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Important:

- A feeding tube is usually a **temporary** way to feed a baby
- In hospital, use a clean feeding tube and syringe every 24 hours.
- At home, check feeding tube before each use.
 Use a clean feeding tube and syringe every 3-4 days.
- There are professional devices available-check with your local pharmacy.

The first milk choice is your own expressed breast milk.

If artificial baby milk (formula) is used discuss the possible health risks with your health care provider.

Stay in touch with your appropriate healthcare provider if you are breastfeeding with a feeding tube.

Breastfeeding with a Feeding Tube

This method only works if baby is latching well and should be used only <u>after</u> instruction by a qualified caregiver.

Why is a feeding tube used?

- To give the baby extra milk while breastfeeding
- To keep the baby nursing and teach baby to stay latched at the breast.

Getting Ready

- Wash your hands
- Gather the supplies:
 - -expressed breast milk or formula at room temperature
 - -15" or longer #5 French feeding tube
 - syringe or container
 - -tape
 - -syringe to clean feeding tube

Using the Feeding Tube with Syringe

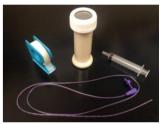
- Hold the tip of the syringe in the milk
- Pull back on the plunger to fill the syringe with milk
- Remove any air from the syringe by:
 - -pointing the tip of the syringe upward
 - -pulling back on the plunger to draw milk from the tip
 - -pushing the plunger upwards until the air is pushed out and milk fills the end of the tip of the syringe
- Attach the syringe to the large end of the feeding tube
- Push milk through the feeding tube to fill it with milk

Using the Feeding Tube with a Container

 Place the large end of the feeding tube into the container below the level of the milk. You may want to use a longer feeding tube for this method. Hold in place with tape or by placing the tube through an enlarged hole if using a bottle.



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Breastfeeding Committee

for Saskatchewan

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For further information contact:

Local Public Health Nurse

International Board Certified Lactation Consultant (IBCLC)

Local breastfeeding support Group

Saskatchewan HealthLine 811

References:

Genna, C. (2008). Supporting sucking skills in breastfeeding infants. Sudbury, Mass.: Jones and Bartlett.

Mohrbacher, N., & Stock, J. (1997). *The breastfeeding answer book* (Rev. ed.). Schaumburg, Ill.: La Leche League International.

Newman, J., & Pitman, T. (2014). Dr. Jack Newman's guide to breastfeeding (Rev. & updated ed.). Toronto: HarperCollins.

Positioning Method 1

- Sit comfortably
- Tape or hold the other end of the feeding tube onto your breast so the tip of the feeding tube is at the end/tip of your nipple
- Latch baby onto your breast in any feeding position your prefer

Positioning Method 2

 While baby is latched at the breast, slip the feeding tube into the corner of the baby's mouth, aiming toward the roof of the mouth.

Feeding the Baby:

- If baby needs a bit of encouragement to suck, use breast compression. It may help to slowly push the syringe plunger, or slightly raise the container, to give baby a few drops of milk
- When the baby's suckling slows down at the breast, push syringe plunger slowly. **DO NOT** press the plunger faster than baby can easily suckle and swallow. When baby stops suckling, stop pressing the plunger (most babies are able to draw the milk without pushing the plunger).

Cleaning the Feeding Tube

In the Hospital:

• Use a clean feeding tube and syringe every 24 hours

At Home:

- Take the syringe apart
- Wash (**do not boil**) the tube and syringe with hot, soapy water (mild liquid hand soap)
- Use the syringe with hot water to rinse the inside of the tube by attaching the tube to syringe
- Push air through the tube with syringe and hang to dry
- Rinse syringe well and place on a clean dry cloth and allow to air dry
- Store the tube and syringe in a clean container
- Use a clean feeding tube and syringe every 3-4 days