Safely weaning from supplements and transitioning to exclusive breastfeeding

It's often possible to increase the supply of breast milk so supplementing can be reduced or stopped completely. The sooner you start reducing the use of supplements. the easier it is

There are four steps to weaning from supplements:



Assessing the signs of successful breastfeeding and catch-up growth

Weaning from

Ensuring successful breastfeeding

Increasing milk supply

supplements

Ensuring successful breastfeeding

Always check to make sure the baby is breastfeeding effectively before reducing supplements. Ensure the family knows about the signs of effective breastfeeding:

- ▶ Breastfeeding isn't painful and the baby sucks and swallows milk efficiently
- ▶ The baby's latch isn't slipping and they're focused on sucking
- ▶ The baby doesn't repeatedly make clicking or smacking sounds when suckina
- ▶ The baby doesn't get tired guickly at the breast

Also go through these prerequisites for safely weaning from supplements:

- ▶ The baby is healthy
- ▶ The baby was born at full term
- ▶ The family knows how to follow the signs of successful breastfeeding
- ▶ The baby's weight can be checked every 3-7 days

If all the items on the checklist are not met, you should consider asking a lactation consultant or IBCLC for assistance.

Assessing the signs of successful breastfeeding and catch-up growth

The signs of successful breastfeeding should be closely monitored when weaning from supplements. Instruct the family on how to monitor the signs by using *the Journal for* weaning from supplements, for example. Monitor the baby's weight closely. Carry out additional weighings for as long the weaning continues.

Signs of successful breastfeeding

- ▶ The baby feeds on demand, at least 8–12 times a dav
- The baby pees at least five times a day
- ▶ For the first few weeks, the baby poops every day. Babies over six weeks old might take days in between pooping
- ▶ The baby reaches their birth weight by 10-14 days old
- ▶ The baby's weight increases by at least 20 g/day (140 g/week) – take into account the need for catch-up growth

Calculating the need for catch-up growth

If the baby's weight gain has been slow to begin with, the minimum target for weight gain isn't enough and the baby must also gain some catch-up weight. An indicative target weight can be obtained by calculating what the baby's weight would've been if they had grown 20 g/day (140 g/week). The amount of catch-up growth needed can be calculated by deducting the baby's current weight from the age-appropriate target weight.

What if the signs of successful breastfeeding aren't met?

If the signs of successful breastfeeding or the daily weight gain targets aren't met. the amount of supplements should not be reduced until the targets have been met for two days in a row. If the targets are still not met, the family should return to supplementing at levels where the signs of successful breastfeeding were previously met. During lactation counselling, a new plan is made to increase milk supply and to reduce the use of supplements. If weight gain is too slow despite a well-planned and

Example

The baby is 20 days old and reached the birth weight of 3500 g only two days ago. This means that the baby's weight gain has been too slow.

Calculate the need for catch-up growth by working out how much the baby would weigh if they had reached birth weight at 14 days old, and then arown 20 a/dav:

(20 days -14 days) x 20 g + 3500 g = 3620 g

To catch up, the minimum target of 20 g/day is not sufficient and a daily weight gain of at least 25–30 g is usually needed until the target weight is reached.

Compare the baby's weight with the target weight and continue weekly weighings to monitor growth. moderate reduction in supplementing, the weaning cannot be continued. Sometimes it may even be necessary to return to the original supplement amounts.

Increasing milk supply

A prerequisite for weaning from supplements is for the mother's milk supply to increase. Instruct the mother on how to increase their milk supply by frequent, effective feedings and/or expressing. Understand the family's resources and select ways that are realistic for the family to implement in their daily life. Remember to strengthen the mother's breastfeeding confidence.

Instruct the family on how to increase milk

- **Skin-to-skin contact** is an easy way to support breastfeeding success especially with young babies. Babies in skin-to-skin contact feed more frequently. It's easier to detect early hunger cues when the baby is in skin-to-skin contact, which leads to more frequent breastfeeding.
- A laid-back breastfeeding position (where the baby lavs on their stomach on top of the mother) enhances the baby's instinct to suck, often resulting in a better latch.
- Alternate breasts frequently during a **breastfeeding session.** Breasts should be switched when the baby starts to suck and swallow more slowly.

- **Compress the breast** when the babv's swallowing slows down, thus reactivating the let-down reflex.
- Increasing the number of **breastfeedings** is an effective way to increase milk supply. The baby should be breastfed at least 10–12 times a day. Breasts should also be stimulated at night to prevent a drop in milk production. The more often the breasts are stimulated, the more milk production increases. Breaks in breastfeeding of more than four hours should be avoided. Make sure the family recognises the baby's hunger cues.
- Hand expressing or pumping is necessary to increase milk supply if the baby isn't feeding frequently (at least

- 10–12 times a day) or efficiently enough
- Expressing at the end of or during **breastfeeding** increases milk production.

Weaning from supplements

Make a plan with the family to wean the baby from supplements

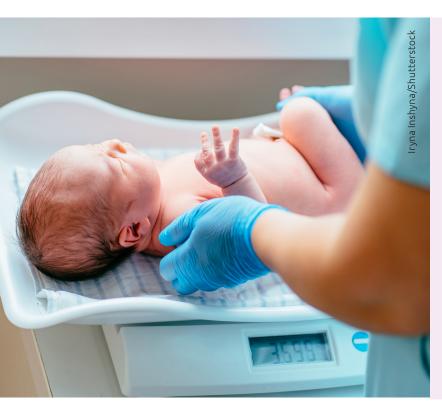
1-5 days old baby

If the baby has been given small amounts of supplement in the hospital, the need for supplementing may quickly stop as the mother's milk supply increases. If the baby has been given less than 40 ml of supplements per feeding, the mother considers her milk production to be normal and the signs of successful breastfeeding are met, supplementing can be stopped all at once.

If the baby has been given more than 40 ml of supplements per feeding or more than 320 ml per day, the amount should be gradually reduced. Supplementing should be reduced by 10 ml every 2–3 days. At the same time, milk supply should be increased and the signs of successful breastfeeding monitored at home. Advise the parents to contact you immediately if the signs of successful breastfeeding aren't met. Weigh the baby every 3-5 days.

Baby up to 6 weeks old

Supplementing should be reduced by 10 ml every 3-4 days. At the same time, milk supply should be increased and the signs of successful breastfeeding monitored at home. Advise the parents to contact you immediately if the signs of successful breastfeeding aren't met. Weigh the baby first every 3–5 days and later weekly.



Example

A newborn baby has been given 50 ml of supplements per feeding since being discharged from the hospital. You instruct the family to increase milk supply, monitor the signs of successful breastfeeding and reduce the use of supplements every other day. The signs of successful breastfeeding are met throughout, so the weaning can progress without needing to reassess the plan.

- **day 1:** 40 ml /feeding + breastfeeding
- day 2: 40 ml /feeding + breastfeeding
- day 3: WEIGHING 30 ml /feeding + breastfeeding
- day 4: 30 ml /feeding + breastfeeding
- day 5: 20 ml /feeding + breastfeeding
- day 6: WEIGHING 20 ml /feeding + breastfeeding
- day 7: 10 ml /feeding + breastfeeding
- day 8: 10 ml /feeding +breastfeeding
- day 9: breastfeeding
- day 10: WEIGHING + breastfeeding
- day 11: breastfeeding
- day12: breastfeeding
- day13: breastfeeding
- day14: breastfeeding
- day 15: WEIGHING: If the weight gain is sufficient, the additional weighings can be stopped.

Example

A three-week-old baby has been given 50 ml of supplements per feeding. You instruct the family to increase milk supply, monitor the signs of successful breastfeeding and reduce the use of supplements every fourth day. You find that the weaning process has to be slowed down occasionally when the signs of successful breastfeeding aren't met.

- day 1: 40 ml / feeding + breastfeeding
- **day 2:** 40 ml / feeding + breastfeeding
- day 3: 40 ml / feeding + breastfeeding
- day 4: WEIGHING Baby has gained weight well, weaning continues at 30 ml / feeding + breastfeeding
- ▶ day 5: 30 ml / feeding + breastfeeding
- day 6: 30 ml / feeding + breastfeeding
- day 7: Signs of successful breastfeeding not met – weaning is not continued and the supplement amount is kept at 30 ml /feeding + breastfeeding until the next weighing
- day 8: 30 ml / feeding + breastfeeding
- day 9: WEIGHING Baby has gained weight well, weaning continues at 20 ml / feeding + breastfeeding
- **day 9:** 20 ml / feeding + breastfeeding
- **day 10:** 20 ml / feeding + breastfeeding
- **day 11:** 20 ml / feeding + breastfeeding
- day 12: 10 ml / feeding + breastfeeding
- day 13: 10 ml / feeding + breastfeeding
- **day 14:** 10 ml / feeding + breastfeeding
- **day 15:** 10 ml / feeding + breastfeeding
- day 16: WEIGHING + breastfeeding
- day 17: breastfeeding
- ▶ day 18: breastfeeding
- day 19: breastfeeding
- day 20: breastfeeding
- day 21: breastfeeding
- day 22: breastfeeding
- day 23: WEIGHING If the weight gain is sufficient, the additional weighings can be stopped.

Baby 6 weeks to 4 months

After the first few weeks, increasing milk supply is more challenging, so weaning is done more slowly. You can try reducing the amount of supplements by 10 ml per feeding 1–2 times a week, for example. At the same time, milk supply should be increased and the signs of successful breastfeeding monitored at home. Advise the parents to contact you immediately if the signs of successful breastfeeding aren't met. Weigh the baby weekly.

Baby over 4 months

If the baby has needed small amounts of supplement to ensure adequate weight gain, parents can try starting solids at 4 months and gradually weaning the baby from supplements thereafter. Increasing milk supply is possible to try too.

Remember: Lactation counselling when weaning from supplements

Instruct the family to keep a record of the amount of supplements used and number of breastfeeding as well how many times the baby pees and poops for a couple of days before an appointment, so you can get an idea of the amount of supplementing and the need for it.

Give the family tools to increase milk supply safely: Comprehensive guidance on breastfeeding positions and latching, monitoring the signs of successful breastfeeding and ways to increase milk supply that are realistic for the family to implement in their daily life.

Monitor weight gain with additional weighings according to the instructions.

Test weighing is not necessary, as the signs of successful breastfeeding along with weight gain are a better way to assess the sufficiency of milk intake.

Make an individual plan with the family on weaning from supplements. Write down goals, ways to increase milk supply and a plan to wean the baby from supplements, and provide the family with written instructions to take home. Review the plan during each appointment. You can also utilise the Journal for weaning from supplements.

Guiding the family if supplementing cannot be stopped

If the mother wishes to breastfeed, continue to encourage her to do so. Partial breastfeeding or supplementing with expressed milk is very beneficial for both mother and baby. Ensure that partial breastfeeding goes well by working with the family to find ways to supplement that don't ieopardise the continuation of breastfeeding. For example, supplements can be given before breastfeeding to give the baby the experience of filling their stomach at the breast. A nursing supplementer is also a good aid if the need for supplements is constant. When using a nursing supplementer, the baby receives the supplements while breastfeeding. A nursing supplementer can prevent fussing at the breast or a nursing strike associated with partial breastfeeding. If necessary, instruct the family on baby-led bottle feeding and how to handle and store milk aseptically.

It can be very disappointing for the mother if exclusive breastfeeding doesn't work out. Talk about the situation; what has happened, where we are now and where we go from here. The most important thing is to let the mother talk about her experiences and wishes.

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