



PATIENT INFORMATION

# DIABETES AND FEEDING YOUR BABY



A midwife will have a conversation with you about feeding your baby. Ask about the **Mothers and Others Guide Magazine**.

## ***HOW CAN GIVING MY BABY BREAST MILK HELP ME AND MY BABY?***

### **Health Benefits for your baby**

After birth it may take a while for your baby to regulate his own blood sugar effectively. Your breast milk will help baby to do this.

Breastfeeding reduces the risk of gastroenteritis, ear infections, and chest infections, allergic reactions such as asthma, eczema, cow's milk protein allergy, urinary infections, childhood leukemia, SIDs or cot death, obesity.

Research shows that breast fed babies are less likely to develop diabetes in childhood. It is possible that this is because the cow's milk protein in formula milk triggers the development of diabetes in children who are susceptible to it.

### **Health Benefits for mothers**

Breastfeeding reduces the risk of breast and ovarian cancer, post-natal depression and may protect against osteoporosis.

Weight control is important for long term health in diabetes. Breastfeeding may encourage loss of the weight gained during pregnancy (even though you will need to eat more). Remember to reduce your food intake as you wean your baby as baby has less breastfeeds.

## ***PREPARING FOR BREASTFEEDING YOUR NEW BABY***

### **Expressing colostrum**

Colostrum is the first milk you will produce for your baby. It may be useful to have some extra colostrum available if your baby needs extra help regulating his blood glucose initially.

A midwife will discuss hand expressing colostrum with you and, if you wish, you may start to do this after 36 weeks. Your midwife will give you the equipment you need to store your colostrum safely in the fridge/freezer until your baby is born. You should label the colostrum with **your name, date and time** of expression.

Express as often as you want to. But we would recommend at least four times a day. The amount you are able to express will vary, collect it all. **EVERY DROP COUNTS**.

**REMEMBER TO BRING IT WITH YOU TO HOSPITAL WHEN YOU COME IN FOR THE BIRTH** - keep it frozen using an ice pack.

A Useful video to watch on how to hand express can be found here;

[www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeedingresources/hand-expression-video/](http://www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeedingresources/hand-expression-video/)

### ***WHAT HAPPENS ONCE MY BABY IS BORN?***

It is very important that your baby has **skin to skin contact** with you after birth; this keeps your baby warm and encourages him to feed.

Early and frequent feeding will help to stabilize your baby's blood glucose.

Midwives will monitor your baby's glucose before each feed until it is stable. Your baby's blood glucose will be much lower than yours (above 2 mmols is normal for a baby). During this time continue to breastfeed him often (at least 8 times a day to stimulate your supply).

### ***WHAT HAPPENS IF MY BABY DOES NOT WANT TO FEED RIGHT AWAY?***

Don't worry, not every baby is interested in feeding straight after birth. We will give baby your colostrum on a spoon or in a cup until he is ready to breastfeed. You can help by continuing to hand express colostrum to stimulate your supply.

Some babies need to be looked after in the neonatal unit. You will have unrestricted access to be with your baby and will be given support to express breast milk so that it can be given to your baby.

## **DIABETES CONTROL AND BREASTFEEDING**

### **Can I breastfeed if I am taking tablets for type 2 diabetes?**

Yes you can most oral hypoglycemic's (tablet treatment for diabetes) can be taken whilst breastfeeding or you may need to continue on insulin. Ask your doctor for advice.

### **Will I need to change my insulin dose?**

Type 1&2- After the birth your insulin requirements will reduce back to your pre pregnancy doses. You may find you need considerably less than before your pregnancy, whilst you are breastfeeding.

The dose you will require postnatally will be recorded in your antenatal notes. It is important to monitor your blood glucose levels (4x daily) and ask your diabetes specialist nurse for advice if needed. Insulin is safe while breastfeeding.

**Gestational diabetes** – Stop all medication when you have had your baby.

### ***HOW DO I AVOID HYPOS WHILST BREASTFEEDING?***

Breastfeeding uses more calories than being pregnant so you will have to

Increase your intake of food in order to avoid hypos. Mothers with type 1 diabetes may need an extra 40-50g of carbohydrate daily. This could be from an extra pint of milk plus 1-2 extra slices of bread or pieces of fruit. This should be spread throughout the day but remember to increase your bedtime snack.

Always eat something before feeding. This is especially important at night time feeds.

Keep a drink and snack handy for while you are feeding, especially if the baby is slow to feed.

Low blood glucose can decrease the amount of milk produced. Increase your blood glucose levels by eating more before making a decision to decrease your insulin.

### **Useful Phone numbers and names**

Diabetes Specialist Nurse \_\_\_\_\_

Diabetes link midwife \_\_\_\_\_

Infant Feeding Advisor \_\_\_\_\_

Dietitian \_\_\_\_\_

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

## **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

## **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

## **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

## **How to contact PALS:**

**Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PET@nhs.net](mailto:wah-tr.PET@nhs.net)**

## **Opening times:**

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.