

Neonatal weight loss in the first 6 weeks

Information for parents



What is normal?

Babies are weighed at birth and again on day 5, and at any time there may be concerns about their feeding or condition.

Chest or breastfed babies usually lose between 5-7% of their birth weight and formula-fed babies lose between 3-5%.

This weight loss usually stops after 3 or 4 days of life. Babies should have regained their birth weight by day 14, but 20% will not and for these a plan will be made.

Why did my baby lose weight?

There are a number of different reasons, including:

- Short postnatal stay in hospital or a home birth.
- Premature/small baby.
- Ineffective milk transfer due to positioning and attachment.
- Use of opiates or IV fluids in labour.
- Caesarean section, long labour, retained placenta, post-partum haemorrhage.

- Diabetes, polycystic ovary syndrome (PCOS), smoking.
- Reluctant to feed baby.
- Delayed milk production.
- Use of dummies, nipple shields or artificial formula supplements.
- Breast conditions.
- Neonatal/parental illness.

What now?

Your midwife will watch baby feed and record a feeding assessment in your postnatal notes. The midwife will work out a percentage of weight loss and use a guideline to make a feeding plan in your notes.

This will hopefully be a short-term plan for long-term benefits.

If baby has lost above 8% of their birth weight:

- Feed your baby at least 8-12 times in 24 hours. Encourage baby by having skin to skin with them. Baby will be re-weighed in 24-48 hours.
- If you're asked to feed your baby 3-hourly, start the next feed 3 hours from the end of the first feed.

For weight losses above 10% there are also the following add-ons:

• 10-12%. Express 30 minutes after the feed finishes to encourage milk production. Any milk gained should be given to baby with an oral syringe (up to a total of 5mls per feed). For quantities over 5mls, use a feeding cup (no upper limit) - SFH staff will show you how to safely use these techniques.

• 12.1% or above. You will be referred to a paediatrician at King's Mill Hospital the same day. This appointment may involve blood tests and possible admission to hospital. You should be given a hospital grade pump to use during your stay, with feeding support from staff members. There may also be option for a free one week loan of a pump from the hospital.

After weight loss - pumping for milk and stimulation

- Your midwife, doctor or nurse will calculate the optimal amount of milk top ups your baby needs; this is on top of their usual 8-12 feeds in 24 hours. These supplemented amounts are made up of as much expressed breast milk as you manage, and then the rest with artificial formula; these can be given via feeding cup and staff will show you how to do this safely.
- Regardless of how much milk you are able to pump, short-term pumping plans
 are also about encouraging your body to make more milk, and any milk collected
 is a bonus.
- It's recommended to pump at least 8 times in 24 hours, with one of these sessions overnight (these sessions do not need to be at set times) this will help to boost your milk production. If you are unable to do this as many times then adjust this amount as needed, then pump as many times as you can manage in each 24 hour period.
- Massaging your breasts/chest before a pumping session can increase the volume of milk you are able to collect.
- Relaxing will help to release the hormone oxytocin which causes milk to' let down'
 – things which can help include putting a baby sock over the bottle so you don't
 watch the amount, breathing exercises, listening to music, having your baby close
 to you, looking at a photo of your baby or smelling some of their worn clothing.
- Pump for 10-15 minutes on each side.
- If using a pump makes you feel sore, you may need a different size flange for the pump please alert a member of staff.
- You can also try double pumping (using two pump kits with one hospital pump) to save time and possibly increase milk collected.

What next?

- You will be supported by your community midwife and the Lime Green Infant Feeding Team. You can also call the Maternity Unit with any queries or concerns in between visits (contact numbers are in the next section).
- Feeding plans usually adapt and change after each re-weigh; milk top-ups are halved and then gradually reduced over time.
- You may be offered a referral to the Infant Feeding Midwife if you or the midwife or healthcare support worker feel you need support with complex feeding issues. You can also request referral to this service.

- If your baby gains weight, feeding is comfortable for you and baby is able to transfer milk effectively, then feeding plans will stop. You will then be encouraged to feed your baby in a responsive way (at least 8 times in 24 hours, but it's usually a lot more). This is a two-way relationship where you feed baby when they show early feeding cues, and you can also feed baby when you want to feed them.
- We will continue to care for you until your discharge to the health visitor.

Contact details:

- Infant Feeding Specialist Midwife
 Natalie Boxall (for complex feeding
 issues including tongue tie, cleft
 diagnosis, milk supply concerns,
 reflux, static or on-going weight
 loss, or medication enquires) 01623 622515, extension 6575.
- Lime Green Team (postnatal community support) - 01623 676170 (between 9am and 5pm).
- Midwives Advice Line 01623 676170.
- Out of hours (between 5pm and 9am) - 01623 655722.



Further sources of information

NHS Choices: www.nhs.uk/conditions Our website: www.sfh-tr.nhs.uk King's Mill Hospital: 01623 672222 Newark Hospital: 01636 685692 Email: sfh-tr.PET@nhs.net

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr PFT@nhs net

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