



M.P. SHAH HOSPITAL
A Legacy of Care



BABY & YOU



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PRACTISING GOOD NUTRITION

A Balanced Diet Includes:

Carbohydrates

Maize, rice, potatoes, wheat, sorghum, millet, cassava, plantain bananas, yams, arrow roots, sweet potatoes.

Proteins

Legumes such as beans, peas, groundnuts, peas, cowpeas, red meat, chicken, fish, eggs, milk.

Vitamins

Vegetables such sukuma wiki (kales), spinach, lettuce, cucumber, tomatoes, pumpkin, traditional vegetables (terere, kunde, managu etc).

Fruits such as mango, banana, orange, watermelon, guava, papaya.

Fats & Oils

Fats and oils such as sunflower oil, oil seeds, coconut milk, margarine, butter.

Minimal oil put in food improves absorption of some vitamins such as Vitamin C and provide extra energy.



Pregnant and lactating mothers need to:

- ✓ Eat 3 balanced main meals (i.e. breakfast, lunch and supper) and 2 healthy snacks.
- ✓ Eat plenty of fruits and vegetables, drinking 1.5l - 2l of water every day (8 glasses).
- ✓ Avoid tea and coffee with meals; they interfere with iron absorption and may contribute to anaemia. It's recommended that tea and coffee be taken an hour before or after a meal.
- ✓ Never eat with the notion that you are eating for two. As long as you eat the 3 balanced meals in normal sizes, it is sufficient for you and your un-born child.

Supplements that you need

- ✓ Take Vitamin A supplements immediately after delivery or within 4 weeks as recommended by your healthcare provider. This helps to build your baby's immune system.
- ✓ Throughout pregnancy and for at least 3 months after your baby is born you will need iron, folic acid or multiple micronutrient supplements to prevent anaemia. One is advised to take iron tablets with meals to increase absorption and to decrease potential side effects, particularly nausea.
- ✓ Always use iodized salt to prevent iodine deficiency.

Safe preparation of food

- ✓ Keep preparation area and utensils clean.
- ✓ Always wash hands with clean running water and soap before preparing and eating food.
- ✓ Wash raw fruits and vegetables thoroughly before eating.
- ✓ Soak legumes (such as beans) overnight before cooking.
- ✓ Wash vegetables before cutting, cook immediately for a short time to preserve the nutrients.
- ✓ Cook red meat, fish, eggs until well done to avoid food poisoning.



BREASTFEEDING

How To Breastfeed The Baby

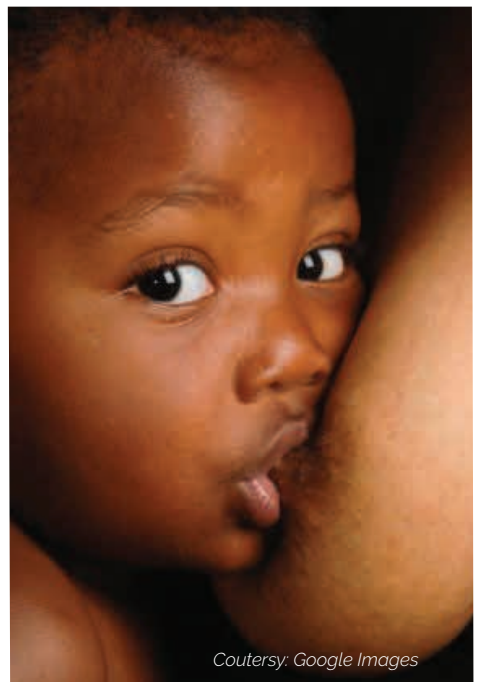
Things you need to know:

Breast milk is the perfect food for the baby. It provides all the nutrients and water that your baby needs to grow during the first 6 months of life.

Colostrum (thick yellowish milk) that is produced during the first few days after delivery is very important because it protects your baby from many diseases.

Exclusive breastfeeding refers to giving your baby breast milk only, nothing else such as milk, food, liquids and sips of water except for medicine prescribed by your doctor/healthcare provider.

It's important for a mother to know her HIV status. A HIV positive mother may pass HIV virus to her baby through breast milk but not all babies become infected. By practicing exclusive breastfeeding, the mother minimizes the risk of the baby getting infected with the HIV virus.



Courtesy: Google Images

Positioning & Attachment During Breastfeeding

1. Mother should sit up-right in a comfortable position with her back straight.
2. Mother should bring the baby to her instead of bending to reach the baby when breastfeeding.
3. Put a pillow on your lap beneath the baby so as not to strain your hand by carrying the baby's weight and also not to strain your back because of bending.
4. Baby's tummy should be facing your tummy.
5. Touch the baby's lips with your nipple. When the baby's mouth opens wide, move the baby quickly onto the breast.
6. To check if baby is feeding well, the mouth should be wide open, lower lip is turned outward, chin touching the breast and cheeks are rounded.
7. The baby should take slow deep sucks while breastfeeding without making too much sound because it means the baby is sucking air.
8. Let the baby finish one breast first and come off on his/her own. This is a sign that the baby has gotten most of the milk out of that breast. Then give the baby the other breast. Generally, the baby should suckle on each breast between 20-30 minutes.
9. Feed your baby day and night, at least every 2-3 hours.
10. Frequent feeding helps your body to produce enough milk and prevents your breast from becoming engorged and painful.
11. You will know your baby is taking enough milk if the baby is passing urine at least 6 times a day and is gaining weight. The baby's urine should be light in colour and not smelling.

Challenges Associated With Breastfeeding

Sores And Thrush

Baby's mouth may develop sores and thrush, therefore always check and if you find any, visit your healthcare provider as soon as possible.

Cracked/Sensitive Nipples

Put some breast milk on them and let the air dry. Breast milk has antibody components that help to heal the cracks, you may also use nipple cream.

Engorged Breast

This is prevented by feeding the baby as many times as possible. In case of engorged breast advice is given to massage the breast with warm water. If there is too much milk production, expressing breast milk and storing is recommended.

Expressing Breast Milk

Reasons for expressing breast milk:

- To feed premature born babies who are too small to suckle well.
- To leave for your baby to drink if you will be away.
- To relieve engorged breasts that have become uncomfortable because of swelling and your baby has difficulty in feeding.
- If your baby is sick, too weak or refusing to suckle.
- To maintain production of breast milk if you or your baby are sick.
- To apply to cracked or sore nipples to help them heal.

Expressing Breast Milk

Breast milk can be expressed using a breast pump or using your hands.

How to Hand Express Breast Milk.

Place your thumb on the breast above the areola (dark area around the nipple). Place your first finger below the nipple and areola. Support your breast with the rest of the fingers.

Gently press toward your chest wall with your thumb and finger together, continue to squeeze the breast while moving your hand away from the chest wall. This should not hurt, if it does then one is not doing it the right way.

Press the same way all around the areola in order to empty all parts of the breast. Do not squeeze the nipple.

Express one breast for 3-5 minutes until the flow slows down and then switch to the other breast. Then do each breast again.

How to Use a Breast Pump.

All breast pumps extract milk from the breasts. Some do so automatically, whether they're powered by electricity or battery. Others are manual, meaning you use your hands to squeeze a lever to extract milk.

All types of pumps have parts that come in contact with your breast milk. All of these parts and accessories should be cleaned with each pumping session using dishwashing soap and warm water. Washing your pump regularly will help keep your pumped milk safe for baby and help you avoid infection.

Things To Remember

Always wash your hands with clean running water and soap before and after expressing breast milk.

Always wash the cup or jar and its cover with clean water and soap.

Air dry the dishes on a rack.

Anyone can feed the baby on the expressed breast milk using a clean open cup. Even a new born baby learns quickly how to drink from a cup.

How To Store and Use Expressed Breast Milk

You can store your breast milk to keep it fresh for your baby in a number of ways:

- > At room temperature (no more than 25 degrees celsius), for up to six hours.
- > In a cool box, with ice packs, for up to 24 hours.
- > In a fridge (at four degrees C or colder), for up to five days.
Store it at the back of the fridge, where it's coldest, away from meat, eggs, or uncooked foods.
- > In a fridge's freezer compartment, for two weeks.

Whether you choose to refrigerate or freeze your milk, you should:

- > Use sterilized containers. Opt for plastic bottles or plastic breast milk bags. Glass bottles may crack or chip.
- > Label and date your bottles and bags, and use up the oldest ones first.

How To Store and Use Expressed Breast Milk

You can add freshly expressed milk to breast milk that's already in the fridge, provided it has been expressed on the same day and you cool it thoroughly in the fridge first before mixing the two batches. Bear in mind, though, that you can only keep it until the original milk is five days old.

If your milk has been stored for some time, you may notice that it separates. This is normal, so just give it a gentle shake to mix it up again. Some babies will happily drink cold milk straight from the fridge, while others like it warmed up. You can warm the milk by placing the sealed bottle or bag in a bowl of warm water.

If you want to freeze your milk, do it as soon after expressing as possible. Leave a gap at the top of each bottle or bag, as your milk will expand during freezing. If you're storing milk in bags, watch out for any tears. You may not notice any until you start to thaw the milk. Remember that plastic bags tend to fall over when thawing.

Frozen breast milk should ideally be defrosted in the fridge, and can be stored there for 12 hours. It can also be defrosted in a jug surrounded by hot water. Never re-freeze breast milk once it has thawed.

Don't be tempted to defrost or warm your breast milk in a microwave. If you need the milk in a hurry, defrost it under cool, then warm, running water, or place it in a bowl of warm water.

COMPLEMENTARY FEEDING

Feeding The Baby After 6 Months

IMPORTANT FACTS

Mothers need to practice exclusive breastfeeding until their babies are 6 months old. This means that mothers and other caregivers should not give babies any other types of milk, foods or liquids, and sips of water.

After 6 months, breast milk alone is not enough. Babies need to gradually start eating a variety of foods to continue meeting their nutritional requirements as they grow.

Breast milk continues to be an important part of the diet until baby is at least 2 years.

If mother is HIV positive, it is important for her to consult a healthcare provider or use of other suitable types of milk.

Complementary feeding is giving your baby other food in addition to breast milk.



Safe Preparation And Storage Of Food For Babies



Mothers and other caregivers should wash their hands with clean running water and soap before preparing food, and before and after feeding a baby.

Hand washing is important after changing nappies or going to the toilet. Baby's hands should be washed also.

All bowls, cups and utensils should be washed well with clean water and soap and should be kept covered always before using.

Prepare food in a clean area and keep it covered to protect it. Babies should have their own cup and bowls. Serve food immediately after preparation. Left-over food should not be given to the baby the day after.

Start feeding from the age of 6 months.

Complementary Feeding Guide

Exclusive breastfeeding is giving baby only breast milk with no other liquids or solids not even water. Medication and supplements are allowed only when prescribed by a doctor.

Complimentary feeding is giving your baby other foods in addition to breast milk. However you should continue breastfeeding for 2 years or longer.

Complimentary foods should be well balanced i.e. should contain carbohydrates, proteins, vitamins, minerals and fats/oils selected from family foods.

Amounts of food should be based on principles of responsive feeding, while assuring that energy density and meal frequency are adequate to meet the child's needs.

Complimentary feeds should be thick enough to stay in the spoon.

Assist and encourage your child during feeding, have patience, talk to the child, smile and maintain eye contact.



Complementary Feeding Guide

0 - 6 MONTHS	6 MONTHS	6 - 8 MONTHS	9 - 11 MONTHS	12 - 23 MONTHS
EXCLUSIVE BREASTFEEDING	FEED	FEED	FEED	FEED
	Start with thick enriched porridge or suitable commercial cereal	Thick enriched porridge or suitable commercial cereals Well mashed/pureed foods	Finely chopped or mashed foods. (Foods baby can pick up)	Family foods. Chopped or mashed.
	NO. OF FEEDS/DAY	NO. OF FEEDS/DAY	NO. OF FEEDS/DAY	NO. OF FEEDS/DAY
	2-3 times with frequent breastfeeds	2-3 meals + 1-2 snacks. Continue breastfeeding	3-4 meals + 1-2 snacks. Continue breastfeeding	3-4 meals + 1-2 snacks. Continue breastfeeding
	AMOUNT PER FEED	AMOUNT PER FEED	AMOUNT PER FEED	
Start with 2-3 tablespoons NB: Enrich with cooking oil. Avoid flour mixes, use single cereals	½ a cup increasing to ¾ cup	¾ cup increasing to 1 cup	1 cup or more.	

Points to Note

- 1 cup = 250mls
- If not breastfeeding give an additional 1-2 cups of milk per day or 1-2 extra meals.
- Give water and other fluids like soup, fresh fruit juice. Avoid carbonated high sugar drinks, tea and coffee.
- Give nutritious snacks like yoghurt, fruits and milk.

Complementary Feeding Guide

CARBOHYDRATES | ENERGY GIVING FOODS

Rice, ugali, potatoes, green bananas, sweet potatoes, arrowroots, pasta, cereals (porridge and suitable commercial cereals).

FATS AND OILS

Can be added to increase energy content of food e.g. margarine, cooking oil, butter, fish oils, milk creams.

Fat content provides essential fatty acids, facilitates absorption of fat soluble vitamins.

PROTEINS | BODY BUILDING FOODS

Plants: Beans, green grams, lentils, cowpeas, chick peas, nuts, seeds.

Animal: Liver, beef, chicken, eggs, fish, sardines, milk and milk products.

NB:

- > Introduce 1 protein at a time (after 3 days).
- > If there is family history of allergy to protein delay it until 8 months of age.
- > Alternate animal and plant protein.

VITAMINS & MINERALS | PROTECTIVE FOODS

Vegetables: Spinach, kales, cabbage, terere, carrots, tomatoes, pumpkin, broccoli, cauliflower etc.

Fruits: Oranges, melon, avocado, apple, mangoes, pawpaw, banana, passion fruit, etc.

NB:

- > Give dark green vegetables and yellow coloured fruits and vegetable daily.



Points to Remember



- Avoid giving a baby drinks with no nutritional value such as tea, coffee, soda or other sugary or coloured drinks. Give fresh juices with no added sugar or in moderation.
- Between the ages 6 months to 2 years a child needs to continue breastfeeding or have 2 cups of milk each day as part of their diet.
- Babies 6 months and older should be given treated water each day to keep them hydrated.
- During illness give the baby small frequent with amounts of fluids, including breast milk or other milk. Encourage the baby to eat a variety of his or her favourite soft foods. After illness feed the baby more food and more often than usual to regain his/her health.
- Weight gain is a sign of good health and nutrition. Continue to take your child to the health clinic for regular check-ups, immunizations and to monitor growth and development.

Frequently Asked Questions

We at M.P Shah Hospital appreciate that becoming a parent can be a very joyful yet perplexing experience. New parents are often faced with challenges for which they do not seem to find clear solutions. We have therefore compiled this information booklet for you to give some answers to frequently asked questions so as to help ease your journey into parenthood.

About Baby's Daily Care

Q. When do I change my baby's diaper/nappy?

A. Once a baby poops, the diaper/nappy should be changed immediately, because diapers do not absorb poop. On the other hand, if it is urine, the baby can pass a few times before changing it. You know the diaper is ready for changing when it begins to feel heavy and starts sagging.

Q. How do I clean my baby's genitals?

A. For baby boys, clean using a wet wipe or a soft cloth with a warm water. Be careful to clean the skin folds under the scrotum and between the buttocks gently, discarding the wipe once it gets soiled.

For baby girls, clean the private parts from front to back paying special attention to the skin folds. Look carefully to ensure that dirt does not accumulate in the folds as it may result in infection. Remember to moisturize baby's skin after every diaper change. It is recommended to apply jelly or diaper cream, for both boys and girls.

Frequently Asked Questions

Q. I have noticed some blood on my baby's diaper on the front part.

A. Babies can have some bloody urine and some crystals. This is partly due to withdrawal of mum's hormones and also due to concentration of uric acid crystals. The uric acid crystals could occur when the baby is not getting enough milk in the first few days to dilute the urine. By the fifth to sixth day, the urine becomes much clearer. Ensure the baby is feeding well.

Q. My baby's breast are enlarged, is this normal?

A. These lumps/swellings are due to exposure to mum's hormones in the womb. Over weeks or sometimes even months, when there is no more exposure to the hormones, the breast tissue begins to shrink and eventually becomes flat. Occasionally a normal small amount of tissue remains but it does not enlarge or cause any discomfort.

Q. How do I cut my baby's nails?

A. The best time to cut the baby's nails is after bath, when the nails are still soft. Baby nail clippers are available in baby shops. Clip gently to avoid nibbling the skin that is tender.

Q. How long is it okay for the baby to cry?

A. Ideally you do not want your baby to cry. However, babies do cry for the various reasons:

- > When being changed or bathed
- > When angry or hungry
- > When the diaper is wet or soiled
- > When sick-fever, cold, colicky pain etc.

Frequently Asked Questions

First of all, you as a parent should rule out why the baby is crying and take the necessary measures, to either feed, change or sooth the baby.

Q. Should I wake my baby for breastfeeding?

A. Yes. You should wake your baby for breastfeeding every three hours to avoid a drop in their blood sugar levels which can be dangerous. Babies tend to sleep for longer hours, and it is therefore important to wake them for breastfeeding.

Q. How do I know my baby is getting enough of breast milk?

A. Breastfeed the baby every three hours and on demand. Monitor the diapers; four to six wet diapers per day is proof that the baby is getting enough in the first few weeks of life. A noticeable increase in size and weight is also a good indicator.

Q. How long does it take for the cord stump to fall?

A. It takes seven to fourteen days for the stump to dry and fall off.

Q. What are the signs of infection on the umbilical stump?

A. Watch out for the following signs:

- > Reddening of the skin around the base of the cord.
- > The stump smells foul or has a yellowish discharge
- > The baby cries when you touch the cord or the skin next to it.

If you notice the above signs see a doctor immediately for treatment and advice. Also see a paediatrician if the stump bleeds continuously it may indicate a bleeding disorder.

Frequently Asked Questions

Q. Which is the best position to lay a baby after feeding to avoid choking?

A. First before you lay your baby to sleep, burp them to expel the air they swallowed during breastfeeding. Lay them on their back. Their head is heavier than the body and so it will definitely turn to the side. The lateral position is also advised for easy drainage of saliva or other secretions.

Q. How do I latch my baby on the breast?

A. Latching is a technique and it requires practice. If you are using the cradle breastfeeding position then begin by first holding the baby in your arms. Ensure the head is resting on the elbow joint and use the same hand to hold the baby's bum. The baby's tummy should be facing your tummy. Use your free hand to direct the breast to the mouth of your baby. Make sure the baby gets most of the black area around the breast (areolar) in the mouth. Ensure the baby does not make the sounds like 'Tam Tum' as this will indicate that the baby is sucking on the nipple and this causes the nipple to crack.

Q. What are the danger signs to look out for in a sick child?

A. Watch out the following signs:

- > Fever
- > Baby not breastfeeding as usual
- > Baby not retaining food
- > Baby convulsing
- > Baby not looking well
- > Difficulties in breathing

Frequently Asked Questions

Q. What is jaundice and how long does it last?

A. It is the yellow discoloration of the skin mucous membrane of the new born. Exposure to sunlight and frequent breastfeeding also helps to reduce jaundice. Blood test is done to check on the levels, if high the baby is put under a special light to help clear the jaundice.

Q. For how long should I breastfeed my baby before introducing feeds?

A. Scientifically proven, babies should be breastfed exclusively for six months without even giving them water. Babies who have been breastfed have the following benefits:

- > Their immune system is stronger and they hardly fall ill.
- > They have good brain development
- > They have better bonding between mother and child.
- > Breastfed babies have a good dental alignment
- > Breast milk has all nutrients requires for baby's growth

Q. What are the hiccups and what is their treatment?

A. Hiccups are sudden contractions of the diaphragm caused by irritation or stimulation of the muscle. They can be a bother to the parent but not to the baby. Hiccups should not cause alarm unless they interfere with activities of daily living such as sleep and feeding. There is otherwise no need to see a doctor. There is no particular treatment for hiccups but they resolve on their own. However, mothers are encouraged to breastfeed as it sometimes helps. Here are some things you can do when baby gets excessive hiccups:

- > Put the baby back on the breast.
- > Burp the baby
- > Cuddle the baby

Q. My baby is sneezing, is it normal?

A. Yes. Babies do sneeze just like adults do. It is a natural reflex to get rid of irritating substances that might have entered the nose, and to clear congestion in the respiratory and nasal passages. It is common for babies to sneeze within first few days of their lives.

Q. What causes nasal blockage on a new born?

A. Sometimes baby's nose gets stuffy and might sound like they have a cold, but that is not the case. Their nasal passages are smaller and they sound stuffy when breathing. Babies are also too young to sniff and therefore are unable to clear their nasal passages. As they grow older, their nasal passages enlarge and get nasal blockage less often.

PAEDIATRIC SERVICES

Paediatric Services At M.P. Shah Hospital



The Unique 7 storey children's hospital has 30 rooms specially designed to meet the needs of the patients, the family and the caregiver and at any point of time it can accommodate up to 50 inpatients. All medical supplies are built into the wall behind the patients to allow for sophisticated bedside technology. Each has got an attached bathroom with all modern amenities. The Paediatric Intensive Care Unit (PICU)/Neonatal Intensive Care Unit (NICU) and Paediatric High Dependency Unit (HDU) are staffed by highly trained doctors and nurses who specialize in caring for critically ill patients.

Paediatric Services At M.P. Shah Hospital



This ICU has a higher staff to patient ratio and access to advanced medical resources. Common conditions that are treated within this ICU include: Acute respiratory distress syndrome, trauma, multiple organ failure and sepsis.

The following services are currently offered at Suryakalaben Maganlal Chandaria Children's Medical Centre.

- > Well Baby Clinic
- > Children Sub Specialty clinics
- > Vaccination Centre
- > Paediatric Intensive Care Unit
- > Neonatal Intensive Care Unit
- > Paediatric High Dependency
- > In patient rooms for children
- > Dedicated paediatric pharmacy



Children's@
M.P. SHAH HOSPITAL

We would like to invite you to come and visit this exciting state of the art facility and familiarize yourself with the modern paediatric services we are now offering.



M.P. SHAH HOSPITAL
A Legacy of Care

M.P. Shah Hospital is a Social Services League Hospital which has been in existence for the last 89 years, as a 'not for profit' organisation. The Hospital has one single social objective of providing quality, affordable health care services to the community at affordable costs. It is a multi-super specialty, state-of-the art tertiary care hospital with a current capacity of 210 fully operational beds, 30 dedicated critical care beds, 10 renal dialysis units and 12 chemotherapy units. It provides all the modern outpatient and inpatient facilities with dedicated pavilions/wards, specialty clinics, advanced radiology, pathology and Cath Lab operations. We are going through exciting times of development and redefining the way healthcare is delivered in East and Central Africa region.

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