

Takeaway: Supplemental Suckling Technique (Using a naso-gastric tube at the breast)

Supplementary Suckling Technique

- This technique is used to stimulate the production of breast milk (double suction method).
- One end of a soft, small-calibre naso-gastric tube (CH 5 or 6, max. 8) is fixed on the mother's breast with a piece of tape in a manner such the tip reaches the nipple.
- The other end is placed in a cup of milk (breast milk or appropriate alternative like BMS or F-100 diluted).
- When the child nurses, s/he drinks the milk from the cup while simultaneously stimulating the nipple.
- Initiate each feeding session on alternate breasts to avoid excessive nursing/nipple cracking on one side
- Adjust the speed of milk intake by raising or lowering the cup or by pinching the feeding tube.
- Any milk left in the cup after the infant stops nursing should be fed via cup or spoon.
- Feeding bottles must be avoided due to high risk of infection.
- To prevent contamination or blockage, rinse the tube in warm water after each feeding, let air dry and put it away, clean, in its wrapper. Replace the tube when it has visible milk sediments that you cannot clean out.

Naso-gastric tube; may be necessary initially only if infant is not able to suckle at all. In this case encourage mother to express breast milk and feed through the naso-gastric tube completing the required volume with BMS or F-100 diluted.

SUPPLEMENTAL SUCKLING TECHNIQUE USING A NGT



