

nicu Family News



Helpful Pumping/Breastfeeding Tips

If your baby was born early, you may be feeling too overwhelmed and concerned for your baby to think about breastfeeding or pumping. However, your breast milk can provide important health benefits for your premature baby. Therefore, even if you had not previously planned to breastfeed, it is important now for you to consider expressing your milk to be used as part of your baby's treatment plan. Your actions in the early days/weeks after your baby's birth are the key to establishing your milk supply. The following tips will provide you with some guidance:

- It is important to start pumping as soon as possible within 24 hours after delivery, ideally within the first 6 hours.
- It is important to pump at least 8 times every 24 hours during the first couple of weeks. On average, you should plan to pump every 2-3 hours during the day and every 3-4 hours at night/overnight.
- You should pump each breast for about 15 minutes each time you pump.
- You can save time by pumping both breasts at the same time (called double pumping). You might want to consider using a special bra designed to hold the pumps in place so that your hands are free while pumping. These can be purchased at the Women's Health Education Office in the 3rd floor lobby of the hospital (973-322-5360).
- If pumping is painful even on the lowest pump setting, talk to one of the lactation consultants or nurses about trying larger flanges -the part of the breast pump that fits directly over the nipple and areola, the colored part around the nipple.
- You can increase your milk production by seeing, smelling or even just thinking about your baby. Consider pumping while near your baby, after seeing your baby (in person or a photo), or while smelling their blanket or clothing. Having skin-to-skin contact with your baby during Kangaroo Care in the unit can also increase milk production.
- Pumping more frequently is another way to increase milk supply.
- Try not to take any days off from pumping. If you stop pumping, even for a couple of days, it can be very difficult to return to previous milk production levels.

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The NICU Family News is produced by the Saint Barnabas Medical Center (SBMC) Neonatal Intensive Care Unit (NICU) Family Advisory Council (FAC). It is designed to provide you with information we hope you will find useful during and after your family's stay in the NICU.

DID YOU KNOW...

... pasteurized donor breast milk has never been linked to the transmission of any disease? You can find out more about donor milk by reading Dr. Kamtorn's interview on the next page and/or going to <http://hmbana.org>.

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SAINT BARNABAS
HEALTH CARE SYSTEM
Saint Barnabas Medical Center



Interview with:

Kamtorn "Dr. Kamtorn" Vangvanichyakorn, M.D., F.A.A.P.

**NICU Clinical Director and Director of Infant Apnea Program,
Saint Barnabas Medical Center
Member of NICU staff since 1992**

Q: What is the Banked Human Milk (BHM) program you recently helped start in the NICU?

A: The BHM program recently began in the NICU to make sure that all Very Low Birthweight (VLBW) babies (generally less than 3.3 pounds) are given a chance to receive breast milk when the mother is unable to provide breast milk or is unable to produce enough breast milk. Our NICU is one of the first in New Jersey to begin such a program and are pleased to provide it at no extra cost to the patient.

Q: Why do you feel it is so important for the VLBW babies to receive breast milk?

A: Human milk is considered to be the very best food for babies, especially premature babies, for a number of reasons. It contains special antibodies that help protect a baby from infection. It also contains growth hormones to help the baby grow and improve visual development, enhance intelligence and protect against allergies. Human milk may also reduce the risk of Necrotizing Enterocolitis (NEC) - a very serious gastrointestinal disease that can result in severe disability.

Q: What exactly is BHM?

A: Banked human milk comes from donors who are special moms like you. They are usually new mothers who are nursing their babies and producing more milk than they can use. They volunteer to donate their extra milk to a milk bank that mixes the milk of several mothers together, pasteurizes it, freezes it and stores it ready to be distributed to hospitals in need.

Q: How do parents know the donated milk is safe?

A: All breast milk donors are non-smokers in good general health who must pass a telephone health screening and medical screening complete with blood tests to rule out any diseases. No one is accepted as a donor unless she has tested negative for the AIDS virus and has no risk factors for AIDS. As an extra precaution, all donated milk is pasteurized which kills the AIDS virus. Because of the strict standards set up by the Human Milk Banking Association of North America along with the Food and Drug Administration and the Centers for Disease Control, there has never been a case of banked milk infecting a baby with the AIDS virus or any other disease.



Kamtorn "Dr. Kamtorn"
Vangvanichyakorn, M.D., F.A.A.P.

Q: Can our NICU moms provide milk for their baby if they have been started on BHM?

A: Absolutely! A mother's own milk is meant for her baby. However, it usually takes several days for a new mother to produce milk that would meet the baby's needs and for some moms even longer. Also, some mothers can't meet the needs of their twins or triplets right away. Once mom is producing enough breast milk for her baby/babies, BHM is no longer prescribed.

Q: Any suggestions for parents?

A: Know that donor breast milk is proven safe. It benefits the most fragile babies. If you still have any questions or concerns about banked milk, please speak to your doctor or nurse about them.

Three Little Miracles

It was November 3, 2008, when Colbea, Cooper and Chase were born after only 23 weeks and 4 days gestation. It was a bittersweet day. Our babies were here, but much too soon. How could this happen when our first son Tyler, who was only 11 months old at the time, was a full term baby? We were given the grim statistics of one child born at 23 weeks and the decreasing survival rates for triplets born at their gestational age. Thankfully the Saint Barnabas NICU is one of the best units in the country.

When our babies were born they were unable to breathe on their own, their eyes were fused shut and they needed to be fed through feeding tubes for months. Cooper was the biggest at 1 lb, 8 oz, Chase was 1 lb, 7.4 oz. and our only daughter Colbea was 1 lb, 7 oz. They all had periods of time when their breathing and hearts would stop and they had to be revived by the staff.

I will never forget the sadness I felt leaving the hospital without them. That night got even worse when we received a call letting us know that Colbea needed emergency surgery to repair a perforated intestine. This would be her first of three operations. At the time of the surgery she was only 1 lb, 2 oz., but the amazing doctors were able to save our tiny little girl's life. She came home after 105 days.

Chase developed some serious respiratory problems and needed additional breathing support. Because of the doctors' intelligence and experience, they decided to wait and see what happened rather than operate. Thankfully, Chase's lungs

cleared. He came home after 97 days. Cooper had the longest stay because he was having trouble learning how to drink from his bottle. This ended up being a blessing because the doctors were able to detect a rapid decline in his eyes. Although all three babies had Retinopathy of Prematurity (ROP), Cooper's worsened to stage 4 and needed eye surgery while he was still in the NICU. It is because of the constant attention in the NICU, that he has his eyesight today. He came home after 136 days.

All our babies needed numerous blood transfusions, were intubated, exubated and had IV lines in and out. Through all this, the doctors and nurses kept us informed and, most of all, cared for our children as if they were their own. It is amazing to see such love and care combined with knowledge and professionalism from the whole staff. Today Colbea, Chase and Cooper are happy and healthy one-year-olds. We owe our three beautiful miracles' lives to the Saint Barnabas NICU. Miracles really do happen there.

-Mary Jo and Bob



Miracle Walk Update

This past October we had our highest-attended Miracle Walk yet, with over 2,200 walkers participating. NICU graduates and their grateful families and friends along with staff took part in the day. This year's event raised over \$360,000 for a nine-year total of over \$2.75 million for our NICU. As always, the money raised will help purchase special state-of-the-art NICU equipment (i.e. Giraffe Omnibeds, NeoPuff infant resuscitators, special attachments for the breathing machines and more). This equipment will help the incredible NICU staff continue to provide the highest level of care possible to the NICU babies.

In past years, there has been a DJ, balloon artists, face painters and costumed characters for all to enjoy at the walk. Food and refreshments are provided, as are gift bags for all who walk. Even more excitement and surprises are being planned for the noteworthy 10th Annual Miracle Walk, so mark your calendars now:

**The 10th Annual Miracle Walk
10/10/2010
Verona Park, Verona, N.J.**

Important Phone Numbers:

NICU
973-322-5300

NICU Step-down (3100)
973-322-5310

NICU Nurse Manager
973-322-5345

NICU Social Workers
973-322-5503 or 8408

Birth Certificate Office
973-322-5327

NICU High Risk Infant
Follow-Up Program
973-322-2631

Want to Help the Family Advisory Council?

The FAC is made up of graduate parents dedicated to helping new NICU parents. We meet monthly to discuss ways to do this. We're always looking for recent graduate parents to share their experiences and ideas to make our NICU the best it can be. We welcome your ideas and participation. Contacts:

Eileen Steffen
NICU Quality & Research Coordinator
esteffen@sbhcs.com
973-322-5453

Hayley Hirschmann
FAC Coordinator
hhirschmann@sbhcs.com
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Tests Your Baby May Have in the NICU

Many of the following tests are commonly used to identify, or rule out, problems babies in the NICU might have.

Blood Tests - These often look for anemia, jaundice, electrolyte levels, hypoglycemia, infections and more. They are done by taking a small sample of blood from the baby by a heel stick or artery.

CAT/CT Scan - These provide a closer look at the baby's organs and tissues. They use x-rays and computers to create detailed images for the nurses and doctors. The babies are often barely even touched during such scans.

Head Ultrasound - These check for any possible bleeding in the brain. A device is touched over the baby's head, making sound waves that make a picture for the doctors to examine.

Echocardiogram - This test examines heart structure and functioning using sound waves, much like in a head ultrasound.

Hearing Test - This tests the baby's hearing and brain activity by sending sound to the baby's ears through earphones and sound sensors placed on their head.

Urine Test - This kind of test is often used to check for kidney functioning or infection.

Helpful Pumping/Breastfeeding Tips (cont'd)

- If you are taking any medication that is not recommended for lactating mothers because it passes from the breast milk to the baby, you should keep pumping but throw away the milk ("pump and dump") until you stop taking the medication in order to keep your milk supply going.
- It is also suggested that you use hand-expression along with electric pumping to increase milk supply. Talk to one of the lactation consultants or attend one of their daily classes for more information on this.
- When it's time to give the breast, look for signs your baby is ready. These may include:
 - sucking around their feeding tube
 - putting their hand to their mouth
 - nuzzling and turning their head toward you with a wide open mouth
- Think of your early breastfeeding sessions as practice as it may take your baby several feedings before they breastfeed well. They may just lick or mouth the nipple at first.
- Remember, the hospital nurses and lactation consultants are available to provide assistance and answer questions at any stage so don't hesitate to ask for help.