

COMBINATION FEEDING: HOW TO SUPPORT PARENTS? FACTSHEET

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WHAT IS COMBINATION FEEDING?

Combination feeding is a common infant feeding method, and it is therefore imperative that healthcare professionals are equipped to support parents who may choose to combination feed their baby. Combination feeding involves a parent partly breastfeeding with the addition of a bottle which may be expressed breast milk or formula milk¹.

Why have parents chosen to combination feed?

Understanding the parent's individual reason for combination feeding is useful when supporting their choice. Combination feeding may be the chosen method of feeding for parents for a variety of reasons such as:

- To support a journey to exclusive breastfeeding where there are breastfeeding challenges to overcome.
- Expressing breast milk may be used as a method of increasing low milk supply in a mother.
- If a parent is required to be away from their baby, for example if returning to work and another care giver is required to feed the baby.
- To enable another parent or care giver to bond with the baby through feeding.
- To allow the breastfeeding parent a break from breastfeeding or time to gain extra rest.
- If a baby has been bottle fed from birth and the parents now wish to breastfeed².

When to start combination feeding?

There is no specific time scale as it will vary for every individual family. It is generally recommended to establish breastfeeding prior to introducing a bottle, typically this may take 6-8 weeks and parents should be supported as much as possible with positioning and latching their baby at the breast during this time².

Parents may wish to combination feed from birth, it is important to explain this may cause some breastfeeding challenges such as:

- In the early days and weeks a woman's body is establishing an adequate breast milk supply and introducing a bottle of formula may inhibit this important adaption. Supporting new mothers to breastfeed and express breast milk regularly both day and night time will help support their milk supply.
- Establishing good breastfeeding positions and latch can take time and patience and this may be prolonged or further challenged by the introduction of early bottles.
- When combination feeding formula milk, the baby will still receive some of the antibodies in breastmilk some of the time, but will not receive as many as when a baby is exclusively breastfed^{3,4}.

It is important parents have the equipment necessary for bottle feeding and are confident in expressing milk or making up a formula feed as appropriate, and sterilising the equipment.

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How to introduce a bottle?

Whether parents wish to introduce a bottle of expressed breast or formula milk it is advisable to make this change gradually to allow time for both the mothers' body and the baby to adapt².

If choosing to use formula milk, breastmilk supply may be reduced as milk supply works on a supply and demand basis and naturally the demand will be lessened if a baby is feeding from the breast less often. If the mother is expressing breastmilk to be given in a bottle this is less of a concern. However, to protect an adequate milk supply staggering bottle feeds between breastfeeds to ensure regular breast stimulation is important. Women should also ensure they breastfeed or express overnight to facilitate the supply and demand cycle of breastmilk during both day and night-time⁵.

On the other hand, women may also have the reverse problem in that they have additional milk supply leading to breast engorgement. A gentle, gradual transition into combination feeding should also help in preventing this. However, if women do experience engorgement, they should be supported to gently hand express off the excess milk to make them more comfortable and help to mitigate complications such as blocked milk ducts and mastitis⁶.

When bottle feeding a baby, they tend to inhale more air bubbles than when a baby feeds from the breast. These bubbles may become trapped in their stomach causing wind and discomfort, so it is important to explain to parents the likely need to wind their baby more often during and or after feeding from a bottle⁷.

How to support combination feeding

It is important to understand that babies are required to suck differently from a bottle than from the breast and this transition may take time. Every baby will adapt to this change and establish combination feeding at a different rate.

Explaining to parents that a gentle and gradual approach is best when introducing a bottle and encouraging their baby by:

- Introducing the bottle when a baby is content and not too hungry.
- Asking someone other than the breastfeeding mother to provide the bottle feed, as if it is their mother, baby will be able to smell the breastmilk and therefore are likely to root for the breast and be less inclined to accept a bottle.
- Being patient and not feeling that their baby must finish all the milk in the bottle, being led by their appetite.
- Practicing responsive bottle feeding with their baby. This means responding quickly to your baby's needs during a feed, recognising their feeding cues, not being distracted whilst feeding your baby or encouraging them to over-eat^{8,9}.

Healthcare practitioner's role in supporting families

As a healthcare practitioner it is important to provide families with evidence-based information about their infant feeding choices and to support them accordingly on both a practical and emotional basis. Continued breastfeeding should be encouraged given the substantial health benefits to mothers and babies; combination feeding may be a way to help achieve this for families.

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