

SSWAHS
Mother's Information Sheet
For Complementary Feeding

The National Health and Medical Research Council of Australia and the NSW State Breastfeeding Policy states that routine use of complementary feeds of any kind should be excluded for full-term breastfed infants for the following reasons:

- Formula interferes with the protection against infection that breastmilk is able to provide for your baby
- Breastfeeding works on supply and demand. If feeds are missed or replaced by formula the breasts make less milk
- When milk is not removed from the breasts they become painful and stop making milk
- Your baby may be allergic to the protein in formula
- Demand breastfeeding lessens the chance of baby having early jaundice
- Research shows that giving the baby complementary/supplementary feeds in hospital is significantly associated with a decreased likelihood of continued breastfeeding after discharge

You are strongly advised to:

- express regularly to maintain supply and prevent engorgement
- use expressed breastmilk where available to minimize the potential for cow's milk protein allergy

(Adapted from NH&MRC Infant Feeding Guidelines for Health Workers, 2003, p443 & John Hunter Hospital Consent for Complementary/Supplementary Feeding)