

Breastfeeding & Infant Nutrition

Family Talk - February 25, 2020

With Dr. Terlika Chisholm-Smith

Pediatrician's Profile:

Dr. Chisholm-Smith was born and raised in Nassau, Bahamas where she received her early education at Xavier's Lower School and St. Augustine's College. She then went on to obtain a Bachelor's Degree in Biology from Macalester College in Minnesota. She received her Medical Doctorate degree at Wake Forest University School of Medicine in Winston-Salem, NC. She did specialty training in Pediatrics at Jackson Memorial Hospital in Miami, Florida and received board certification with the American Board of Pediatrics in 2007. She is a consultant Pediatrician at The Princess Margaret Hospital and Associate Lecturer at The University of the West Indies Medical School Bahamas campus. Dr. Chisholm-Smith has been practicing Pediatrics in the Bahamas since 2007 and has extensive experience in both inpatient and outpatient Pediatrics. Her current private practice is at The Pediatric Suite at The Walk In Clinic, Collins Ave.

Dr. Chisholm-Smith:

Today, we're going to be talking about infant nutrition. How many of you have been urged by your healthcare provider to breastfeed your baby? What is the reason we as healthcare professionals push this breast feeding thing so much?

I want some audience participation. Who can give me one benefit of breastfeeding?

Audience:

(Nutrients, immunity)

Doctor:

Who knows what immunity means?

Your body has the ability to fight off infections. When your baby comes into the world, s/he comes like a clean slate. Some of their immunity, or the protection against infection, starts when the baby is born, so you actually pass on *your* antibodies to baby while you're pregnant. You continue to pass on those antibodies if you breastfeed, so all of those coughs, colds, and diarrheal illnesses that you had as you grew up, throughout your lifetime--you produce antibodies to these things, and when you breastfeed, you pass on that protection to your baby.

So infants who have been breastfed are known to have less illnesses, particularly in the toddler years, and these immunities continue to protect them in early childhood. When you look at worldwide statistics, the chances of a baby dying from any infection is greatly reduced if they are breastfed. Healthcare providers push breastfeeding so that we can have healthier babies with fewer infections.

Can anyone give another benefit of breastfeeding, either for the baby, or for the mom?

Audience:

It's practical, very practical.

Say you are in your bed and the baby is crying, all you have to do is to leave the bed.

If you bottle feed, you have to sterilize the bottle, wake up in the middle of the night with one eye open, the other one closed, find the powder, find the water. It's more convenient if you want to travel. All you have to do is have confidence, don't be ashamed. This is natural. Feel proud that you can feed your baby.

Doctor:

She raises some very important points right there. First, breastfeeding is pragmatic. Breast milk is ready made, the perfect temperature and formulation.

I speak to formula companies all the time. They say, "This is the brand new thing in our formula." They are always trying to simulate breast milk, but they can never match its genius.

When you talk about its practicality, breastmilk requires no preparation.

This mom made another great point about not feeling ashamed to breastfeed in public. Depending on the social setting in our community, some women are made to feel ashamed to take out the breast to feed their babies, which should never be the case.

In fact, some of the outfits our young ladies are wearing now expose just as much breast as breastfeeding does.

Breastfeeding is *natural*. If you think about it, infant formula was invented in the early 1800's. The human race has been around for thousands of years. Before infant formula, the only thing that sustained the human race was breastmilk.

So don't let anyone make you feel ashamed of doing something that is natural, something designed to sustain us as a race, along with every other mammal. Breastfeeding is natural--just do it!

Anything else?

Audience:

Weight loss for the mother

Dr. Chisholm:

Who can get about how many calories you burn per day if you breastfeed your baby?

You can burn anywhere between 200 to 500 calories per day.

How many of you hit the treadmill, or do stair climbers, or any of those machines that show the calories you're burning? How long do you think you have to be on the stair climber to burn 500 calories? ...a long, long time, If you breastfeed, just sitting there, your body has to make breast milk. You are the energy source for your baby.

Remember, energy is neither created nor destroyed. You as a mother generate energy in the form of calories, which is how you actually end up burning them by breastfeeding. Your body has to make that food. The calories that you consume are used to feed your baby.

Audience

I have read about educational benefits for children who are breastfed.

Doctor

Right, you're talking IQ. If you test a large population of breast- versus bottle-fed children, the children who have been breastfed test higher than those who were not. The brain development of a breastfed child is generally superior to that of a non breastfed child. That's not to say that if a child is formula fed that they can't attain normal intelligence. But if you look at things from a general population standpoint, the breastfed child will perform better than the non breastfed child.

Commentary from non-Bahamian audience member

This is not magic, not hard to figure out. A breastfed baby is always awake, always observing the mother and what's going on around them, while a bottle-fed baby has to digest cow's milk! You know, I come from a culture where breastfeeding is automatic. There is no other choice. When I talk with people here, I don't understand why you don't promote nature. Nature is what is normal!

Cow milk is made for cows!

Breast milk is light in the morning, keeping the baby alert. In the evening, the milk is heavier, letting the baby sleep. Now let me tell you something. A breastfed baby is going to keep you busy all the time, but s/he's alive!

Doctor

We're going to go on to talk about formula. In some situations mothers are not in a position to breastfeed. This talk is not intended to make any mom feel inferior for using formula feeding, but instead to encourage you, that if you are able to, please breastfeed.

I have spoken to mothers who, in virtue of their jobs, or because they lack support, are not able to breastfeed. We as Bahamian women are very career-oriented, and may not find our workplaces conducive to, or supportive of, breastfeeding.¹

Audience

Bonding

Doctor

¹ https://www.cdc.gov/breastfeeding/pdf/BF_guide_2.pdf,
<http://makeitourbusiness.ca/blog/how-support-breastfeeding-moms-workplace>

When that baby breastfeeds, s/he is closer to you. Holding baby to the breast creates an even tighter bond as compared to formula or bottle feeding.

What about the benefits to the Mom? Did you guys know that there are benefits to the mom as well?

Audience

I have three children. It keeps you in very good shape, you will heal faster, and it's cheaper.

Doctor

Yes, you spend roughly \$35 a month on formula, but nothing to breastfeed.

Another significant maternal benefit is a reduction in cancers, particularly breast and ovarian cancers. Statistically, mothers that breastfeed have a decreased chance of developing breast cancer. Studies show that every 12 months of breastfeeding reduces your chance of breast cancer by about 4% , and that is additive. If you breastfeed three babies for 12 months, that's 36 months, the mother would be 12% less likely to develop breast cancer. Similarly, the longer you breastfeed, the less likely your chances of developing ovarian cancer. As you are aware, the rate of breast cancer in Bahamian women is very high. So consider that when you breastfeed, you help to protect yourself from both breast and ovarian cancer.

Audience

What benefits apply if you breast- and formula feed?

Doctor

Your child still gets the benefits of breastfeeding, even if you formula feed. Exclusive breastfeeding provides the most benefits. But any breast milk is better than none. These effects are all additive. The more you breastfeed, the better for baby and for you.

If you can't exclusively breastfeed, if the workplace doesn't provide supportive breaks, privacy, facilities, just do what you can. As soon as you get home, make sure that baby is breastfeeding throughout the night. Use the time you have with your baby for breastfeeding.

Antenatal preparation for breastfeeding

Expectant mothers can start preparing for breastfeeding even before you deliver. You can get supplies, like breastfeeding pillows. While you can use a regular pillow, I like the Boppy pillows. They wrap around you, providing an armrest for you, and supporting the baby.

You will also need breast pads. When you breastfeed, the milk may at times leak on your clothing, and the pads will absorb overflow.

Breastfeeding bras are really important. You need a strong, supportive garment with multiple hooks. If you don't support your bra while you're breastfeeding, your breasts will droop afterwards. Breastfeeding bras have front flaps providing easy access, rather than your having to completely disrobe.

A working mom's best friend is a good breast pump. While you can hand-express milk, pumps allow you to extract milk when you're away from your baby, storing them into sterile breast milk bags which are then refrigerated. Fresh, refrigerated breast milk lasts about 5 days, and frozen product lasts up to 6 months. Breast milk reserves allow alternate child minders to provide baby with perfect nutrition when you return to work.

Formula feeding

Although we strongly support breastfeeding, there are instances when babies must be fed by formula. Here are some recommendations around preparation of formula.

Make sure that area in which you're preparing the formula is clean. You don't want to be seasoning meat or chopping vegetables in the same place you're preparing baby's food. Avoid any cross contamination from the work surface.

Sterilize bottles, caps, nipples and utensils after purchase and prior to each use. Babies are still developing immunities and are very sensitive to infections, so whatever we put in their mouths must be spotless. Wash bottles and mixing implements with dish detergent, rinse well. Place in a pot, cover with water, bring to the boil, and sterilize for five minutes. You can also use modern sterilizers designed for use in the microwave.

Always wash your hands before you mix the formula.

Follow the instructions on the can. There are many different types of formula. Don't use the scoop from one brand to measure formula for another. You want to ensure that the milk is neither too diluted nor too strong.

Complementary feeding

The American Academy of Pediatrics recommends introducing solids at four months, while the World Health Organization recommends a 6 month start.

Start with simple, easily digested foods like infant cereal. Some parents begin introducing pureed vegetables and fruits as well. Babies are sensitive to texture. To a bowl of infant cereal, add breast milk or formula until you have a nice, smooth consistency.

Make sure the baby is sitting upright, either in your arms or a high chair. Remember that your baby has to learn to process new foods. Expect that when you introduce new foods, you may have to try up to ten times to reintroduce that flavor. If baby spits out the food, try something else, and return to the flavour another day. The variety develops baby's taste buds, and reintroduction prevents baby from becoming a picky eater.

A variety of foods contribute multiple nutrients, and color is a clue. Orange foods are rich in Vitamin C, green veggies offer iron, and as baby gets older, a variety of richly colored fruit and vegetables offer complex nutrition.

Audience

I come from Spain. If you want to know why many infants reject “baby food,” try tasting some of the processed food. It tastes awful, no wonder they’re not interested!

We start by feeding our babies mashed, fresh fruit. We introduce varying fruits one at a time, to help baby build acceptance for various flavours. We don’t buy baby foods, we make them at home. At six months, we’ll add a little rice. At 9 months, we add a little fish or finely minced chicken. We squeeze fresh orange juice, put it on a spoon, and give it to our babies. We also finish flavors with a little olive oil, which is a healthy fat we always have on our tables. We want healthy babies, not plastic babies. We don’t serve them “plastic” food.

Doctor

This mom has a great point. To maximize infant nutrition, avoid processed foods. I always encourage my clients to make their own baby food, using a blender, food processor, or Nutribullet. Steam fresh veggies and fruit, blitz, and you have baby food for the week. Use local fruit like mangos and dillies, which have never been sprayed with pesticides.

Start introducing seasonings early, thyme, turmeric, cumin, not salt or pepper. These flavors help to develop baby’s palate. If you introduce a variety of flavours early, you won’t end up with a picky eater.

Once baby has tolerated a variety of starches, vegetables, and fruit, we begin introducing finely pureed meat around nine months. Blitz with a little water in the blender, then add to something baby already enjoys, like mashed potatoes or squash.

Up to 6 months, babies may be fed exclusively with breast milk. After that, they need complementary foods offering enough protein and iron, to avoid iron deficiency. Iron-rich foods include green, leafy vegetables and legumes. Pigeon peas and lentils are very rich in iron. They are a great substitute for meat if you follow a vegetarian diet.

A grandmother in the audience offers advice on how to get started, and keep up with Breastfeeding

One of the best resources available to help new moms with breastfeeding is a book called, What To Expect When You’re Expecting.

The best way to introduce babies to breastfeeding is within the first hour of life. Unfortunately, our hospitals have moved away from a very natural process that used to start the moment a baby was born. Instead of giving a baby to Mom and helping them connect by breastfeeding, baby is handed off for processing. First, the pediatrician handles baby, then on s/he is handled in the nursery, warmed, bathed, and often fed formula. Eventually, the baby comes out for inspection by you and your partner, and in the meantime, you have lost precious time connecting and bonding. When babies are born, they soon start rooting, using the sucking reflex. This is the ideal time to place the baby at mama’s breast, and help the baby latch.

It is so important to allow babies and mothers this time at birth, and to offer them the proper support. Breastfeeding is painful at first, and the mother needs help to ensure that baby latches properly. The heavy breast, not just the nipple, needs to go into baby's mouth. The baby has to be trained to breastfeed, and both mother and infant need experienced support. Additionally, when baby is put on the breast just after birth, it stimulates a hormone which prompts delivery of the afterbirth.

Colostrum is automatically produced, but a baby who is breastfed has to work with you to produce milk.

The first week of breastfeeding is crucial. Everytime you hear the baby cry, you secrete a hormone that helps you produce milk. So you and baby start working in tandem. When s/he is crying, and you produce milk that satisfies your baby, you develop a powerful bond. Plus, breastfed babies have stools that don't smell as strong as formula-fed infants.

Doctor

This kind of information is helpful, the secrets handed on by women from generation to generation. It takes a village.

If you deliver in hospital and don't specifically ask to have your baby given to you immediately after birth, it probably won't happen. To you and your partner, this is the moment of a lifetime, but to the hospital, you're in a baby factory. That's how it works. We really have to get back to this natural method of placing baby at the breast just after birth, when baby's instinctive rooting reflex helps encourage nursing. With a normal, vaginal delivery, breastfeeding loosens the womb and actually assists with delivery of the placenta.

You have to specifically make the request to your nurse that you don't want the baby to receive formula.

Breastfeeding techniques

"Latching" is how we describe the way babies connect to the breast. Both the nipple and the areola--the dark part surrounding the nipple--go into baby's mouth. Make sure that baby's mouth is wide open, and that the lip is curled outward, not in, to provide a nice latch.

You can know when a nice latch when you see baby has a strong suck and you hear the gulp. You'll hear a "suck-suck-suck-gulp" while baby is feeding, and you may even see a little bit of milk draining down the mouth.

Many parents ask, how do I know is getting enough to eat? After nursing on both sides, you may notice that they pull away, or relax your arms. They may fall asleep; they are just satisfied.

If they continually cry after emptying both breasts, there may be a problem. But for the most part, that satisfaction after the feeding tells you that the baby is getting enough milk.

Another indicator is urination. A healthy well-fed baby has about five wet diapers per day. If baby isn't getting enough to eat, the body will hold on to its water, and when you change the diaper, it will be dry. If a baby has consistently dry diapers throughout the day, that can indicate that s/he is not getting enough milk.

If baby is growing, and has at least five wet diapers per day, then s/he is getting enough milk.

For those of you who pump your breast milk, be aware that what you express by machine is not equivalent to what baby is able to extract. Your baby is able to nurse more than an artificial pump can obtain from your body.

What about breastfeeding issues?

Even after breastfeeding is well established, a mother may wake up with a blocked duct, producing pain and making her apprehensive about nursing on that side. While counterintuitive, it's important to allow baby to nurse on the uncomfortable side, as sucking will often help dislodge the blockage. You can get into a hot shower to ease the discomfort, or express milk by hand, increasing pressure to force release of the clogged duct.

Breastfeeding pain may occur when baby does not latch properly, does not take the entire areola into the mouth. Another issue that occurs after continuous breastfeeding is that the nipples may become cracked and dry. Keep nipples moisturized with lanolin cream or gel, or simply coat them with a little breastmilk.

Another issue is that babies sometimes develop a yeast infection called candida or oral thrush. Then when baby breastfeeds, the nipple contracts thrush, producing a painful, pins-and-needles sensation. Your doctor will provide an oral medication for baby, and give you a breast cream to treat the infection on your skin. Of course, you'll want to wash your breast before feeding baby. In traditional Mediterranean cultures, the breasts are air dried, then treated with olive oil as a curative.

Questions

How do you know when to switch baby from one breast to another?

In general, it takes about 15 to 20 minutes on each breast, but you switch when the breast feels empty. Babies are different. Some are fast nursers. Some babies are what we call grazers. They just take their time, so the mother will feel the breast itself emptying and be prompted switch sides.

Doctor

Breast milk is smart and complex. The beginning part of the breast feed is different than the end. The end component is highest in fat, so babies get the bulk of their calories at the tail end of nursing. It is important that the baby empties the breast. If baby fills up on one side, but not the other, start baby on the unemptied breast so s/he has advantage of full-fat milk.

Breast milk not only changes as you feed, but it changes with time to provide nutrients baby needs as s/he grows. Formula companies just can't match what God designed in breast milk. It's absolutely the perfect food for your baby.

Question

What's the best diet for nursing mothers?

Maternal health is important, because the nutrients a mother takes in are used to produce breast milk. A balanced diet with lots of fruit and vegetables is key. The mother need not be on a high calorie diet. Most Bahamian women don't need to increase their caloric intake. A nursing mother needs about 2,500 calories per day.

Make sure you're consuming enough mother. It's helpful to drink a full glass of water just before breastfeeding. Continue to take vitamins during breastfeeding.

Audience

In Spain we say that breastfeeding mothers eat for one, but drink for two. We encourage moms to drink water as well as vegetable and fish broths. The milk is always going to be perfect. You need to make sure that you take in additional nutrition so that you don't suffer bone loss that shows up in menopause. Your job during breastfeeding is to take good care of you. If you don't take in enough calcium, it won't affect your baby, it will affect you.

Doctor

Let's talk about alcohol consumption. The level of alcohol in your blood exactly matches the level of alcohol in the breast milk. You don't want to breastfeed right after you right after you had a drink. If you want to have a glass or two of wine, I would skip one or two feedings, and then it should be safe for you to breastfeed. Once the alcohol is out of your system is out of your blood, it's out of the breast milk.

We discourage cigarette smoking and encourage smoking moms to quit. However, if you are a smoker, we still encourage breastfeeding. The advantages of breastmilk outweigh the toxic effects of cigarette smoking. I am not condoning cigarette smoking here, but endorsing the marvelous effects of breastfeeding.

We absolutely discourage breastfeeding where the mother is smoking weed/marijuana.

Audience

Can a mother drink coffee while pregnant?

Researchers have found that small amounts of caffeine are not detrimental. They don't at which point caffeine becomes harmful to baby, so it's discouraged in pregnancy. Breastfeeding mothers can have a little caffeine.

When can we discontinue middle-of-the-night feedings?

At about four to six months.

When babies are born, their ability to maintain their sugars is decreased. Adults can go from breakfast to lunch to dinner, and our sugar levels stay about the same. Tiny infants cannot do that because their bodies cannot store the material that produces the glucose. From between four to six months of age, babies develop the ability to fast overnight.

That means you can sleep if you so desire. Now, whether that baby let you sleep, is another story. At the four month marker, they are still waking up every 4 to 6 hours.

Many of us are working moms. NIB gives us 12 weeks' maternity leave. We have to return to back to work at 3 months, which means we need our sleep. You cannot let this new person in your family take over, you're tired and grumpy, and it's just a disaster for the next two years with this kid still waking up in the middle of the night for milk and a bottle. You end up with a baby of nine months who is still getting up in the middle of the night. What do you do?

I'm telling you, and giving you permission, not to do it. That baby does not *need* to eat in the middle of the night. The baby has a want, a desire, but not a need.

So what your your options? What I'm about to tell you will be very difficult. Ignore baby's cries. You're going to have to do that cry-it-out technique. Let him cry. You go through a horrible week, but after that time, it's heaven. It's difficult. I have two kids. I did it at one point. After you go through that, you get to rest. You have to convince yourself not to feel guilty. You need to rest. You have to get to normal life and feel rested. You can't train your children to run the show. It's a learned behavior. They start to learn that when they cry, Momma's not coming in anymore.

Audience

Would you let them cry it out for more than an hour?

Doctor

I would. It's hard. It's not easy, but at the end of the day, the reward will be well deserved.

Audience

What you need to do is to get in agreement with the baby. When the baby sleeps, you sleep.

Doctor

The reason why we push prenatal vitamins is that there's a defect called spinal bifida back where babies are born with partially formed spines, caused by vitamin deficiency. Vitamins decrease the chance of the baby having this specific deformity and other associated issues. We give every mother prenatal vitamins regardless of how good the diet is during pregnancy. If you have an extremely balanced diet, you may not need vitamins while breastfeeding, but you definitely want to take them in pregnancy.

Audience

Are these defects obvious on prenatal scans?

Doctors

Some defects are obvious and it will show up on the scan. Some of them are very subtle and we only see it after the baby is born.

Audience

I ask that question because prenatal vitamins make me sick.

Doctor

Have you tried the gummy ones? I had the same issue when I was pregnant so that I took the gummy prenatal vitamins--they look and taste like gummy bears--and it didn't cause nausea. You can try that.

Audience

What if the baby is colicky?

Doctor

Colic is the bane of our existence as pediatricians. No one knows exactly what causes colic, and no one knows exactly how to fix it. Fortunately, we do know that it's not dangerous and it goes away with time.

Colic usually starts between 2 to 4 weeks of age and it usually ends by the time the baby is about 3 to 4 months. During a certain time of the evening or the afternoon, the baby cries nonstop. You can feed, change, do everything for baby, and s/he just cries for hours at a time. Your pediatrician can't find anything wrong. You rock and roll baby, and s/he won't stop crying.

Colic happens to a good percentage of babies. There are certain things that have been found to be useful. But there's no universal fix for all colicky babies. We teach massage--placing oil or lotion in hand, and gently massaging the infant's tummy in a clockwise direction. That works with some babies. With others, we teach cycling, moving the legs gently in a cycling motion. For other babies, "white noise" seems to work, the background sound of a vacuum, the humming of the dryer running, the sound of the car on a drive. There is some new evidence that probiotics can help to reduce colic. Unfortunately, no one cure eliminates colic--nothing beside time. Eventually it ends in all babies.

Burping the baby frequently in between feedings, and hot baths, tend to help as well.

Audience

What are your views on circumcision?

The American Academy of Pediatrics, which governs pediatricians in the United States, currently recommends against universal circumcision. However, they hold that if circumcision is your cultural or personal preference, it can be done.

When I'm questioned, I talk about the benefits as well as the risks.

Circumcised boys and men have a decreased risk urinary tract infections. Circumcised men have a decreased risk of contracting sexually transmitted diseases, particularly HIV AIDs. Men who are circumcised have a decreased chance of them developing penile cancer, which in and of itself is very rare anyway.

When you look at circumcision from a population standpoint, populations where men are circumcised actually protect the women as well, particularly from HPV infections which cause cervical cancer. In cultures such as Jewish populations where their religion prescribes circumcision, the prevalence of cervical cancer in their women is much less.

With each surgical procedure there are risks. There is the risk of pain, of potential infection, or of excessive bleeding from that procedure. While all of these risks are quite low, they do exist.

I inform parents that it is their personal choice, but you have to take all this information into consideration. My personal opinion, not that of the AAP, is that boys should be circumcised, because of the lower risk of STD's in particular.

The other thing is that by the age of four years old, boys should be able to pull back the foreskin to clean the penis properly. Uncircumcised boys have to take care to make sure they pull down the foreskin for cleaning. If after the age of four that foreskin doesn't come down, you may have to circumcise later on in life, and *that* it's painful. That requires general anesthesia, which means you have to go to an operating room and get put to sleep and everything. When you circumcise them as a small infant, it's just a 20 minute office procedure.

As time goes on, the foreskin will naturally loosen. You don't use any type of force. However far the foreskin goes down, with minimal pulling, you wash the area. Over time that foreskin will loosen, and by the age of four, the foreskin should be able to completely go down.

Most of the pediatricians who perform circumcisions prefer to do it before the age of two months, because it's easier for them to hold the babies. Some pediatricians won't circumcise beyond two months. The earlier, the better.

When I was training in the US, we rotated through a Jewish hospital in Miami Beach. All the boys were circumcised before they were actually discharged from the hospital, in accordance with their faith tradition.

Audience

The reasons the Jews circumcise on the eighth day, is that on that day the baby's body produces a hormone that prevents hemorrhaging.

Audience

Do you have to run to the pediatrician for every illness?

Doctor

An infant of less than two months with a fever is an emergency. You don't treat it at home with Calpol and hope it goes away. A fever at that age can indicate dangerous infections like meningitis, blood infections, urinary infections. Those babies have to be seen right away.

At three months and older, low grade fevers can be managed at home now. It's difficult to give a general rule for this. If the baby looks ill, is not eating or sleeping or as active as they ordinarily are, *and* they have a fever, those babies need to be seen by a doctor.

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If they're older and have a low grade fever, but they are still eating and drinking, then maybe a dose of a fever medication, plus observation, may be sufficient.

This is why it's a good idea to always have a good relationship with your pediatrician, so when you feel in your gut that something is wrong, you call the doctor for guidance. But for sure, if a baby under two months has a fever, you must see a doctor. If the fever presents in the middle of the night, take the baby to emergency.

What's the schedule for feeding babies?

Feed on demand. For very young infants from four to six weeks, don't go more than three hours without a feed. During this critical time, 8 to 12 feeds per day are required for adequate growth and hydration.

You will learn the difference between baby's cries--a hungry, versus a diaper change cry.