



Prenatal Decision-making Tool

- ♥ **Breastfeeding is the normal way to feed your baby.**
- ♥ **Sometimes breastfeeding can be hard at first. We can help you make it work!**

Although most babies grow well on both formula and breastmilk, studies show the routine use of formula comes with some risks to the health of both mothers and babies.

DID YOU KNOW...?

- ♥ **For the first 4-6 months babies can't protect themselves from infections very well; breast milk gives them much of the protection they need! ♥ The protection continues as long as they breastfeed – and longer. ♥ Breastmilk even helps some immunizations work better!**

Colostrum (the first milk) coats and protects baby's gut:

- Even one feed of formula can change that special coating of breast milk that protects babies from infections

Babies who do not receive breast milk are more likely to get *significant illness and disease*:

- **Diarrhea and vomiting** (~68% higher rate)*
- **Colds, flus, ear infections, and chest infections** (77% more hospitalization for chest infections)*
- **Diabetes** (Type I Diabetes: about 20 – 29% higher risk; Type 2: ~ 42%)*
- **Certain childhood cancers** (Leukemia: ~ 16 – 20%)*
- **Bowel diseases (Crohn's disease and ulcerative colitis)**
- **Obesity** (~ 7 – 26% higher risk)
- **Sudden Infant Death Syndrome** ("crib death," ~ 38.5% higher risk*)

Also, non-breastfed children may score a bit lower on IQ tests**

Mothers who mainly feed their babies formula have some higher risks:

- **Type II diabetes** (~ 4 – 13% higher risk: however, not if she had gestational diabetes)
- **Bleeding problems after childbirth**
- **Breast cancer as a young woman** (~ 30% higher rate than women who breastfed for 1 year)
- **Ovarian cancer** (~ 22% higher risk; exact figure not confirmed)*

And...mothers can take longer to lose their pregnancy weight ***

- ♥ **Even small amounts of breastmilk can help your baby.**
- ♥ **When you can't feed your baby your own breastmilk or banked breast milk, commercial infant formulas are next best.**

Fraser Health Breastfeeding Practice Advisory Council, May 2010

*Ip, Chung, Raman, Chew, Magula, DeVine, Trikalinos, Lau. Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries. Agency for Health Care Research & Quality, Pub. No. 07-007, April 2007.

**Michael S. Kramer, et. al. Breastfeeding and child cognitive development. New evidence from a large randomized trial. *Archives of General Psychiatry*. 2008;65(5):578-584.

***Baker, Gamborg, Heitmann, Lissner, Sørensen, Rasmussen Breastfeeding reduces postpartum weight retention. *American Journal of Clinical Nutrition*, doi:10.3945/ajcn.2008.26379. Vol. 88, No. 6, 1543-1551. December 2008

Mother-Baby Feeding Plan

*Mothers have many choices to make about their babies. The Canadian Pediatric Society recommends breastfeeding. Sometimes mothers have valid reasons why they choose to feed formula. Please read this form and talk to your nurse/midwife/doctor about your feeding choices. **Then check and initial your choice, and bring it with you to the hospital.***

BREASTFEEDING _____ (Initials)

I choose to breastfeed and do not want my baby to get any formula or bottles. I know that breastfeeding early and often (at least 8 times/24 hours) helps us both:

- my breast milk supply will increase sooner and faster
- my breasts will not get so hard and sore (engorged)
- my baby will have lots of practice breastfeeding

If my baby is unable to breastfeed initially, someone will talk to me about milk expression and methods other than bottle to feed my baby.

----- ♥♥♥ -----

MIXED FEEDING _____ (Initials)

I want my baby to get formula at times when my baby is hungry and I do not wish to breastfeed. I know giving bottles in the early days of breastfeeding can cause problems:

- my baby may have trouble going back on the breast after using a bottle nipple
- my baby may not want to breastfeed if full from formula
- my breast milk supply may take longer to increase because my baby is not sucking as much at the breast
- my breasts may become hard and sore (since my baby is not removing the milk). Then my baby could have trouble latching on, and my milk supply could eventually go away.
- if I continue giving formula I might not maintain enough milk for my baby's needs.
- I understand that formula feeding increases the risk for my baby and myself for the conditions listed on the opposite page.

----- ♥♥♥ -----

INFANT FORMULA FEEDING _____ (Initials)

I want my baby to be formula fed. I know that:

- formula is provided free while I am in the hospital
- once I am at home, I will need to buy formula for nine to twelve months (extra costs from \$60 to \$150 /month)
- I will need to learn how to prepare formula and bottles under sterile conditions and proper concentration to protect my baby's health.
- Powdered formula is not sterile, so I will use liquid formula if my baby is premature or ill (unless my doctor gives different instructions).
- It may be hard to change to breastfeeding after a few feeds/days of formula feeding.
- I understand that formula feeding increases the risk for my baby and myself for the diseases listed on the opposite page.

Mother's Name: _____ Date: _____