Antenatal Discussion
Fact sheet for health care professionals

The antenatal period provides an ideal opportunity to discuss infant feeding with pregnant women. All pregnant women should be given information and an opportunity to discuss breastfeeding before 32 weeks gestation. The antenatal discussion should include the following topics:

1. The importance of breastfeeding,
2. The importance of early safe skin-to-skin contact,
3. Early initiation of breastfeeding,
4. Rooming-in on a 24 hour basis,
5. Breastfeeding on demand or baby-led feeding; as frequent feeding will help to establish a good milk supply.
6. The importance of correct position and attachment of a baby at the breast.
7. Information on breastfeeding support groups.

What you can do

1. Allocate a few minutes to discuss breastfeeding during antenatal consultations. The infant feeding checklist (which accompanies this fact sheet) provides direction and guidance to assist health care professionals initiate this discussion.

2. Discuss birth practices and breastfeeding. Practices that prolong labour or make birth more stressful can make breastfeeding more challenging.

3. Ask open-ended questions -?’, Have you any questions about breastfeeding /feeding your baby?

4. Provide small amounts of relevant information which addresses the concerns of each individual mother

5. Reinforce past positive experiences. ‘It was great that you did breastfeed for a few days/weeks last time – every breastfeed is important for your baby’s health’.

6. Express concern for previous negative experiences. Encourage mothers to discuss their experience with a midwife or lactation consultant.

7. Encourage pregnant women to attend an antenatal breastfeeding class.
8. Provide information on local breastfeeding support groups

9. Sign and date the Infant Feeding Checklist when topics are discussed.

**The Department of Health and the World Health Organisation (WHO)** recommends exclusive breastfeeding for the first 6 months of a baby's life with the introduction of complementary foods in addition to breastfeeding for up to 2 years and beyond.

**References**


**Breastfeeding support groups**

1. HSE Breastfeeding Support Network www.breastfeeding.ie

2. La Leche League of Ireland www.lalecheleagueireland.com

3. Cuidiu-Irish Childbirth Trust www.cuidiu.ie

4. La Leche League International www.llli.org

5. Friends of Breastfeeding www.friendsofbreastfeeding.ie
# Infant Feeding Antenatal Checklist

The following topics should be discussed by the doctor / midwifery staff with all pregnant women before 32 weeks gestation

Please sign and date when information is given and discussed

Supportive labour and birth practices have a positive effect on both mother and baby. These include:
- having a companion for support,
- moving about and using positions that are comfortable,
- choosing pain relief that allows baby and mother to be alert.

Specify handouts used or notes for follow-up:__________________________

Signature
PRINTED NAME
Job Title/ Bleep/ Identification No.
Date
Time (24 hour)

Skin to skin contact between mother and baby immediately after delivery, and for at least one hour promotes bonding and helps mother to relax after birth. It helps baby:
- to stabilise breathing and heartbeat, and stay warm,
- to be protected from hospital infections (colonised with mother’s bacterial flora),
- to start breastfeeding.

Specify handouts used or notes for follow-up:__________________________

Signature
PRINTED NAME
Job Title/ Bleep/ Identification No.
Date
Time (24 hour)
Breastfeeding is the normal way to nourish and nurture a baby. Breastfeeding:
- has long-term health benefits for the mother including reduced rates of cancer and cardiovascular disease,
- benefits for the baby include reduced risk of chest and tummy infections, SIDS, allergies, obesity and diabetes,
- provides all the baby needs for the first 6 months (Refer to need to supplement with vitamin D),
- continues to be important after 6 months when other foods are given.

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Breastfeeding in the first hour after birth provides:
- a good start for baby’s immune system, 
- food and comfort.

Specify handouts used or notes for follow-up:______________________________________

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Keeping baby near (rooming-in):
- allows mother to gain confidence with baby care and feeding,
- is safer and minimises the risk of infection from others.

Specify handouts used or notes for follow-up:______________________________________

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| **Feeding on demand (baby-led feeding)** and frequent feeding are needed to develop a good milk supply.  
*Specify handouts used or notes for follow-up:* _________________________________ |
| Signature  
PRINTED NAME  
Job Title/ Bleep/ Identification No.  
Date  
Time (24 hour) |
| **Giving formula or** water supplements or using teats, dummies and nipple shields in the early weeks can reduce milk supply and affect baby’s health. Discuss with midwife or other healthcare professional before any supplements are given.  
*Specify handouts used or notes for follow-up:* _________________________________ |
| Signature  
PRINTED NAME  
Job Title/ Bleep/ Identification No.  
Date  
Time (24 hour) |
| **Good positioning, attachment and suckling** help:  
• the baby to get enough milk and  
• mother to be comfortable when feeding.  
*Specify handouts used or notes for follow-up:* _________________________________ |
| Signature  
PRINTED NAME  
Job Title/ Bleep/ Identification No.  
Date  
Time (24 hour) |
All babies should be given a vitamin D supplement every day from birth to 12 months because:
• vitamin D comes from sunlight through the skin and from some foods, however baby’s skin is very sensitive to the sun and should not be exposed to direct sunlight and baby food (breastmilk, formula milk or solid foods) may not contain enough vitamin D in it,
• babies grow very quickly between 0-12 months and have a greater need for vitamin D to form strong bones.

If considering formula feeding, know the type for young infants, the cost of using formula, the safety of local water supply, equipment needed and the risks of incorrect use of formula.

The midwives on the postnatal ward will help with learning to feed and care for baby. Help and support with breastfeeding is readily available. Most parents have questions and midwives expect and are happy to be asked. The Public Health Nurse, other health services and support groups are in the community. It is good to meet these people during pregnancy.

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Information given on **antenatal classes**:

**If there are concerns** or previous poor experience, arrange for a discussion with a lactation consultant, Clinical Midwife Specialist (Lactation), voluntary supporter or other knowledgeable person.

_Specify handouts used or notes for follow-up:_

__________________________________________________________

Signature

PRINTED NAME

Job Title/ Bleep/ Identification No.

Date

Time (24 hour)