

How to feed Babies with Cleft using Medela SpecialNeeds Feeding Bottle?



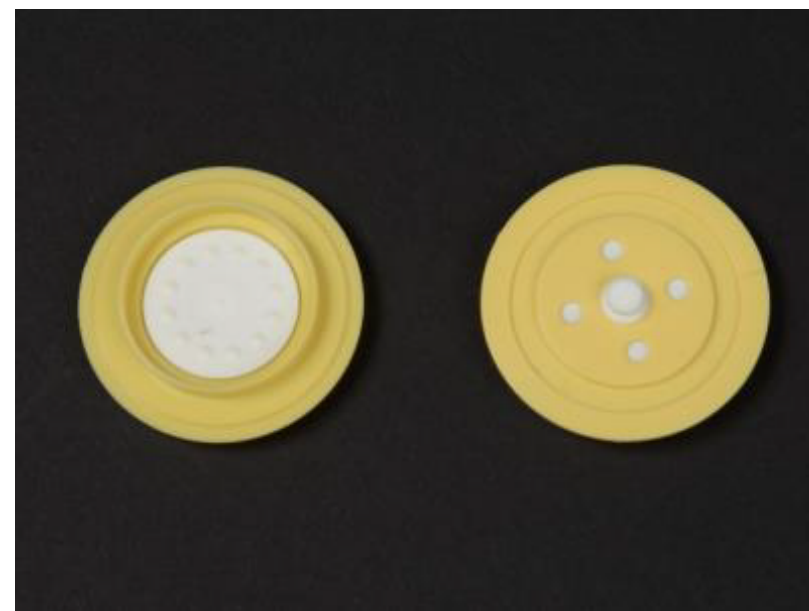
Important to follow these Feeding Guidelines



Not having the appropriate weight for his/her age means delays in surgical interventions to repair clefts.

Assembling the Bottle

1. Put the nipple in the collar.



2. Press the white valve membrane into the yellow disc..



3. Put the assembled valve membrane into the nipple

Make sure the white valve membrane (with the raised bumps and high rim of the disc) is facing the inside of the nipple.

4. Fill the bottle with breast milk or formula.

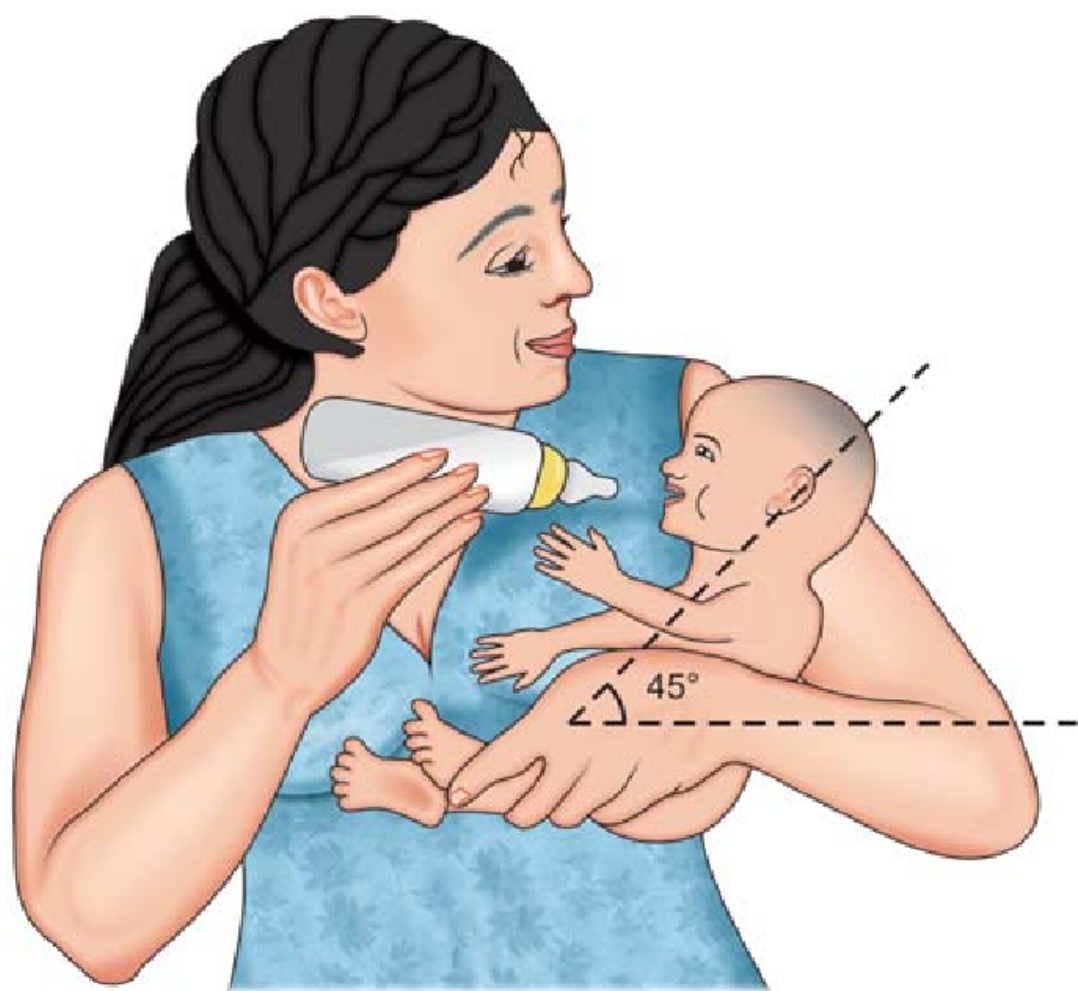


5. Put the assembled nipple and collar over the container.



6. Screw all the parts together using the collar, taking care to not overtighten.

Positioning the Baby for Feeding



- Most babies with a cleft lip and/or a cleft palate will feed better in an upright cradled position to help prevent liquid from going back up into their nose.
- Feeding times must be kept less than 30 minutes, including time for burping. If feedings last longer than 30 minutes, the baby may be working too hard and burning too many calories.
- The baby may need to be burped every ½ - 1 ounce because they could be taking in extra air with feeding because of the cleft.

Using the Bottle Correctly



- When feeding, the appropriate flow rate for the baby needs to be identified.
- To adjust the flow rate, turn the bottle and orient the identified flow rate line to the baby's nose. Adjust as necessary based on the baby's cues.
- At the first feeding, it may be helpful to use the minimum flow (shortest line) at first until your baby begins sucking, then turn the nipple toward the middle line to begin the flow.
- Turn the nipple to the minimum flow rate line if the baby gets overwhelmed or shows signs of distress. For example; loud swallows, coughing, choking, or experiencing loss of milk from the corners of their mouth.

- Some babies tolerate the flow that is delivered in between the flow rate lines. For example, they may do best in between the longest and the middle flow rate lines.
- Some babies need additional help in pulling milk from the nipple. If so, the nipple can be GENTLY squeezed. (Don't do this unless suggested by a feeding specialist/ a nurse to determine if this technique is needed, as not all babies need this additional assistance).
- When using this technique, provide gentle squeezing of the nipple in rhythm with your baby's sucking pattern and stop squeezing when your baby stops sucking.



If the baby is losing weight, coughing or choking while feeding, contact Cleft Care Mauritius or the baby's doctor immediately.