

## Diabetes, Feeding Your Baby, and You: for use in Maternity Services

Congratulations on your pregnancy. This information leaflet is about feeding your baby when they are born when you have Type 1 or Type 2 Diabetes or Gestational Diabetes (GDM).

Our Specialist Diabetes in Pregnancy Infant Feeding Team are here to provide you with information and support to help you feed your baby. We can meet with you during your pregnancy to answer your questions and provide you with information so that you can make an informed decision on how you would like to feed your baby.

Once you have given birth, we are available on the postnatal ward to provide you with practical feeding support, no matter how you choose to feed your baby. For our contact details, see the end of the leaflet.

### Why is breastfeeding important for your baby?

UNICEF state that breastfeeding is among the most effective ways to protect maternal and child health and promote healthy growth and optimal development in early childhood. Breastfeeding provides many health benefits to your baby and you.

For baby, breastfeeding can reduce the risk of:

- SIDS (sudden infant death syndrome)
- Leukaemia
- Eczema
- Obesity
- Type 2 diabetes
- Type 1 diabetes
- Ear infections
- Respiratory conditions (such as Asthma)

There are extra benefits of breastfeeding for baby when their mother has had diabetes in pregnancy:

- Babies born to mothers with diabetes are at greater risk of developing diabetes and other metabolic disorders (such as heart disease and stroke) in their future. Breastfeeding helps reduce these risks.
- Some babies born to mothers with diabetes experience low blood glucose (hypoglycaemia) after birth. Breast milk is the best solution for low blood glucose.

### Why is breastfeeding important for you?

Breastfeeding can reduce your risk of:

- Type 2 diabetes (if you have gestational diabetes)
- Obesity
- Cardiovascular disease
- Osteoporosis (weak bones)
- Breast and ovarian cancer

- If you have Type 1 diabetes, breastfeeding may lower your insulin requirement.
- Breastfeeding for 6 months or less after having had GDM reduces your risk of developing Type 2 diabetes in your future by 25%
- Breastfeeding for 6 months or more after having had GDM reduces your risk of developing Type 2 diabetes in your future by 47%.

We recommend that babies start breastfeeding within 30 minutes of birth and are exclusively breastfed for their first 6 months. From age 6 months, children should continue to breastfeed for two years and beyond, alongside eating solid food. However, any amount of time you breastfeed is beneficial to your and your baby's health.

If you choose not to breastfeed, offer your baby their first feed in skin-to-skin contact within 30 minutes of birth and use first stage infant formula only until your baby is 1 year old. For more details, search Formula Feeding on the NNUH website.

### **Why is Colostrum (the first milk you produce) so important for your baby?**

#### **Colostrum:**

- Is the perfect first food for your baby.
- Stabilises your baby's blood glucose levels.
- Protects against your baby developing diabetes.
- Reduces your baby's risk of developing jaundice.
- Protects your baby from infections and allergies.

### **Why hand express antenatally?**

- If your baby does not breastfeed straight after birth, or they experience a period of low blood glucose, you can feed them the colostrum you hand expressed during your pregnancy. This can avoid the need to give artificial formula milk.
- It helps to get breastfeeding off to a good start.
- It helps your milk supply to become established sooner.
- Hand expressing antenatally helps you feel prepared to hand express should you need to use the skill once baby is born.

If you find that that you cannot hand express any colostrum before birth, please do not worry. This is not an indication that you will have difficulty in producing milk after birth. Sometimes it takes a little while to get going. For more details, search *Expressing your breastmilk* on the NNUH website.

### **Top tips for getting breastfeeding off to a good start**

Mothers with all types of diabetes can successfully breastfeed. Some mothers with diabetes *may* have a delay in their milk arriving after baby is born, however the chance of this happening can be reduced by following these tips:

- Learn to hand express from 36 weeks' gestation as this reduces the chance of infant formula needing to be given to your baby if you intend to breastfeed (search *Expressing your breastmilk* on the NNUH website).
- Seek early breastfeeding support – all maternity staff are trained to help you.
- Feed your baby frequently, whenever they show signs that they are hungry (e.g. moving hand to mouth, turning head, squeaking noises, licking lips). Frequent feeds help prevent low blood glucose levels.
- Have skin-to-skin contact with your baby straight after birth and continue to do so. Skin-to-skin contact keeps your baby warm, stabilises their heart rate, breathing and blood glucose, reduces your and baby's stress levels and helps breastfeeding get off to a good start.
- Keep your baby close to you.
- Check that your baby's nappy output is normal. For more details, search *Top tips for successful breastfeeding* on the NNUH website.
- If breastfeeding is delayed for any reason (e.g. baby is reluctant to feed) then start hand expressing straight away. Ask for colostrum syringes to express into.
- If your baby experiences low blood glucose levels in the hours after birth, then breastfeed your baby or give your baby your hand expressed colostrum if they do not directly breastfeed. Follow this with hand expressing.
- If you have Type 1 diabetes, have snacks at hand during feeds/expressing and monitor your blood glucose levels. Adjust your insulin requirements as needed.
- If your baby needs time on the Neonatal Intensive Care Unit (NICU) then ask staff to provide you with a double electric pump and start expressing as soon as possible after birth. Staff will show you how.
- Seek peer support. There are various Breastfeeding Support Groups run by highly qualified Breastfeeding Specialists in Norfolk and Suffolk. These are free to access - For more details, search *Breastfeeding support* on the NNUH website.
- It is safe to breastfeed whilst taking insulin.
- Some women with diabetes are more susceptible to mastitis, (inflammation, and sometimes an infection, of the breast) and thrush. This is more likely if your blood glucose levels are above target. For more information, ask the Diabetes Feeding Team or your midwife.
- Eat a well-rounded diet – for details, search *eating a balanced diet* on the NHS website.

## Donor Human Milk

If your baby temporarily requires milk in addition to your own in the early postnatal days, then we aim for donor human milk to be available for mothers with diabetes. For donor human milk to be available for your baby, we need you to contact the local Human Milk Foundation Norfolk Project Coordinator at [diabetesfeedingteam@nnuh.nhs.uk](mailto:diabetesfeedingteam@nnuh.nhs.uk) during your pregnancy. The coordinator will contact you to discuss donor human milk, answer your questions, and support you in making an informed decision. If you sign up for this option, then the coordinator will be able to provide you with specialist lactation support throughout the early weeks of your baby's life, whether or not you end up using donor human milk temporarily.

## Formula feeding

- If you decide not to breastfeed, we are here to support you with sterilising, making up artificial formula safely and paced bottle feeding techniques.
- You may still consider hand expressing for your baby antenatally or just after delivery so that their first feed is your colostrum. This is packed with antibodies and is often referred to as baby's first 'immunisation'.
- Breastfeeding isn't 'all or nothing' - some families choose to feed their baby with breastmilk via bottle or combine breastfeeds and formula feeds. 'Combination' feeding is still extremely valuable to you and your baby. For details, search *how to combine breast and bottle feeding* on the NHS website or contact our team or your Midwife for more information.
- For families who decide to formula feed, there are useful resources on the UNICEF Baby Friendly Initiative website. Search infant formula and responsive bottle feeding.

## Contact details:

Email: [diabetesfeedingteam@nnuh.nhs.uk](mailto:diabetesfeedingteam@nnuh.nhs.uk)

Please note that we work part-time, we aim to respond to you within 5 working days.

If you have urgent questions sooner, please contact your Midwife via CallEEAST on 01603 481222 – available 24 hours a day, 7 days a week.

## Service Feedback:

To assess your experience of our service, we would like to request you to complete a survey feedback form after your care. – please use the QR code provided. The legal basis for this activity under UK GDPR is article 6(1)e Public Task, exercise of public authority.

Your feedback will be anonymous, no identifiable information is required from you. If you decide not to provide feedback, this will not affect the care you receive from us. A summary of the feedback themes will be shared with the Norfolk and Waveney Local Maternity Neonatal System and UNICEF UK Baby Friendly Initiative as part of our accreditation process.

Diabetes in Pregnancy Infant  
Feeding Team Feedback

