferring milk super efficiently. So keep that in mind too.

If the latch is painful, we have tools for that. We have nipple shields, which are silicone guards to help protect the skin that can be cracking. at the nipple, that is really important to know.

Also, if you do have nippled pain and cracking, they will always offer you lanolin. There's also out there on the market by a company called Baby Carrots, there is something called Calendula Nipple Whip.

That was my favorite topical product for cracked nipples. Such a game changer. If you have supply problems and you really want to augment your supply, you can talk to your provider about getting you Domperidone.

It's not actually FDA approved in the US, but it is approved and Canada. And you could have that risk benefit conversation with your. No, I am not prescribing.

This is a doc and the fan. So I'm giving information so that you. Be prepared to ask the best possible questions. for the best possible outcomes for you and your family.

So let's see, what else do we wanna say about breastfeeding? Every three hours, we're gonna look for them to be satisfied and we gonna to look to how many voids they're having or how much wet diapers, right?

We want them be having as many wet diaper as they are days old. That is a really good sign that they getting enough.

Recognizing and Treating Tongue Tie

If they at least one wet diaper in the first 24 hours adequate, atleast two, adequate in the second day and so on. If it's more than that, high five. You're doing great.

Um, this is, kind of just our rule of thumb. When they're born, their little tummies are about the size of a big walnut. So there's not a lot of space to fill up in there really.

And I want to share also that if it continues to be a painful latch, I wanted you to look for these signs that your baby might have tongue tie. The fancy word for tongue tie is ankyloglossia, and it's when the frenulum, that little piece of tissue under your tongue to the floor of your mouth, is just tight.

And a sign that it is tight is that when you stick out your tongues, there's a little bit of a heart shape there or kind of like a cleavage, or the baby can't actually stick its tongue out past the lower dental ridge.

Okay, that restriction has some significant implications, and we can fix it very easily, even in the nursery, with the quickest little snip of that tissue.

The most gratifying thing, well, maybe not the most, but one of the very gratified things I do in a nursery is help babies who have tongue tie to feed better.

And the mom will be like, oh my gosh, this was 100% easier, it was so much better! and we're helping relieve stress, emotional burden, we are helping baby feel comfortable sooner, all the things.

So if your baby has a tongue tie, early intervention is better. It's just important to know about it because not everybody does. I hope that helps you and I'm sure there will be more breastfeeding videos along the way.