## **Breastfeeding at 4 Months**A Counseling Guide for Health Care Professionals

<b>Counseling Message for Mothers</b>	Background for Professionals
Feed your baby when you see signs of hunger (typically 7 to 8 times every 24 hours). As babies get older, they are more easily distracted during a feeding and may need <b>gentle</b> stimulation to refocus on the feeding (e.g., rocking, patting, and stroking).	At this age, breastfed babies consume more at a feeding and go longer between feedings.
Breastfed babies receiving only breastmilk may go several days without a bowel movement and then have a large soft stool.	It is normal for stools to be soft and they are often the color of yellow mustard. Breastfed baby receiving only breastmilk may go as long as a week or more without a stool. This assumes the abdomen is soft, baby continues to feed well, and is content.
It is normal for infants to drool more at 3 to 4 months of age.	Baby's salivary glands are becoming more active.
Vitamin D is a supplement your breastfed baby needs. A daily supplement of 400 IU of vitamin D is recommended.	Recommend a supplement that contains only vitamin D.  Breastfed babies less than 6 months old do not need a fluoride supplement.
	If a baby has been diagnosed with iron deficiency anemia or has other risk factors, an iron supplement is warranted.
<ul> <li>Most prescriptions and over the counter medicines can be taken during breastfeeding.</li> <li>Check with health care providers (yours and your baby's) before taking anything.</li> <li>Tell your provider how important breastfeeding is</li> </ul>	Prescribe medications that expose the baby to the least amount of drug; i.e., those with the shortest half life, the lowest dose possible and time the dose related to the baby's typical feeding schedule.
to you and ask them to help you continue.  The Infant Risk Center at 806-352-2519 takes calls from parents and professionals on questions about medicines and herbs when breastfeeding. The website, <a href="https://www.infantrisk.org">www.infantrisk.org</a> is a good resource as well.	Check credible resources like Thomas Hale's book, Medications and Mother's Milk and the website Lactmed. If temporary weaning is necessary, provide instructions about how to maintain a full milk supply with a quality electric breast pump.
<ul> <li>You can continue breastfeeding or feeding pumped breastmilk if you return to work or school.</li> <li>Choose child care that is supportive of your choice to breastfeed.</li> <li>Make arrangements for safe storage of your expressed breastmilk.</li> <li>Introduce your baby to drinking from a bottle and to being fed by someone else.</li> <li>Breastfeed regularly whenever you are with baby.</li> <li>The healthiest choice for you and your baby is to continue exclusive breastfeeding.</li> </ul>	<ul> <li>Breastfeeding mothers have several feeding options:</li> <li>Breastfeed baby (child care provider is on-site or nearby).</li> <li>Breastfeed when with baby and collect/store breastmilk for feedings when apart.</li> <li>Breastfeed when with baby and formula feeding when apart.</li> <li>Tell mothers how to safely store expressed breastmilk. Recommendations can be found at the Academy of Breastfeeding Medicine website (www.bfmed.org) or the American Academy of Pediatrics website (www.aap.org).</li> </ul>



## **Breastfeeding at 4 Months (continued)**

Counseling Message for Mothers	Background for Professionals
Wait until baby is around 6 months old before offering any solid foods. It is not recommended to give your baby fruit juice because juice offers no nutritional benefit.	Exclusive breastfeeding in the first 6 months will provide optimal nutrition for growth and development. Developmental signs of readiness for solid foods include sitting with support and controlling the head and neck. Early introduction of solids may decrease nursing time, affect milk production, and predispose an infant to allergies.
Experts recommend breastfeeding for at least one year. If you choose to stop breastfeeding, gradual weaning is easiest for you and your baby.	If mothers choose to wean, encourage them to initiate weaning gradually by replacing one feeding with formula for 2-3 days. This allows her milk supply to decrease slowly without fullness and discomfort. Mothers can continue to wean at their own pace by replacing one feeding at a time. Mothers can partially wean (i.e., continue breastfeeding several times per day) and maintain that feeding pattern for days or even weeks before deciding to replace another feeding.
It is not necessary to wean from the breast when your baby begins to get teeth.	Recommend rubbing baby's gums with a clean finger or offering a clean cold or frozen washcloth or teething ring before feeding to soothe swollen gums.
Babies may bite while breastfeeding due to teething discomfort or if their mothers are doing other things (e.g., talking on the phone) and not interacting with them.	End feedings when baby loses interest. This helps prevent biting done by the playful baby.
	By 6 months of age, mothers can remove baby from the breast and tell the baby "No" if the baby bites. If baby is still hungry, offer the breast again. If biting continues, remove baby from the breast and end the feeding. Baby will soon learn that biting means breastfeeding will stop.
Most breastfeeding babies do not need formula. It is healthiest to only breastfeed your baby. If formula supplementation is desired or medically necessary, offer iron-fortified infant formula.	Support breastfeeding and encourage as much breastmilk as possible. Supplemental formula interferes with milk supply and mother's breastfeeding success. If formula is desired or medically indicated recommend iron-fortified formula as a supplement until the baby's first birthday. It is possible with guidance to resume breastfeeding after supplementing.
<ul> <li>Questions? Call one of the following:</li> <li>Certified breastfeeding educators</li> <li>Certified lactation consultants (IBCLC)</li> <li>Health care professionals</li> <li>La Leche League</li> <li>Peer support groups</li> </ul>	Mothers and babies are not born knowing how to breastfeed. It takes patience and practice to learn and recognize each other's signals. Identify sources of support from family members, friends, and the community. Encourage mothers to call with questions or for advice.
<ul><li>Physicians</li><li>WIC staff</li></ul>	Identify community resources that can assess and recommend strategies to help with any breastfeeding problems.



