



BREASTFEEDING AND USING A SUPPLY LINE

This factsheet is for women who are using a supply line to give their baby extra milk while breastfeeding or are considering using a supply line.

What is a supply line?

A supply line is a feeding device that allows your baby to receive extra milk while feeding at your breast. It consists of a bottle filled with breast milk or infant formula with a very thin tube attached. When feeding with the supply line, the other end of the tube is attached to your nipple. When your baby sucks at your breast they are able to get extra milk (either expressed breast milk or infant formula) through the supply line tube at the same time.

The sucking action babies use to feed from the breast is different to bottle feeding. Some babies find it confusing to feed from the breast and bottle at the same time. Supply line devices may help you avoid bottle feeding when you still need to give extra milk to your baby.

Why use a supply line?

A supply line may help:

- » babies who:
 - need more milk than they can get from the breast alone because they're recovering from illness or surgery
 - are returning to breastfeeding after a period of bottle feeding
 - have lost a lot of weight and need large milk top-up feeds
 - are learning to improve their sucking pattern and efficiency at the breast
 - are refusing to feed at the breast
 - are preterm, medically well and able to breastfeed, but whose mothers aren't able to provide all the milk they need from the breast alone
 - are preterm, tire early and still need nasogastric tube/cup/bottle top-ups after breastfeeds
- » mothers who:
 - may not have enough breast milk. This may be due to breast surgery or other reasons. See the low milk supply fact sheet for more information
 - are re-lactating after a break from breastfeeding or inducing lactation for surrogacy or adoption of a baby.

Using a supply line may help increase your milk supply. When a baby breastfeeds with the supply line it usually helps them to drink more milk at the breast and stay sucking at the breast for longer. A supply line can be used short or long term depending on you and your baby's feeding needs.

A full breastfeeding assessment should always be performed by a lactation consultant to see if a supply line would help you and your baby with breastfeeding.

Types of supply line feeding devices

There are a few types of supply line feeding devices. You will find these in your pharmacy, on the Australian Breastfeeding Association website or online.

In your hospital the lactation consultants may use a very thin baby feeding tube attached to your nipple and breast with the other end placed in a bottle. Although these methods may look different, they all work in the same way.

Using your supply line

- » Wash your hands thoroughly before preparing the supply line.
- » Fill your bottle with the right amount of milk for your baby at this feed. Your lactation consultant will discuss this with you.
- » You may be advised to breastfeed on both breasts first or until baby has become less vigorous with feeding before using the supply line. This ensures baby is spending a good amount of time at the breast and helps improve your milk supply.
- » When you are ready to use the supply line, place the tubing into the container of milk.
- » Attach your baby well to your breast and insert one end of the tubing into the corner of your baby's mouth, pointing it slightly towards the roof of your baby's mouth. The tube may also be effective when inserted under your nipple, so that is directly over your baby's tongue.

- » The tubing only needs to go just past your baby's gums. Your baby will suck on your breast and the tube at the same time, drawing extra milk through the tube into their mouth (like sucking on a straw).
- » Initially hold the bottle of milk at the same level as your nipple. If you need to slow or increase the flow you can do so by changing the level of the bottle. If the bottle is too high the flow will be too quick, and your baby may swallow too quickly. If the container is held too low the flow may be too slow for your baby and cause them to become frustrated and tired. Your lactation consultant will be able to show you what works best for you and your baby.
- » If your baby is breathing regularly and sucking in a relaxed rhythm (1 to 3 sucks per swallow) the milk flow is working well. If your baby shows any distress cues, like pushing away from the breast, looking upset, coughing or spluttering, then the flow from the supply line should be slowed (moved lower) or stopped until your baby is calm again.

If using a supply line that you have purchased, please refer to the manufacturer's guidelines for usage and cleaning instructions for that device.

Decreasing the use of the supply line

Your lactation consultant will plan this with you. A gradual weaning process is usually the best option. Your baby should be closely monitored for signs that they are getting enough milk; such as weight gain and good urine output. However, some women may continue to use the supply line for a long time. It will depend on why you are using it.

Cleaning a disposable supply line tube and bottle in the home setting:

All feeding equipment needs careful cleaning.

Cleaning the tubing

- » The tube and cleaning syringe can be re-used for a total of 24 hours.
- » After 24 hours the tube and syringe must be discarded. A new tube and syringe must then be used for the next 24 hours.
- » As soon as the feed is finished the tubing must be cleaned to avoid milk drying in the tubing and to prevent growth of bacteria:
 - Use a 10ml syringe to flush 10mls of cooled boiled water through the tube.
 - Flush the tube at least 3 times, or more if there is any milk residue visible in the tube.
 - Store the cleaned tube in a sealed clean container or plastic bag in the refrigerator until next use.
 - Boiled water can be made up for the whole day – boil fresh water in the kettle and pour into a clean container to cool. Cooled boiled water can be kept for 24 hours in the fridge, and used as required for cleaning.

Cleaning the bottle

- » Cleaning and sterilising the bottle should occur after each feed if you are using infant formula milk and at least once every 24 hours if using breast milk.
- » Clean the milk bottle as soon as possible after every feed is completed.
- » Rinse the bottle in cold water then wash in warm soapy water and rinse clean in hot water.
- » Dry the bottle with paper towel and store safely until next feed if using breast milk. Sterilise the bottle with your usual method e.g. steam steriliser, if using infant formula.

Where to get further information

Women's Health Information Centre (WHIC)

Royal Women's Hospital
T: (03) 8345 3045 or 1800 442 007 (rural callers)
E: whicinfo@thewomens.org.au

Australian Breastfeeding Association

T: 1800 686 268 – Breastfeeding Helpline
www.breastfeeding.asn.au

Maternal & Child Health Line (24 hours)

T: 13 22 29