FEEDING STRATEGIES

STAGES OF INFANT FEEDING MATURATION

<table>
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<th>Stage</th>
<th>Description</th>
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<tr>
<td>Mature</td>
<td>Integrated suck-swallow-breath pattern (1:1:1)</td>
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<tr>
<td>Intermediate</td>
<td>Bursts of multiple suck-swallows followed by a self-imposed break to catch breath</td>
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<tr>
<td>Beginner</td>
<td>Bursts of multiple suck-swallows without a break to catch breath; the feeder needs to assist the infant to take breaks to catch their breath or an adverse event may occur</td>
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SIGNS OF IMMATURE FEEDING

The following signs indicate that the infant is struggling to coordinate sucking-swallowing-and breathing, and that the milk flow is too fast for the infant:

- Increased work of breathing (bigger or faster breaths during breaks between sucking)
- Stress cues (forehead furrowing, red or watery eyes, finger splaying, looking away from feeder or closing eyes)
- Milk spillage
- Coughing, choking, spells

Gulping, grunting

STRATEGIES FOR SLOWING MILK FLOW

1. Slower flowing bottle nipple
2. Horizontal milk flow (feeding position)
3. External pacing

Bottle nipples (in increasing order of flow):

- Ultra preemie nipple (e.g. Dr Brown’s ULTRA preemie nipple)
- Preemie nipple (e.g. Dr Brown’s preemie nipple)
- Level 1 bottle nipple (e.g. green ring disposable nipple, nipples marked Level 1, slow, or newborn)
- Level 2-3 nipples (e.g. white and yellow ring disposable nipples, nipples marked medium or standard flow, 3-6mths)

Slower flowing bottle nipples may help infants to better coordinate sucking, swallowing, and breathing.

Feeding positions:

In general, aim for horizontal milk flow (i.e. bottle horizontal, parallel to floor) to allow the infant to control the milk flow (liquids flow faster if the bottle is held vertically, and slower if held horizontally). This is easiest achieved in either:

- Side-lying position (like when being nursed at the breast, with the infant on their side, with their ear, shoulder, and hip facing up towards the ceiling).
- Semi-upright position (supported upright position, with the infant’s head above their chest and hips, with the infant’s neck supported, such as by the inside of feeder’s elbow).
- Avoid feeding infants in a fully reclined position (on their back with vertical milk flow).

Side-lying with horizontal milk flow

Upright with horizontal milk flow

External pacing:

External pacing is when the feeder helps the infant to take pauses to catch their breath during feeding.

- This is performed by tipping the bottle down to drain the nipple of milk and slow milk flow and/or removing the bottle from the infant’s mouth to impose a break in sucking.