

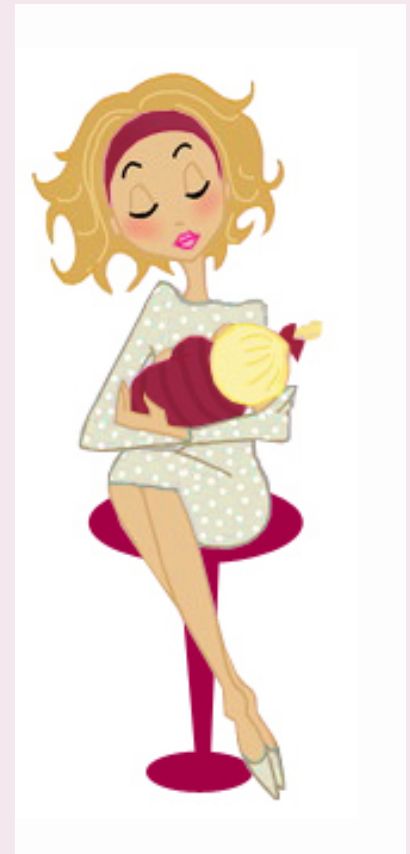
USING A SHIELD

When I first trained as a Lactation Consultant we were told NEVER to use a shield on breastfeeding women.

We were told they were overused and mostly “not needed”.

The pendulum swung too far and I believe many woman were denied the opportunity to breastfeed their baby.

I use it cautiously and try everything first, but usually the moms and babes are happy when we decide to use a shield, especially when the baby has something to grab onto and begins to nurse.



FOR THE NURSING MOTHER

USING A SHIELD

Every medical decision is first evaluated with
RISK VS BENEFIT.

I believe that the benefits of breast milk outweigh the risks of using plastic on the breast.

The reasons I use shields are:

- ❖ Inverted nipples
- ❖ Flat nipples
- ❖ Pre-mature babies
- ❖ Babies with tactile issues
- ❖ Older babies that are used to plastic from a bottle



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Inverted nipples are nipples that collapse in on itself making it impossible to latch the baby on because there is not enough tissue for the baby to pull into the back part of his throat.

Flat nipples are nipples that are flat (not protruding) but they do not collapse in on themselves.



- **Premature babies** were often gavage feed, then given bottles and pacifiers. They either have nipple confusion, or they need the tactile feeling of the shield.



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Sensory issues are often seen with babies even when they are very young. The feel of the nipple and the lack of structure of the breast in the baby's mouth seem to bother them, so a shield can sometimes make the baby feel more centered and secure.

Bottle fed babies will often have nipple confusion. They may feel uncomfortable with the taste and smell of skin. We often begin with shield feeding, and then suggest the baby begin to suckle on the parents finger (rather than a pacifier), so the baby can begin to taste and smell skin.

- ❖ *It is suggested that the mom dips her finger into some pumped breast milk and allow the baby to suckle the milk off of the finger to begin to have a positive association with skin.*

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Nipple shields come in 3 sizes:

- ❖ 16ml- (size of pencil tip-to dime)
- ❖ 20ml- (size of dime)
- ❖ 24ml- (size of nickel or quarter)

When sizing a mother we look at the size of the tip of the nipple, **NOT** the size of the areola. Often the tip of the nipple is compared to the size of coins.



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RULES FOR SHIELD FEEDING

1. **Center** the shield (if the shield is off center the mother will get a bruise).
2. Make **breast pointy** realizing that the baby still needs to get breast tissue into his mouth not just the tip of the nipple.
3. Latch baby **very deeply** onto the breast allowing the shield goes deep into the baby's throat (between the hard and soft palate).
4. Listen for baby **swallowing** on the breast rather than looking at the clock.
5. Make note that sometimes women need to purchase two different size shields since some women have two different size nipple tips.
6. There is no need to pump after each feed if you breastfeed with a shield.
7. If breastfeeding techniques are correct, women using a shield will not have a reduced milk flow and can thus nurse her baby for years.
8. Often, women that require a shield on their first baby may not need a shield with subsequent babies.

USING A SHIELD DISCLAIMER

Using a shield while breastfeeding should be monitored by a qualified practitioner.

- ❖ **Baby should be weighed weekly to ensure proper weight gain.**
- ❖ **Baby should be encouraged to suckle on moms finger between feeds keeping the option open of weaning the baby off the shield and back onto the breast.**
- ❖ **Pacifier use should be used only for short periods of time, if at all.**