



Information for parents for the period following the birth

Returning home



Babys

↳ process new impressions every day, for which they need a calm environment.

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Dear Parents

The time has finally come! You'll soon be taking your baby home. And so begins a happy, exciting and challenging time. During the first few days and weeks with their baby, new parents are required to adapt to the new situation and establish a new routine. You'll sometimes be faced with questions at home, to which you may not always know the answer. This brochure is intended to help you and provide useful suggestions and tips.

Of course, our specialist staff will also be on hand after you return home. If you have any questions or concerns, please don't hesitate to contact us or another specialist unit. We'll be happy to help!

We're delighted as you are about the birth of your child and wish your family all the very best for the future.

The maternity ward support team

Nutrition while breastfeeding

A healthy diet is important while breastfeeding. Our nutritional tips will tell you what you can eat and what to avoid.

In principle, you can eat anything while breastfeeding. It's important that you eat a healthy, balanced diet, to ensure that your breast milk provides your baby with sufficient nutrients. While breastfeeding, your calorie intake will need to increase by around 500 calories per day. You therefore need to eat a balanced diet containing plenty of carbohydrates, protein, fruit, vegetables and salad. Eat one portion of meat (100g) or fish (120g) per day. If you're vegetarian, you should ensure that you eat enough protein (dairy produce, eggs, tofu, pulses, Quorn).

NUTRITIONAL TIPS

- » Eat what you ate while pregnant. Your baby is used to this food.
- » If you have any food intolerances, your baby will usually share these (flatulence, wind, discomfort).
- » If you don't know whether you have a food intolerance, we recommend eating a small amount of this in the morning and seeing how you and your baby react.

AVOID STIMULANTS Stimulants such as alcohol, nicotine and caffeine pass into your breast milk, which may lead to a reduction in milk production. Avoid or reduce these substances so as not to endanger your baby.

MAKE SURE YOU DRINK ENOUGH WATER Breast milk is approximately 90 per cent water. Your fluid intake is therefore higher when you're breastfeeding. You should preferably drink tap water, bottled water, herbal tea or diluted fruit and vegetable juice throughout the day and with every feed, at least two litres per day.

The Zuger Kantonsspital regularly offers free information evenings on the subject of «Nutrition during pregnancy and breastfeeding». More information is available on our website, www.zgks.ch.



Breastfeeding

Breastfeeding is the most natural form of nutrition during the first six months. Breast milk contains exactly the right quantities of all the necessary nutrients and antibodies for your child.

Breastfeeding is equally important for mother and child. Breast milk provides your baby with all the necessary nutrients and antibodies, while the process offers a great deal of security and affection. At the same time, breastfeeding helps the uterus return to its normal size and reduces the risk of bleeding, as well as of postnatal depression.

SUCKLING STIMULATES MILK PRODUCTION The more often (not the longer) you breastfeed, the more milk is produced. Breastfeed your baby whenever they're hungry, including at night. The intervals between feeds will vary, initially between one to three hours, before usually becoming longer. If you have any breastfeeding problems, please feel free to contact our specialist advisors.

YOUR CHILD IS RAVENOUS At around one, three and six months, babies experience growth spurts and need feeding

more often during this time. Don't worry about running out of milk. Simply breastfeed more often. After a day or two, your milk production will adapt to the increased demand.

IF YOUR BREASTS HURT If your breasts become red or you experience localised tenderness, if your general health deteriorates or you develop a fever, you should immediately contact a breastfeeding adviser or your GP. This could be the first sign of a breast infection.

INITIAL BREAST ENGORGEMENT The initial breast engorgement is also referred to as your milk «coming in» and usually sets in on the second to third day following the birth, or sometimes slightly later. It is a natural occurrence controlled by hormones and its purpose is to convert colostrum (first milk) into mature breast milk. In most cases, it occurs in a very mild form.

Common symptoms are warm, taut or firm breasts along with the appearance of veins on the breast.

The following measures may help to provide relief

- » Breastfeeding more often to relieve the breast
- » Warm compresses before breastfeeding
- » Breast massage before breastfeeding
- » Cold compresses (e.g. with quark) after breastfeeding

If you have any concerns or your symptoms persist over a longer period of time, please contact a specialist.

DADS ARE IMPORTANT HELPERS As a father and partner, you provide important support and assistance to your wife. Relieve your wife of the household chores and look after any siblings. This will allow her to relax while breastfeeding and sleep for an hour between feeds if needs be.

OUR BREASTFEEDING SERVICES

- » Preparatory breastfeeding courses
- » Breastfeeding advice and follow-up outpatient care
- » Rental/sale of breast pumps and other breastfeeding equipment
- » Laser therapy for nipple problems
- » Support and advisory services



Face and body care

Your baby's skin is still very sensitive. Face and body care requires warm water and not much else.



BATHING The temperature of the bath water at the bottom of the tub should be between 36 and 37 °C. Two baths per week are sufficient for your child. There's no need for bubble bath during the first few weeks.

FACE A quick wash using a little lukewarm water and a soft cloth is usually enough for newborns and tiny babies. There's no need for soap; water will suffice.

NOSE The nose basically cleans itself and requires hardly any additional care. Any external scabs can easily be softened using a little lukewarm water and a cotton-wool ball. Any interior residue can be removed using the twisted end of a cloth. Avoid cotton buds, due to the risk of injury.

EARS Like the nose, ears also clean themselves. The only parts that need cleaning are the outer ear and the area behind the ears. Both of these can easily be cleaned using a soft flannel and a little lukewarm water. Be careful not to get water in the ears. Do not use cotton buds.

HAIR During the first few months, simply wipe the delicate downy hair every couple of days using a little warm water and a soft cloth. Gentle combing with a soft baby brush is good for the scalp. You should only use a mild baby shampoo once the hair has become thicker.

FINGER AND TOENAILS Apply cream to finger and toenails every day to keep them nice and soft. Fingernails and toenails shouldn't be trimmed before baby reaches four weeks of age. It's best to use special baby nail scissors for this, to avoid injury.

TUMMY BUTTON CARE The tummy button scab usually falls off on its own within 10 to 12 days after birth. During this time, make sure that you fasten the nappy below the tummy button so that the tummy button scab remains dry. If necessary, you can place a sterile compress around the tummy button scab to protect it. It is possible that the tummy button wound may bleed a little as it heals, but this is no cause for concern. If there is any redness or other signs of infection, please contact your outpatient midwife or paediatrician.

Baby-related tips

New questions will repeatedly arise during everyday life with your newborn. We're happy to provide some recommendations for this initial period at home.

BODY TEMPERATURE Your baby's normal temperature is 36.5 to 37.5 °C. Body temperature is measured in their armpit. A temperature reading is only required if your child feels hot or too cool. If you're unsure, please consult your outpatient midwife or paediatrician.

PAEDIATRICIAN We recommend an initial check-up when your baby is four weeks old.

WALKS You can take your child for a walk as soon as you leave hospital. Dress them according to the season and protect their head from the cold, wind and sun. In summer, you should avoid taking a walk between 11 am and 3 pm, due to the high ozone levels.

BOWEL MOVEMENTS These will vary depending on your baby's diet: » Breast milk stools: several times a day and at least twice

a day during the first four to six weeks; watery, effervescent, yellowish, grainy stools. » Formula milk stools: once a day; watery, brownish, shaped stools.

SUDDEN INFANT DEATH SYNDROME

We recommend the following preventative measures:

- » Always lay your baby on their back to sleep
- » A smoke-free environment
- » Avoid overheating; no sheepskin in the cot
- » Bedroom temperature at 18 to 20 °C

CRYING, DISCOMFORT Crying is normal during the first few weeks, mostly in the evening, and may mean that your baby is processing impressions made during the day. If your child starts to scream, you should immediately investigate the cause: hunger, heat, cold or a full nappy can quickly be identified and reme-



died. Your child will usually quickly calm down if they're picked up and carried around. A walk in their pram, a clockwise tummy massage or bath may also help.

Support and assistance, baby blues

With the birth – especially of your first child – your life fundamentally changes. Being a parent is a 24-hour job and can sometimes be overwhelming.

SUPPORT AND ASSISTANCE New parents often have to learn to cope with a new daily routine and to handle the changes in their relationship. Fatigue and indifference, as well as sleep and eating disorders, may be a sign of physical or mental stress. It's important that mothers acknowledge that they need sleep and relaxation, adult contact and perhaps some form of activity outside the home. Sometimes a babysitter or additional childcare may help. Various specialist units provide help and support. Addresses are available from your outpatient midwife, GP practice or local authority.

BABY BLUES Postnatal depression (also known as baby blues) describes a short-term depression during the first ten days after delivery, which affects around 50 to 80 per cent of all mothers.

Typical symptoms of this depression are:

- » Tearfulness and frequent crying
- » Sensitivity and mood swings
- » Fatigue and exhaustion
- » Sleeplessness and restlessness
- » Anxiety and irritability
- » Difficulty concentrating, etc.

The baby blues are considered to be normal and relatively harmless, as they're a common, temporary phenomenon. If your symptoms persist for more than two weeks, you may develop more severe depression. In this case, it's imperative that you speak to your outpatient midwife, your GP, our specialist staff or the experts at "Punkto – Beratung frühe Kindheit".

Recovery

During the first six weeks after the birth, it's important to go easy on your body. After that, you can usually do whatever you like again.

POSTNATAL EXERCISE Pregnancy and childbirth impact the entire body, but especially the pelvic floor muscles. That's why postnatal exercises are important.

The objective is to strengthen the pelvic floor as well as abdominal and back muscles. After spontaneous vaginal delivery, the course is recommended around 6 weeks after the final medical check-up, after a caesarean wait around 10 to 12 weeks before starting postnatal exercises.

POST-BIRTH VAGINAL DISCHARGE During the weeks following the birth, the vaginal discharge changes colour from red, through brownish-red, to yellow and finally white. The presence of blood persists for up to six weeks. Please contact your GP immediately if heavy bleeding occurs during the first few weeks.

MENSTRUATION If you're breastfeeding, your first period will occur after around six to eight weeks or not until you stop breastfeeding; if you're not breastfeeding, this will be somewhat earlier. We recommend a gynaecological check-up five to eight weeks after giving birth.

IMPORTANT INFO FOR THE POSTPARTUM PERIOD

- » Be sure to practise good hand hygiene and shower daily
- » After every visit to the toilet, rinse with a peri bottle, for example, as long as the post-birth vaginal discharge appears bloody
- » Change sanitary pads regularly
- » Don't use tampons
- » Don't go swimming, you are welcome to take a relaxing bath from the 3rd week after the birth.
- » Don't ride a bike until the perineal sutures have fully healed

Contraception

You can fall pregnant again even before your first period after giving birth. We recommend thinking about your future contraceptive options soon after the birth or even during pregnancy and talking to your GP.

FEMALE CONTRACEPTION

» **Contraceptive pill** Start taking this three to four weeks after giving birth. If you're breastfeeding, we recommend a progestogen-only pill (derivative of the mini-pill). This is a very reliable method, provided you regularly take the pill at the same time. Once your baby has been weaned, you can switch back to your normal pill.

» **Coil (IUD)** A hormonal coil can be fitted six to eight weeks after the birth. Following a Caesarean section, you should wait approx. three months before having a coil fitted. For women who've already given birth, it's usually very easy to have a coil fitted. This method offers extremely reliable protection for up to five years.

» **Implanon** The hormone implant, Implanon, consists of a plastic tube containing progestogen. The tube is inserted under the skin via a small incision on the inside of the upper arm. The implant offers reliable long-term protection for three years.

» **Other forms of protection** Condoms, vaginal diaphragms, etc., are particularly suitable if other options cannot be considered for medical reasons.

» **Sterilisation** If you definitely don't want any more children, your fallopian tubes can be tied. This procedure cannot be reversed and is usually only offered to women aged over 30 with two or more children. If you opt for this procedure during preg-

nancy, i.e. before the birth, your fallopian tubes can be tied while you're on the maternity ward. This is usually done via a small incision to your tummy button under general anaesthetic. Sterilisation can also be performed at a later point using a laparoscopy. Ask your GP about this.

MALE CONTRACEPTION

» **Sterilisation** A vasectomy is performed by a urologist. The sperm ducts are severed under local anaesthetic. Sexual function is unaffected by this. This procedure is only offered to couples who have conducted a family planning review, as it cannot be reversed.

WHILE BREASTFEEDING

The following contraceptive methods are particularly suitable:

- » **Low progestogen pill** (without oestrogen)
- » **Coil** (hormonal or copper)
- » **Condom** (less reliable)

CONTACTS

Breastfeeding advice, Tel. +41 41 399 33 80

Available 24/7

Office hours: Monday to Saturday, 8 am to 4 pm

Gynaecological outpatient clinic, Tel. +41 41 399 32 10

Office hours: Monday to Friday: 8 am to 12 noon
and 1 to 5 pm

- » Pregnancy check-ups including for high-risk pregnancies
- » Gynaecological examination following the birth
- » Annual gynaecological check-up
- » Contraceptive advice and support (e.g. coil insertion)
- » Infertility advice/support
- » Unwanted pregnancy advice/support
- » Midwife consultation

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