



HUTT maternity

Hutt Valley Maternity Care

Nipple Shields

Information for women

Associated to Policy MATY079

Nipple shields may be used as an aide to assist breastfeeding. However there are several precautions to be aware of when using them.

The most common reasons nipple shields are used are if a mother has flat, inverted or fibrous nipples, latching difficulties, poor sucking ability or as a transition to breast from a bottle.

Nipple shields are not recommended for preventing or assisting in healing sore nipples as the nipple may move in and out of the shield causing pinching and abrasion.

Risks and Precautions

- May delay a solution to a problem, such as sore nipples due to poor positioning and attachment.
- May inhibit breast drainage, increasing the risk of infection.
- Long term use may lead to reduced milk supply and poor weight gain.
- May lead baby to refusing to take the nipple without the shield.
- May interfere with positioning at the breast.

- May prevent proper extension of the nipple of the nipple back into the baby's mouth.
- May pinch the nipple and areola, causing abrasions, pain, skin breakdown and internal trauma to the breast.

Equipment

The most commonly used nipple shields are thin silicone. Some have a cut away area where the baby's nose is in contact with the areola. The appropriate size shield should be recommended.

Small, medium and large are available. The size shield used depends on both the size of the baby's mouth and the mother's nipples.

Procedure

- Wash hands
- Try direct latching to the breast first
- Use appropriate size of nipple shield
- Hand express some milk into and onto the nipple shield
- Moisten or apply a thin layer of milk or pure lanolin under outer edges of the shield to maintain good contact when placed onto the breast.
- Fold up the rim of the nipple shield (see photos). Place nipple shield directly over

the nipple, and roll the rim back to the original shape

- Ensure the cut away area is where the baby's nose will be when latched.
- Wait for the baby to open his/her mouth wide, and ensure the he/she takes the complete teat part of the shield into his/her mouth.
- Watch for signs that the baby is swallowing milk, deep rhythmic sucks, pausing, holding his/her breath and swallowing, then the "ka" as the baby begins breathing again.
- After a feed make sure that your breasts feel empty. If not it is important to express by hand or by pump to ensure the breast is well drained and the milk supply is stimulated.

Cleaning

- Wash with warm soapy water
- Rinse in clean water before sterilizing
- Place in sterilizing solution
- The shield does not need to be rinsed prior to use at the breast.

Follow up

- Your midwife or well baby healthcare provider will ensure that your baby is gaining weight adequately.
- If your breasts become hard, painful, red and hot seek advice from your midwife, GP or a lactation consultant as soon as possible.
- Although nipple shields can be used long term, they are an extra thing to manage. Once your baby is feeding consistently well with the shield, consider trying without again. Your midwife or lactation consultant can help you with this.

Weaning from the nipple shield to direct breastfeeding

Usually nipple shields are used as a temporary measure. Gradually, the nipple will stretch and the baby will grow bigger, making the latch better.

If the feeds are going well and the baby is gaining weight well, consider weaning off shield if desired.

Wait until you are having a relaxed feed. Start with the nipple shield and when the baby is relaxed break the suction, remove

the shield and try latching the baby directly onto the breast.

If the baby has difficulty or becomes frustrated, reapply the shield and continue. Try the same procedure with each feed until the baby starts to latch onto the breast. This may take time and patience.

Occasionally, the nipple shield may be used long term. As long as the baby is gaining weight, you have a good milk supply and you are happy using a shield, then this may continue with close monitoring of the baby's weight gain.

