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# Guide to Whole Health - Newborns

**Weight today:**

**Length:**

**Head:**

## **Development:**

- You may have noticed a few reflexes that your baby performs. These are normal:
  - The **Moro or Startle Reflex**: your baby spreads his arms and cries when he gets the sensation of falling (especially as you quickly lay him down for a diaper change).
  - **Palmar grasp reflex**: your baby grabs an object (like your finger) when placed in her hand. A **plantar grasp reflex** also exists - your baby will curl his toes if you stroke the bottom of his foot.
  - **Rooting reflex**: your baby opens his mouth and turns his head if you stroke his cheeks or lips. A **sucking reflex** also exists which causes your baby to suck if anything touches the roof of his mouth.
  - **Walking/stepping reflex** - when held upright your baby will make stepping movements.
- Your baby can see only about 1 foot away. But she will quickly learn who her parents are and prefer their faces! If she hasn't already your baby will soon start to make eye contact.
- To promote normal development make sure to start doing **tummy time** with your baby. Aim for 10-20 minutes twice per day. Some babies prefer to do tummy time on their parent's chest.

## **Nursing:**

- Breastmilk is the perfect food for your baby. The World Health Organization recommends breastfeeding until age 2 (or beyond). **Please let us know if you are having difficulties nursing your baby.**
- Pay attention to hunger cues: rooting, mouthing, sucking, turning his head side-to-side. You will have better luck with nursing if you feed your baby before he starts to cry from hunger.
- **Feed your baby "on demand."** Do not restrict feedings from a newborn. Newborns do not have a "schedule." Frequent feedings (up to every hour) are extremely common and help to establish your breastmilk supply.
- **Invest in a good breastmilk pump.** Many insurance companies will now pay for pumps. Contact the Nursing Nook or another lactation consultant for more information. To increase milk supply you can pump after your baby nurses.
- **Continue to take your prenatal vitamin as long as you are nursing.**
- If you need to **increase milk supply\***
  - Speak with us immediately if your milk supply appears to drop in the first 3 weeks (after the initial engorgement period.)
  - Try Traditional Medicinals Mother's Milk Tea, 1 cup four to five times per day, or eat organic oatmeal cookies. Please tell us first, in case this goes against your health plan.

- If you are planning on returning to work you can introduce a bottle as soon as breastfeeding is well established, usually around 3 weeks. You can also introduce a pacifier around this time.
- Breastfed infants should be given an additional 400 IU Vitamin D daily to prevent vitamin D deficiency.

### **If nursing doesn't work out:**

- If for some reason you are unable to nurse, **feed your baby 2-3 ounces of pumped breastmilk or formula every 3-4 hours.** By 1 month most babies will be eating 4 ounces per feeding.
- Throw out any milk or formula you have not used within one hour. Sterilize all bottles, nipples and pumping equipment by placing them in boiling water for 10 minutes. (Or use microwavable sterilization bags or gadgets.)
- If you cannot find safe donor breastmilk, we recommend HIPP or Holle organic formula, which are extremely high quality and imported from Germany. Alternately Earth's Best Organic Formula is the next best option. Some babies may need hydrolyzed or elemental formulas. Please speak with us before starting one of these formulas.
- **Babies under 6 months should not be fed homemade formula.** Home made formulas from cow, goat or sheep milk contain proteins much larger in size than human breast milk. Additionally the ratios of electrolytes like sodium, calcium, potassium and phosphorus do not match human breast milk. **This can cause permanent kidney damage that is undetectable without a blood test.** Commercial formulas break down these proteins and balance electrolytes, making them a much safer option. If your baby cannot tolerate all commercial formulas please let us know - he will likely qualify for donor breastmilk from a milk bank.

### **Nothing other than breastmilk or formula**

- Do not give your baby water or sugar water.
- Do not give your baby honey until she is over 12 months of age. No honey pacifiers!

### **Diapers:**

- Your baby should have her first bowel movement within 24 hours of birth. This first stool (poop) is called meconium and is thick, black and sticky. We highly recommend coating the baby's bottom in olive oil shortly after birth to make it easier to wipe off the meconium stool.
- Your baby should have 1+ wet diaper the first day, 2+ the second day, 3+ the third day, etc. until he has 6-10+ wet diapers per day.
- Your breastfed baby should have 3+ normal "breastmilk" stools by day 4. Breastmilk stools are yellowish in color and "seedy." After the first few weeks of life your baby may have 4+ stools per day, or as few as 1 stool per **week**. This is normal, but please contact us if your baby is uncomfortable.
- Formula-fed babies have tan to brown colored stools, usually the consistency of peanut-butter.

### **Sleep:**

- Remember "**back to sleep**". Always put your baby to sleep on his back to reduce the chance of Sudden Infant Death Syndrome (SIDS). Make sure grandparents and caregivers do as well.
- **Safe sleeping:** To prevent SIDS always keep soft objects like pillows, blankets and stuffed animals completely away from your baby. No crib bumpers or soft mattresses. Use a sleep sack or swaddle to keep your baby warm. Keep the room cool to prevent overheating.
- **Cosleeping and bedsharing:** Studies show that 40% of parents have bed-shared with their baby at some time, with over a third of parents regularly bed-sharing. In many ways the anti-cosleeping campaign has backfired, as many parents simply deny telling their provider that they bed-share, and never learn how to do so safely. This has resulted in cases of babies dying after Mom fell asleep nursing her baby in a recliner or on the sofa. Here is how to cosleep safely:
  - **Never ever share a bed with your baby if you or your partner have consumed alcohol, drugs, or medications that cause drowsiness. (E.g., Benadryl, Tylenol PM)**
  - Only sleep on a firm mattress. Keep all blankets and pillows away from your baby. Have your baby in a sleep sack, swaddle, or warm pajamas to keep him warm.
  - **Never cosleep in a recliner, couch or waterbed.**
  - Keep siblings and pets out of the bed while cosleeping.
  - Do not cosleep if you smoke cigarettes.
  - Keep your baby on his back when not nursing.
  - Do not cosleep if you are extremely obese or cannot feel parts of your body.
  - Safest cosleeping is in a side-car crib, cosleeper bassinet (like Arms Reach), or Snuggle Nest.

## What you may be feeling

- Tired! Newborn sleep is extremely fragmented, and most babies wake frequently throughout the night for the first few months. Lack of sleep for parents is a major risk factor for postpartum depression. If your sleep is extremely fragmented you **must prioritize rest**. Try to arrange a 3-4 hour stretch to at least twice per day (either at night or during the day). Alternately, aim for 12 hours in bed with/near your baby. **I cannot stress enough how important this is. You must prioritize your own rest.**
- Overwhelmed. **Ask for help**. You may have noticed - people love new babies! If someone asks you what they can do, say honestly "bring me dinner." (Or snacks, or lunch.) You won't be inconveniencing anyone, they will want to help!
- Frustrated. Some people call the first three months of a baby's life the **4th trimester**. This is because newborn babies are incredibly needy. They want their caregivers to simulate life inside the womb. This means that **it is normal for babies to want to be held constantly**. Babies cry when they are wet, hungry, tired, overstimulated or ignored. Many (or most!) babies cry for no apparent reason, especially in the evening. It is normal to be frustrated at some point. When this happens set the baby down in a safe place and walk away for a few minutes. **If your baby cries for more than 3 hours a day please let us know. (Colic\*)**
- Sad. Or happy. Or sad and happy at the same time! **Baby Blues** affect 80% of women. Baby blues happen because of the rapid hormonal changes after delivery. It often worsens as you

milk comes in on day 2-3, and gets better by 2 weeks. Normal symptoms: crying for no reason, moodiness, irritability, problems with sleep, change in appetite, difficulty concentrating.

- **What is NOT normal:** seeing or hearing things that are not there (hallucinations), paranoia, suicidal thoughts or actions, disorientation, bizarre behavior, thoughts of harming yourself or killing your baby. Postpartum psychosis is a treatable medical condition. **If you are having these thoughts please call 911** and let us know immediately. (Postpartum depression\*) Here are some hotlines that may be helpful if you are concerned:
  - 1-800-944-4773 - Postpartum Support International. (This is NOT a crisis hotline.)  
[www.postpartum.net](http://www.postpartum.net)
  - 1-800-273-8255 - National Suicide Prevention Hotline. [www.suicidepreventionlifeline.org/](http://www.suicidepreventionlifeline.org/)

## Safety & General Health Tips

- **Do not leave your baby unattended.**
- Make sure your **infant car seat** has been installed correctly. Many local fire stations will do car seat checks.
- **Wash all new clothing** before it is worn by your baby. Many clothes have been treated with chemical flame retardants, which can be harmful to your baby's health.
- Make sure **bath water is only lukewarm** before bathing your baby. Do sponge baths before your baby's cord has fallen off. Never leave your baby alone in the bath for any reason.
- Keep your baby away from people who are **smoking**. Second hand smoke causes cancer, raises your baby's risk of SIDS and can lead to asthma and other lung problems.

## What to expect from your baby between 2 weeks and 2 months:

- He will have his first **Wonder Week** at around 5 weeks. (See the Wonder Weeks book or smartphone app.)
- She will probably have a growth spurt at 3 weeks, 6 weeks and 3 months. (She may be crankier than usual or eat more than usual.)
- She will gain an average of 0.5-1 oz per day.
- He will begin to smile
- She will start to lift her head and shoulders during tummy time

## Coming up:

For information about vaccines prior to your baby's 2 month visit please see [www.udemy.com/vaccines-demystified](http://www.udemy.com/vaccines-demystified). Enter code MTWHOLE to get the course for free.

*Topics with an \* have more information published on [www.naturopathicpediatrics.com](http://www.naturopathicpediatrics.com). Simply type in the underlined phrase into the search box to find additional articles.*