



MGH Mother & Child Center

*Your New Family and
Breastfeeding Guide*

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Welcome to

Massachusetts General Hospital Vincent Obstetrics & Gynecology

Congratulations on the birth of your baby!
This is an exciting time for you and your loved ones.
This book will help you understand and cope with
caring for yourself and your new baby.

Our Newborn Family Unit supports and encourages 100 percent rooming in together with your baby. Having your baby with you as much as possible gives you the opportunity to get to know each other. It makes it easier to learn the signs that baby is hungry, sleepy or just needs to be cuddled. Your nurse will help you in caring for your baby and to recognize your baby's needs.





Caring for Yourself

The time after giving birth is called the postpartum period. It lasts about 6 weeks. Taking care of yourself is important. Get plenty of rest. Don't expect to feel like yourself overnight. It takes time to get used to being a new parent and recover from childbirth. Call your health care provider if you have any questions or concerns.

Vaginal Discharge (Lochia)

After birth you will have vaginal bleeding. It is like a period and lasts for three to four days. Then it becomes pink or brown. By the second week, it is usually more yellow or white in color.

- Increased activity can increase the bleeding. If this happens, slow down and get more rest.
- Use pads, don't use tampons.
- Don't douche or use other hygiene sprays.

☎ Call if you have heavy bleeding (soaking more than a pad in an hour), large blood clots or a foul odor to your discharge.

Perineum

The perineum is the area of skin around your vagina and anus. It can be swollen and sore.

- Each time you urinate or have a bowel movement, use the peribottle to squirt warm water from the front to the back, then pat dry.
- Change your pad every time you use the bathroom.
- Wash your hands well.
- Use ice packs for the first 24 hours if you had a vaginal delivery.
- Try witch hazel pads and the lidocaine spray for comfort (you can buy these at the drugstore).

☎ Call if your perineal pain gets worse

Bladder

Urinating can be difficult after giving birth.

- Drink plenty of fluids.
- Use the peribottle to squirt warm water while urinating.
- Try to empty your bladder every two to four hours.
- Do Kegel exercises by squeezing your perineal muscles. This helps to strengthen those muscles and prevent leaking of urine.

☎ Call if you are unable to urinate or feel that you are not emptying your bladder completely.

☎ Call if you have pain or burning when urinating, or if you have to urinate frequently.

Bowels

You may not have a bowel movement for a few days after delivery.

- Take a stool softener one to two times a day if needed (you can buy these at the drugstore).
- Eat fruits, vegetables and whole grains.
- Drink plenty of water.
- Walking helps.

☎ Call if you don't have a bowel movement for 5 days.

Vaginal Stitches

If you had stitches after giving birth, that area may be painful and swollen. The stitches dissolve in one to two weeks.

- Use ice packs for the first 24 hours.
- After 24 hours, you can try a sitz bath several times a day.
- It is OK to take a tub bath.

Cesarean Section

Your incision is usually left open to the air the day after your surgery. If you have staples, they are usually taken out the day you go home. Steri-strips (tape) will be put on the incision. They usually fall off by themselves. If they don't, you can take them off after one week.

- If you need to cough or sneeze, hug a pillow against your incision.
- Take a stool softener, drink plenty of fluids and eat fruits, vegetables and whole grains to prevent constipation.
- Don't lift anything heavier than your baby.
- Limit the amount of stairs that you climb at home.
- Don't drive if you are taking painkillers, but it's OK to be a passenger in the car.
- Walking is fine and will make you feel better.
- When showering, let the water and soap fall over your incision. Pat it dry.
- Check the incision every day to make sure it is healing well.

☎ Call if the incision is red, warm, draining discharge or opening up.

Pain

Most women have pain after childbirth. We want to help you feel as comfortable as possible.

- Take your pain medicine if you need it. You will receive a prescription for your pain medicine when you go home. It's OK to use over-the-counter acetaminophen or Ibuprofen at home.
- Try sitting or lying in different positions.

☎ Call if your pain worsens or if you feel that the pain medication is not helping.

Afterpains

These are the contractions that your uterus makes after giving birth. They come and go, may be mild or strong, and last for several days. Afterpains may increase when you breastfeed.

- Use pain medication if needed.
- Try relaxation and deep breathing.
- Empty your bladder frequently.

Hemorrhoids

These are swollen rectal blood vessels. They can be painful, itchy and sometimes bleed.

- Use cold packs several times a day.
- Witch hazel pads and hemorrhoid cream can help.
- Try sitz baths in warm water.
- Drink lots of water and eat fruit, vegetables and whole grains to prevent constipation.
- Take a stool softener and/or fiber additive if needed.

Swollen Legs and Feet

Many women feel swollen after giving birth. Your body will get rid of this extra fluid by itself in one to two weeks.

- Elevate your feet when you are sitting or lying.
- Walking helps.

☎ Call if you have redness, warmth or pain in the lower leg.

☎ Call if one leg is more swollen than the other.

Non-Breastfeeding Breast Care

You may have some breast swelling in the first few days.

- Apply ice packs to your breasts several times a day.
- Wear a tight-fitting bra like a sports bra.
- Take pain medication for discomfort if needed.





Activity/Exercise

Start your normal activities slowly. Listen to your body. If you have pain or increased bleeding, slow down.

- Limit the number of times you go up and down stairs.
- Avoid heavy lifting, pushing or pulling.
- Walking is good exercise.
- Increase your activity as you feel able to.
- Wait for six weeks to do sit-ups, jogging or other aerobic exercise.

Diet


Eating well is important. Your body worked hard during childbirth. You need energy to recover and look after your new baby.

- Don't start a weight loss diet in the postpartum period.
- Eat plenty of protein, vegetables, fruit and foods that are high in fiber.
- Continue your prenatal vitamins or take a multi-vitamin.
- Continue eating calcium-rich foods (milk, cheese, yogurt) especially if breastfeeding.
- Drink plenty of fluids (water, milk, juice).

Anemia

Anemia or low iron is very common after having a baby, making you feel tired and weak.

- Eat foods that are high in iron like beef, chicken, fish, pork, nuts, eggs, dried fruits, dark green leafy vegetables, beans and molasses.
- You may need to take an iron supplement as well.

 **Call if you faint or feel dizzy.**

Hormones


Your body's hormones change quickly after having a baby. If you are breastfeeding only, your period may not return until you wean your baby, offer solid foods or stop nursing. If you are not breastfeeding, your period usually starts six to eight weeks after delivery.

- You can get pregnant before your period returns.
- Use birth control when you decide to resume sexual intercourse.

Sexuality

You may be less interested in sex due to lack of rest, physical discomforts and hormonal changes. Vaginal dryness is common, especially if breastfeeding.

- Wait to have intercourse until your bleeding has stopped, your stitches have healed and you feel comfortable.
- Use a lubricant if needed.
- Discuss birth control options with your health care provider.

 **Call with any concerns.**

Emotions

Most women have a wide variety of emotions after giving birth. Lack of sleep, hormonal changes and coping with adjusting to parenthood all affect how you feel. You may have intense feelings of joy, happiness, excitement, fear, loneliness, confusion and disappointment. It takes time to feel like yourself again.

- Get plenty of rest, eat good food, go for a walk.
- Talk to other mothers about how you are feeling.
- Find out about new mother's groups in your community.
- Limit your responsibilities – don't try to be a super mom.


 **Call if you feel unable to cope.**

Baby Blues

You may feel like crying, feel irritable and impatient. This is the “baby blues,” which affect up to 80 percent of women. It usually goes away in two to three weeks.

Postpartum Depression

About one in 10 women get postpartum depression. It may start as early as in the hospital to months after delivery. Women may feel unable to cope with daily life (getting dressed, bathing, eating), helpless or hopeless. They may be sleeping and/or eating too much or too little. They may feel anxious or jumpy. Women can lose interest in their family or even be afraid of hurting themselves or their child.

 **Call if you think you may have postpartum depression, it can be treated.**

New Fathers

This is an exciting time for fathers. Many fathers feel a range of emotions after the birth of their baby. They may feel joy, excitement, loneliness or be overwhelmed. Fathers may feel as though they don't know what to do to help.

- Cuddle your baby, they like to look at your face and hear your voice. Practice skin to skin.
- Learn how to settle your baby.
- Learn how to bathe and change diapers. Learn infant massage.

- Be patient, in time your partner will have more time to spend with you.
- Talk openly with your partner about your feelings.

Siblings

The arrival of a new baby can be a happy, exciting and upsetting time for other children in the family. It is common for children to cling to you, cry or act out.

- Try to set aside time for your older children, ask for help from friends and family.
- Give your older child a job to help with the new baby, no matter how small.
- Never leave your new baby alone with an older sibling.

When to Call Your Health Care Provider

- Chills or fever of more than 100.4° F
- Heavy bleeding, large blood clots
- Urination that is painful or too frequent
- No bowel movement for 5 days
- Pain that gets worse
- Fainting or dizziness
- Redness, warmth or pain in the lower leg
- Incision that is red, warm, draining discharge or opening
- Problems with breastfeeding – cracked or bleeding nipples
- Breasts that are red, warm, swollen and sore along with a fever
- Crying or mood swings that feel out of control
- Feeling unable to cope, hopeless or helpless



Caring for Your Newborn

There is so much to learn about your new baby. It takes time to get to know your baby and understand its behaviors and characteristics. In the hospital, keep your baby in the room with you as much as possible to help you understand and learn to care for him or her. While each baby is unique, there are many things that are common to all newborns.

Head

- Babies' heads are often misshaped from the delivery. Normal head shape usually returns after one week.
- There are two soft spots on the head. Normal touching, shampooing and brushing the head will not damage them. They close by 18 months of age.

Eyes

A new baby can see 8 to 10 inches. When you talk to your baby, hold him close so he can see your face.

- Babies can look cross-eyed because their eye muscles are not strong enough. This goes away after about a month.
- Eyes can be puffy from the pressure of going through the birth canal. This goes away in a few days.

Skin

Babies' newborn skin is thin and dry. It is normal for the skin to peel and does not require any special lotions.

- Don't use talcum powder.
- Wait to use sunscreen until baby is 6 months of age.

Acrocyanosis is when the hands and feet look bluish.

- As the baby blood system matures, it usually goes away in a few days.
- Baby's skin should feel warm to the touch.

Diaper Rash is from urine and stool irritating baby's skin.

- Change the diaper frequently.
- Wash the diaper area with plain water if skin is irritated.
- Expose the area to the air several times a day.
- Try a diaper rash ointment.

☎ Call if rash doesn't improve within a few days

Erythema Toxicum is a rash with small, yellow-to-white colored bumps and a red color around them. They are mostly on the face and stomach.

- They may come and go, but are usually gone by 4 months of age

☎ If your baby has a rash, check with your pediatrician to make sure you know what kind of rash it is.

Jaundice is a condition that makes the skin look yellow. It happens when a chemical called bilirubin builds up in the baby's blood. Jaundice usually starts in the face and then moves down the body. Many newborns have mild jaundice, and it is usually harmless.

- All babies are checked for jaundice in the hospital before they go home.
- If the jaundice is severe, it is treated with light therapy.

☎ Call if your baby's skin or eyes turn yellow

☎ Call if your baby is jaundiced

☎ Call if your baby is hard to wake, fussy, or not feeding well

Lanugo is the fine downy hair on the face, shoulders or back.

- It goes away in a few weeks.

Milia are small white spots on the nose and chin.

- They go away on their own in a few weeks.
- Do not squeeze them.

Mongolian Spots are dark blue areas on the lower back and buttocks.

- They are most common with babies who are of African, Asian, Mediterranean or American Indian descent.
- They go away in a few years, usually by adolescence.

Stork Bites are red spots on the back of the neck, forehead, eyelids and/or bridge of the nose

- They go away by 18 months of age.

Breathing

Baby's breathing may be noisy and irregular. They breathe 2 to 3 times faster than adults do.

****CALL 911** for:**

- ◆ Any difficulty breathing
- ◆ If skin or lips are blue, purple or gray

Hormone Effects

Hormones are passed from mom to baby. Girls may have a white discharge, swollen labia or a small amount of blood from their vaginas. Boys may have enlarged scrotum. Breasts may be swollen in either sex.

- These changes go away as the baby's body rids itself of mom's hormones within a few weeks.

Bladder

Most babies have one wet diaper for each day of life for the first week. For example, if baby is 3 days old, it should have 3 wet diapers. In the second week, the baby should have 6 to 8 wet diapers a day.

 **Call if your baby has no wet diaper for more than 12 hours**


Bowels

Baby's first stools are thick and dark green and called meconium. They will become lighter, turning brown, then yellow.

- Breastfed babies have a lot of loose, yellow, seedy stools by day four of life.

- Formula fed babies have pasty yellow stools.
- The normal number of stools is 2 to 10 per day once feeding is established.


 **Call if your baby has frequent watery bowel movements or blood in the stool**

 **Call if your baby is constipated or your baby has no bowel movement for two days**

Umbilical Cord

The umbilical cord usually falls off in 1 to 3 weeks.


- Keep it clean and dry.
- As it heals, it looks like a scab. Sometimes there may be a small amount of blood.
- Fold the diaper down so that the cord is open to the air.
- Do not apply powder or creams to the cord.


 **Call if it becomes red, swollen, has drainage, constant or heavy bleeding**


Circumcised Penis

The circumcision usually heals in 7 to 10 days. It will be red and raw at first. There may be a yellow ooze over it, which is part of normal healing.

- Clean your baby's bottom as you would normally. Squeeze water from a wet cloth over the penis and then pat dry. Sponge bathe your baby until the penis is healed, and then you can give a full bath.
- Apply Vaseline to the front of the diaper for as long as the penis is red and raw. If special gauze was used, wait until the gauze has fallen off (1 to 2 days) before starting to use the Vaseline.
- A small amount of bleeding is normal. If you see more than a quarter size amount of blood or constant bleeding, tightly hold a cloth or gauze over the penis to stop the bleeding and call your baby's doctor.

 **Call if your baby does not urinate within 12 hours after the circumcision**

 **Call if the circumcision smells bad or baby has a fever of >100.4 rectally**

 **Call if there is redness moving up the penis or onto the belly**

 **Call if there is abnormal bleeding or swelling**



Uncircumcised Penis

No special care is needed if your son is not circumcised. As the penis grows, the foreskin loosens, and is usually retractable by 4 to 6 years of age.

- Don't force the foreskin back.
- Clean and wash gently when bathing.

Nails

Babies' nails are soft and are not separate from the nail bed.

- Gently file nails with the softer side of an emery board until baby's nails become hard and separate from the nail bed.

Weight

Babies usually lose weight in the first few days of life.

- Most babies regain their birth weight by the 10th day of life.

Growth Spurts

Babies usually have their first growth spurt around 1 to 2 weeks of life and it lasts for 1 to 2 days. Babies will feed more than usual. If you are breastfeeding, this increased sucking means that you will produce more milk.

- Allow baby to feed as often as he/she wants to.
- Get enough rest to help you through this time.

Spitting Up

Most babies spit up.

- Burp baby well and often during the feeding.
- If bottlefeeding, hold baby more upright during the feeding.
- Projectile vomiting is spitting up in a much more forceful way, causing milk to hit the floor.

☎ Call if your baby has projectile vomiting

Crying

All babies cry. Some are easy to comfort, others cry for hours every day no matter what you do. Baby may be hungry, wet, tired, need to burp or just need to be held.

- Pick up baby whenever he or she cries, you cannot spoil a baby.
- Try swaddling baby in a blanket with hands near their face so they can comfort themselves.
- Rock or sway holding baby.
- Carry baby in a sling or baby carrier, a walk in a stroller may help.
- Talk, sing to your baby.
- Keep things calm and quiet for fussy babies.
- If you are having a hard time coping with the crying, if you are really frustrated or angry, put the baby down in a safe place and leave the room. Call a friend, parent, or partner to talk.
- Never shake a baby. Shaking a baby can cause permanent brain damage or death. If you are having a hard time coping with the crying, if you are really frustrated or angry, put the baby down in a safe place and leave the room. Call a friend, parent, or partner to talk.

◆ **See "All Babies Cry" sheet at the back of this book for more information**

☎ Call if baby is very fussy and you are unable to calm baby

Sleep

On average, newborns sleep 16 hours a day. They may sleep for a few minutes or a few hours at a time. Newborns don't know the difference between day and night at first.

☎ Call if your baby is more sleepy than usual, not waking up to feed

Hearing Screening

All babies are screened for hearing in the hospital. It takes only a few minutes and does not hurt your baby. Babies either pass the screening or are referred for more testing. If your baby needs more testing, you will be given an appointment to a testing center, before discharge.

Metabolic Screening

This Massachusetts state screening helps diagnose treatable diseases. The testing is done on a few small drops of blood that are collected when your baby is 1 to 2 days old. The results are sent to your pediatrician who will contact you if your baby has one of these diseases.

Taking a Temperature

Most pediatricians will ask you for a rectal temperature reading if you think your baby is sick. Don't use ear thermometers for infants under the age of 6 months.

- Put some Vaseline on the tip of the thermometer.
- Place baby on their stomach or side.

- Gently insert the tip into the baby's rectum a quarter of an inch.
 - Hold the thermometer in until it beeps.
- ☎ Call your pediatrician if the rectal temperature is greater than 100.4° F**

Bathing Your Baby

Give a bath every few days or when needed. You can give a sponge bath or a tub bath.

- Have everything you need in one place before you start.
- Check the water temperature with your wrist or elbow, it should be warm.
- Put a towel or cloth on the bottom of the tub for baby's comfort.
- Wash from clean to dirty parts of the body. Start at the head and face, finish with the bottom. Use plain water on the face.
- Don't use Q-tips in the ears, use a wash cloth instead.
- Never leave your baby unattended.

Pediatrician Visits

You will have a visit with your baby's doctor within the first 2 weeks of life. These visits are very important to see how your baby is growing and developing. Your baby will get immunized to protect against harmful diseases.

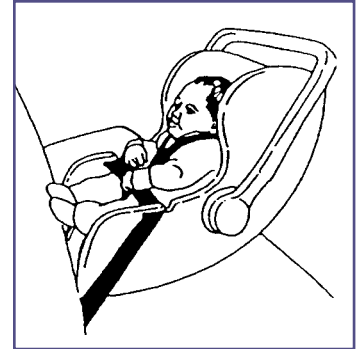


Car Seat Safety

Massachusetts state law requires that infants should ride in a rear facing car safety seat until they are 2 years old or until they reach the highest weight or height allowed by their car safety seat's manufacturer.

- Read the car seat owner's manual and mail back the registration card.
- Use a car seat that is less than 5 years of age and has not been in an accident.
- Only put the car seat in the back seat, not in the front with an air bag.
- Have the car seat facing the back of the car.
- Secure the car seat tightly with the LATCH system or a seat belt. It should not wriggle more than one inch from side to side
- Make sure the harness straps are in the slots at the baby's shoulders.

- Dress baby in thin layers so that the bulk of too many clothes won't interfere with the snug fit of the harness straps.
- Put blankets over the harness straps, don't put heavy clothing or blankets under the straps.
- Thick padding should not be put under or behind baby.
- Straps should be snug and lie flat.
- Keep the chest clip at armpit level.
- Use a head support only if it came with the car seat and it fits your baby's head.
- Car seats are not recommended for routine sleeping.



When to Call Your Pediatrician for Your Baby

- Fever of more than 100.4° or under 97° F (rectal temperature)
- Vomiting or diarrhea
- Dry diapers for more than 12 hours
- Constipated or no bowel movement for two days
- Bloody or black bowel movement
- Skin is orange or yellow
- Rash, especially with a fever
- Circumcision site that is red, warm or draining discharge
- More sleepiness than usual, not waking to feed
- Fussiness – you can't calm your baby
- Poor feeding



Six Steps to Keeping Your Baby Safe

1. Let Only Family and Longtime Friends Care for Your Baby

Never give your baby to someone you don't know, or only know slightly. Ask for references of anyone you plan to hire as a baby sitter.

2. Don't Leave Your Baby Alone

When you are away from home, never leave you baby alone. Babies have been kidnapped from shopping malls, clinics, parking lots, vehicles and other locations.

3. Ask About Hospital Home Visits

You may have a home visit to check up on you and your baby. Find out in advance when this will be, and ask what to expect. Do not let anyone into your home until you are sure that person is official. Call your healthcare provider first if you're not sure.

4. Keep a Photo of Your Baby

Take at least one color picture of your baby (full front view), and put together a complete written description, including your baby's weight and length, plus hair and eye color.

5. Don't "Advertise" Your Baby

Think twice before putting up decorations outside your home, or placing a birth announcement in the newspaper. It's nice to let others know about your new arrival, but an abductor might notice too.

6. Don't Give Out Personal Information

At home, just like in the hospital, do not give out any personal information about you or your baby over the telephone or in person unless you know the person well.

What does a safe sleep environment look like?

Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death



Use a firm sleep surface, such as a mattress in a safety-approved* crib, covered by a fitted sheet.

Do not use pillows, blankets, sheepskins, or crib bumpers anywhere in your baby's sleep area.

Keep soft objects, toys, and loose bedding out of your baby's sleep area.

Do not smoke or let anyone smoke around your baby.



Make sure nothing covers the baby's head.

Always place your baby on his or her back to sleep, for naps and at night.

Dress your baby in sleep clothing, such as a one-piece sleeper, and do not use a blanket.

Baby should not sleep in an adult bed, on a couch, or on a chair alone, with you, or with anyone else.

*For more information on crib safety guidelines, contact the Consumer Product Safety Commission at 1-800-638-2772 or <http://www.cpsc.gov>.



Safe Sleep for Your Baby

1. Always place your baby on his or her back to sleep, for naps and at nights. The back to sleep position is the safest and every sleep time counts.
2. Place your baby on a firm sleep surface such as on a safety approved mattress covered by a fitted sheet. Do not put blankets or pillows between the mattress and fitted sheet. Never put your baby to sleep on a chair, sofa, water bed, cushion or sheepskin. Car seats are not recommended for routine sleeping.
3. Keep soft objects, toys and loose bedding out of the crib. Pillow, quilts, comforters, sheepskins, bumper pads, and stuffed toys can cause your baby to suffocate.
4. Place your baby to sleep in the same room where you sleep but not the same bed. Keep the crib or bassinette within arm's reach of your bed.
5. Breastfeed as much and for as long as you can. Studies show that breastfeeding your baby can help reduce the risk of Sudden Infant Death Syndrome (SIDS).
6. Immunizations are important. Your baby will receive important immunizations. Recent evidence suggests that immunizations may have protective effect against SIDS.
7. Do not allow smoking around your baby. Don't smoke before or after the birth of your baby and don't let others smoke around your baby.
8. Don't let your baby get too hot. Keep the room where your baby sleeps at a comfortable temperature. Dress your baby in light sleep clothing.
9. Offer a pacifier at nap time and bedtime. This helps reduce the risk of SIDS. If you are breastfeeding, wait until breastfeeding is going well before offering a pacifier. This usually takes 3 to 4 weeks. It's OK if your baby doesn't want the pacifier. You can try offering it again, but some babies don't like to use pacifiers. If the pacifier falls out once the baby is asleep you don't have to put it back in.
10. Do not use home monitors to help reduce the risk of SIDS. If you have questions about using monitors for other medical conditions talk with your health care provider.
11. Do not use products that claim to reduce the risk of SIDS. Products such as wedges, positioners, special mattresses and specialized sleep surfaces have not been shown to reduce the risk of SIDS. In addition, some infants have suffocated while using these products.

Remember No Bed Sharing!

When you are ready to go to sleep or start feeling drowsy place the baby back in their own crib or bassinette. Parents can roll onto babies, drop babies to the floor or babies can get tangled in the sheets or blankets and suffocate.

Remember Tummy Time!

Place babies on their stomachs when they are awake and when someone is watching. Tummy time helps your baby's head, neck and shoulder muscles get stronger and helps prevent flat spots on their head.



ALL BABIES CRY



Some babies are easy to comfort, others cry for hours every day no matter what you do. Listening to a baby cry is very hard on parents. You may wonder what's wrong, and feel that you should be able to solve the problem.

Your baby doesn't cry because he is spoiled, angry at you, or trying to control you. Babies love the people who take care of them.

All babies cry sometimes, but you can help your baby cry less

Pick up your baby right away whenever he cries. You cannot spoil a baby. You can teach him to trust you. If you answer his calls for help right away, he'll cry less overall.

Carry your baby in an approved sling or cloth baby carrier (check www.cpsc.gov for recalls). Babies who are carried many hours every day cry much less.

Some babies do better if they can eat and sleep at regular times every day.

Keep things calm and quiet for a baby who cries when he's tired. Try low lights, and just one adult with your baby.

If your baby cries for a long time every day, and cannot be comforted, check with his doctor or nurse about possible allergies, food intolerance, acid reflux, eczema, or other health conditions.

If your baby is less than six months old and has been eating solid food, try feeding only breast milk or formula until six months.

Comforting your baby

All babies have an instinct to suck. Your baby may need to suck even when she isn't hungry. Try a pacifier, or wash your hands and let your baby suck on your finger, or help your baby find her fingers to suck on.

Babies need to be held. Just being close to you is very comforting for a baby.

A walk in a stroller may help.

Most babies under about four months old are more comfortable when they are firmly wrapped in a light blanket, or swaddled. Try wrapping your baby with her arms at her sides. Then walk with her or rock her. If she is still unhappy, offer her a pacifier or help her find her fingers to suck on.

Babies also like gentle rhythmic motion, so try holding your baby while you walk, or rock in a rocking chair. Or hold your baby against your shoulder, and sway gently back and forth.

Your baby may need to burp after a feeding or even stop in the middle of a feeding to burp.



Massachusetts Department of Public Health • Division of Violence and Injury Prevention
Shaken Baby Syndrome Prevention Initiative
617-624-5450 (assistance available in other languages) • TTY 617-624-5992 • www.mass.gov/dph/dvip

Distraction

If your baby is fussing but not crying desperately, try to distract him.

Play peekaboo or hold him up to a window where he can see a busy street or older children playing. Show him a toy or a mobile.

Sounds

Most babies like sounds that remind them of what they heard before they were born. It wasn't quiet inside the womb—the sounds of the mother's heart and blood flow are quite loud. Rhythmic, monotonous, steady sounds are best.

Try a loudly ticking clock, the vacuum cleaner, fan, air-conditioner, dishwasher, washing machine, or dryer. But never put your baby on top of an appliance.

Try taking your baby in the bathroom and turning on the shower and the fan, but not the light.

Sing to your baby.

What doesn't help

Medications including sedatives, antihistamines, drugs for motion sickness, lactase, or Simethicone do not work to reduce babies' crying, and may be dangerous. Check with your baby's doctor or nurse before giving your baby any medicine.

NEVER SHAKE A BABY.

Shaking or hitting a baby can cause permanent brain damage or death.

For more information call 617-624-5450 (assistance available in other languages) or go to www.mass.gov/dph/dvip.

When your baby can't stop crying

Undress her and see if something in her clothes is making her uncomfortable, or if there is a strand of hair caught around a finger or toe.

Your baby may be sick. If your baby has vomiting, diarrhea, or a temperature over 100.4°, or seems to be in pain or acts sick, call his doctor or nurse.

Your baby may be teething. Check with your doctor or nurse about what to do.

Try putting your baby in an approved baby carrier or sling so your hands are free to do other things (check www.cpsc.gov for recalls). Your baby likes to be close to you even when he's unhappy.

Remember that the crying is not directed at you. Your baby is even more miserable than you are.

If you are really frustrated or angry

Put the baby down on her back in a safe place, like the crib, and leave the room until you are calmer. Take a break from the sound of crying.

Put on music with headphones, or take a shower with the bathroom fan on.

Call a friend, or your mom or dad, just to talk.

The **Parental Stress Line** offers free anonymous phone support, 24/7 at **1-800-632-8188** (assistance available in other languages).

Taking care of yourself

Not getting enough sleep makes everything harder. Try to nap when your baby does.

There may be a mother's group nearby, or a Family Resource Center in your city. **Parents Helping Parents** at **1-800-632-8188** can help you find a parents' group.

Or try www.onetoughjob.org for parenting tips.

Resources

Organization	Resource	Phone Number	Website
American Academy of Pediatrics	Infant health & safety	1-800-311-3435	www.healthychildren.org
LaLeche League	Breastfeeding	1-800-LALECHE	www.llli.org
MGH Obstetrics	Obstetrics	617-724-BABY	www.massgeneral.org/obgyn
MGH Tobacco Treatment	Quit smoking	617-726-7443	www.massgeneral.org/tts
MGH Center for Women's Mental Health	Depression, anxiety, mood disorders	617-724-7792	www.womensmentalhealth.org
Massachusetts Smokers' Helpline	Quit smoking	1-800-QUIT-NOW	www.makesmokinghistory.org
Massachusetts Substance Abuse Helpline	Drug and alcohol abuse	1-800-327-5050	www.helpline-online.com
Massachusetts Parental Stress Line	Parental stress	1-800-632-8188	www.masskids.org
National Domestic Violence Hotline	Domestic violence	1-800-799-SAFE or 4-11	www.thehotline.org
Nursing Mothers' Council	Breastfeeding	617-244-5102	www.bace-nmc.org
Office on Women's Health	Breastfeeding	1-800-994-9662	www.womenshealth.gov/breastfeeding
Poison Control	Poison control and prevention	1-800-222-1222	www.maripoisoncenter.com
Postpartum Support International (PSI)	Postpartum Depression	800-994-4773	www.postpartum.net
Seat Check	Child safety seat inspection	1-866-SEAT-CHECK	www.seatcheck.org
WIC (Women, Infants & Children) Program	Nutrition and health	1-800-WIC-1007	www.mass.gov/wic
Zipmilk	Breastfeeding		www.zipmilk.org



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