Supplemental Feeding Systems



Supplemental feeding systems (also called supplemental nursing systems or lactation aids) allow people to provide additional milk to an infant while they are latched onto the chest or breast. Within this document, milk refers to a parent's milk, donor milk, or formula.

Reasons to use a supplemental feeding system (SFS)

- You want to bodyfeed and your baby needs more milk than your body currently makes.
- Your baby needs extra milk flow to help them coordinate and strengthen their suck, even if you produce enough milk.
- Your body makes little to no milk and you want the experience of bodyfeeding that a SFS allows.
- You want your baby to stimulate milk production to help increase your milk supply.
- You need to provide extra milk to help your baby gain weight but do not want to give your baby a bottle.

General recommendations

- Consider having a lactation consultant review your feeding setup and confirm that this is the right time to use a SFS.
- To use an SFS, your baby must latch well and create enough suction to draw milk through the tube.
- In some cases, using a SFS with a clean finger will help your baby develop a stronger or more coordinated sucking technique to latch more effectively.
- Practice assembling, disassembling, and cleaning the parts before baby arrives. This lets you
 troubleshoot the setup without the time pressure of a hungry baby.
- Watch videos to learn about different SFS options. You can find tutorials on YouTube and instructional videos on the websites of commercial SFS brands.
- Plan to have a supportive partner, friend, family member, doula or lactation consultant present everytime you feed. They can help with setup, hold little hands out of the way, provide encouragement, and adjust things as needed.

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There is no single correct approach to using a supplemental feeding system.

Find what works best for you and your baby and have patience with yourselves as you learn and grow together.

Types of supplemental feeding systems

Do-It-Yourself (DIY) systems

- Uses a small feeding tube placed in a container of milk (see DIY Supplemental Feeding Systems below).
- Cost-effective way to trial a SFS to see if it is a viable option for your family.
- Set up is simple and materials are easily available.

Commercial feeding systems

- Various designs with different milk containers and flow control features.
- Choose a system with features that meet your needs.
- Follow the instructions for set up and cleaning provided by the manufacturer.

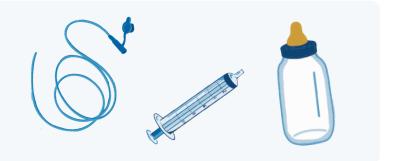


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DIY supplemental feeding systems

Equipment

- Size 5 or 8 French feeding tube (start with a 5 where available)
- Syringe, cup, or bottle for holding milk
- 5-10 mL syringe for cleaning



Instructions

- 1 Fill the container with an appropriate amount of milk for your baby.
- 2 Place the end of the feeding tube into the container.
 - a. If using a cup or bottle without a nipple: place the end of the feeding tube in the milk.

b. If using a bottle with a nipple:

Cut the tip off the nipple, large enough for the tube to pass through. Ensure no nipple fragments fall into the bottle.



Place the end of the tube in the milk and thread the tube through the hole in the nipple. Screw the nipple onto the bottle.



c. If using a syringe:

Attach the wide end of the feeding tube to the tip of the syringe.

Remove the plunger from the syringe and pour the milk into the syringe. Do not put the plunger back into the syringe.

You can secure the syringe to your clothing with an elastic band around the top and a safety pin, or you can have someone hold it.



- 3 Set the container at the level of your baby's head and ensure the tube can comfortably reach your nipple. This will ensure they only get milk when they are actively sucking.
- 4 With the help of a support person, latch your baby onto your chest or breast while holding the tube alongside the nipple.

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DIY supplemental feeding systems (continued)

Cleaning

- Clean all milk container parts in warm soapy water, rinse well, and allow them to air dry.
- Use a 5-10 mL syringe to flush (or forcefully push) water and air into the tube as follows:
 - **1 Pre-rinse:** If using human milk, flush the tube with cold water to remove any milk fat from the walls of the tube.
 - **2 Wash:** Flush the tube three times with warm soapy water.
 - **3 Rinse:** Flush the tube three times with clean cold water to remove all soap.
 - **4 Dry:** Push air through the tube three times or until no water droplets can be seen.
- Ensure proper airflow and store the clean SFS parts on a clean towel, drying rack, or in a container without a lid.

Safety

Do

- Replace the tube once the tip becomes stiff (about once a week).
- Always allow the milk to flow by gravity.
- Follow the above cleaning instructions.

Do not

- Do not cut the end off the feeding tube or use one that is visibly damaged.
- Do not use the syringe plunger to push milk through faster.
- Do not boil, steam, or chemically sterilize feeding tubes from DIY systems.



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Fine-tuning your supplemental feeding system

Ensuring a good latch

When bodyfeeding your baby, with or without a SFS, ensure a good latch to prevent nipple pain and damage. If you are unsure about what a good latch looks and feels like, review this with your care provider, lactation consultant, or support person.

Placing the tube

When to place the tube in your baby's mouth depends on their preferences. Some babies prefer the immediate reward of milk upon latching while others prefer to have it introduced once they are latched. Experiment with the timing and placement of the tube to learn what your baby prefers.

If placing the tube before latching, position it alongside the nipple with the end at or just past the tip of the nipple. Hold the tube in place and latch your baby. You can hold the tube yourself, have someone help, or secure it with a small piece of tape (see Securing the tube with tape below).

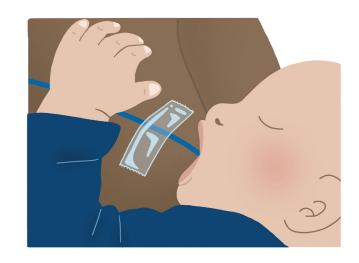
If placing the tube after latching, guide the tube along your chest or breast tissue and introduce it into the corner of your baby's mouth. Angle the tube slightly towards the roof of their mouth to keep it on top of their tongue.

Positioning the tube

- Place the tube so it enters at the corner of your baby's mouth or under the nipple, allowing it to rest on their tongue.
- Avoid placing it against the roof of their mouth as it will irritate the soft palate.
- Avoid placing the tube under their tongue as this may be irritating or block the flow of milk.
- A lactation consultant can provide personalized guidance for how and when to place the tube.

Securing the tube with tape

- Some people use a small piece of medical tape to hold the tube in place.
- Tape may allow you to latch your baby without the help of a support person.
- Place tape away from your baby's mouth to prevent them from accidentally swallowing it.
- When learning to use a SFS, taping the tube may make adjustments more difficult.



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Adjusting the flow of milk

Signs milk is flowing too fast:

- Appears distressed and eyes are wide.
- Comes off the chest with milk spilling out of their mouth.

Slow the flow:

- Lower the bottle below baby's head.
- Pinch the tube gently.
- If available, use a smaller feeding tube.

Signs milk is flowing too slowly:

- Appears frustrated with clenched fists or pushes away.
- No regular swallowing sounds.
- Loses interest or falls asleep quickly.

Check for a blocked tube:

- Check for any bends or kinks.
- Open any clamps and allow the tube to hang below the level of the milk. If milk flows, it is not blocked.
- Some people suck on the end of the tube to check milk flow. This may introduce bacteria to the system and is generally not recommended.

If tube is blocked:

- Use a 5-10 mL syringe to flush with clean water (see Cleaning above for more details). Resume feed.
- If tube clogs frequently, see Preventing a blocked tube below.

If tube is not blocked,

increase the flow of milk:

- Raise the bottle above baby's head.
- If available, use a larger feeding tube.

If using a commercial SFS, follow the manufacturer's instructions to adjust the flow of milk or clear a blocked tube.

Preventing a blocked tube

- Powdered formula: mix according to manufacturer's recommendations and shake it prior to feeding. If the milk still isn't flowing well, use a slightly larger tube size or switch to a liquid formula.
- **Liquid formula:** premixed liquid or liquid concentrates are less likely to block a feeding tube but cost significantly more, which is a barrier for some families.
- **Human milk:** warm the milk and mix it well (by swirling or shaking) to prevent clumps of fat from blocking the tube.

For more information, visit transcarebc.ca

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