

Information and guidelines from  
Department of Obstetrics, Rigshospitalet, Denmark

# Home again with a newborn



**Your blood-test (PKU)  
appointment:  
Date: \_\_\_\_\_**

Telephone guidance: +45 2443 0272  
Telephone hours: 8.30 am -14.00 pm

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## Word list English - Danish

Baby carriage

Bowel movements/ stools

Colestrum

Constipation

General practitioner

Health visitor

Inflammation of the middle ear

Jaundice

Meconium

Foremilk

Hindmilk

Urinate

Navel

Stitches

Stools, bowel movements

Sudden Infant Death Syndrome (SIDS)

## Ordlister engelsk - dansk

Barnevogn

Afføring

Råmilk

Hård mave

Praktiserende læge

Sundhedsplejerske

Mellemørebetændelse

Gulsot

Børns afføring

Den første mælk

Den sidste mælk

Tisse

Navle

Syning (sting)

Afføring

Vuggedød

## Examinations by the general practitioner

The first examination of your child by the general practitioner will be at the age of 5 months. You must contact the general practitioner by yourself to make an appointment.

### The Child

#### Blood Test and hearing screening

We offer a hearing screening for all newborn children in Denmark. This screening often takes place together with a blood test before you're discharged. The blood test must be taken within 48-72 hours after birth. The Hearing screening must be made within one month. You can book the appointment at phone number +45 3545 0759 between 8.30 am and 9.30 am. The blood test must be conducted within 48-72 hours after the birth. Before leaving the hospital, make an appointment with us about when and where the blood tests are to be taken. The blood test is a simple blood sample done by pricking the baby's heel. The blood from the heel will be tested for three rare metabolic disorders.

#### Well-being

Occasionally, you might get a bit nervous about your child's well being. Please remember the following signs of the well being of the child:

- A healthy and natural skin colour
- Wet diapers
- An awake child, who is interested in eating
- A child who is paying attention to you and is comfortable when awake.

#### Breastfeeding

All babies are born with a sucking reflex that enables them to suck and swallow milk. Some children like to suck on the breast right after birth, while others need to rest or sleep first.

During the first couple of days after birth the child will get colostrums (the first milk) when sucking. The woman doesn't produce much colostrum, but it is highly concentrated and full of antibodies so the baby will get exactly what it needs. Put your baby to the breast when it needs to suck. Your nipples will get sore until you are more experienced.

One of the most important conditions for successful breastfeeding is the desire to breastfeed. If you already have decided not to breastfeed or if you do not have the opportunity to breastfeed your baby, you don't have to read the following paragraph about Breastfeeding. Your child's need for food, bodily contact and physical nearness can be filled without breastfeeding too.

### **Breastfeeding positions**

Don't forget to sit or lie comfortably during breastfeeding. Use a pillow or two to support your arm or back. Breathe deeply and calmly. You must try to help your baby to your breast and remember to bring the baby close to you. The stomach of the baby should be turned against your own stomach to make sure that the baby doesn't have to turn its head to take the nipple. This position will also prevent you from having nipples with wounds and cracks. If you are breastfeeding lying down, the baby must also lie close to you with its stomach turned against yours. In this position, the baby will bend its head backwards by itself, keeping the nose free. The baby must have the whole nipple and part of the brown area around the nipple in its mouth.

The child will use the whole jaw for sucking. You will be able to see the movement of the muscles close to the ear. When you milk production is fully stimulated, you can actually hear the baby swallowing the milk.

Your child will probably sleep a lot during the first days of living. This is completely normal. After the first days, the child will need at least 6 feeds during the day. You might experience days with frequently sucking, and days with less frequently sucking. It is quite normal to be breastfeeding a great deal during daytime. If the child is sucking less than 6 good meals a day, you should contact the health visitor or the doctor.

### **Sex after the birth**

After birth you might feel tired and exhausted and do not feel like having sex. This is normal for the first few weeks, at least sex should be approached gently and tentatively for a while. It's important for you and your partner to discuss your feelings to avoid frustrations. The child gets all the attention and it's hard to imagine all the work and responsibilities that comes along with being a mother or a father. You might experience some pain while having sex for weeks or months afterwards, even after your incisions or tears have healed. Your vagina may hurt a bit or be drier than normal because of hormone change. Use a lubricant, such as K-Y, until your hormone levels are back to normal and your vagina lubricates. Don't forget to use some kind of birth control. Breastfeeding will not protect you against being pregnant again.

You can read more at the homepage of The Danish Family Planning Association:

<http://www.sexogsamfund.dk/Default.aspx?AreaID=13>

### **The local health visitor**

You can contact the local health visitor in Copenhagen (Monday to Friday) on the phone number 33 66 33 66, where you also can be told the local phone number to the district you belong to. Furthermore you can find phone numbers at [www.kk.dk/sundhedsplejen](http://www.kk.dk/sundhedsplejen).

### **Breastfeeding advice**

You can contact the organization Parenting and Childbirth on phone number: 7023 1400. The organization can give you further information about a phone number to a breastfeeding advisor near you. See more on [http://www.fogf.dk/About\\_en.html](http://www.fogf.dk/About_en.html)

be triggered especially by breastfeeding. During the first couple of days with after-pain, it can be necessary to use painkillers (analgesic drugs). This will not hurt your baby.

### **Bowel movements**

If you have had laxatives during birth, you will not necessarily have bowel movements the first couple of days after birth. Avoid constipation by eating whole grain bread, raw vegetables, prunes and fruit. Drink plenty of fluids. You may try a mild laxative if the constipation continues for four or five days.

### **Maternity gymnastics**

During pregnancy and delivery, the pelvic floor can become stretched and weakened and might end up causing urine control problems after birth. A weakened pelvic floor can cause pelvic organs to sag, as in the case of uterine prolapse. Doing regular pelvic floor exercises after birth will prevent this. You can see exercise pictures in our folder called "*I form efter fødslen*". Ask your local practitioner to check if you are using the right muscles when doing pelvic floor exercises when consulting him/her eight weeks after birth.

### **Food and drink**

Vary your food and don't hesitate to eat different kinds of foods. The baby will not be affected by any kind of food – not even spicy food – if you eat normal portions.

Drink plenty of fluids - even if you don't feel thirsty.

Alcohol consumed by a breastfeeding mother passes easily into her breast milk at concentrations similar to those found in her bloodstream. Infant's are more sensitive to alcohol than an adult. Therefore, you should not drink alcohol while breastfeeding.

Taking vitamins or iron supplements everyday is a good, idea as long as you are breastfeeding. We recommend extra iron supplements for women who have been bleeding a lot during birth. If you don't eat or drink milk products you should take a calcium supplement every day.

### **Breastfeeding – dealing with mastitis**

It is not possible to say exactly when your milk production is fully established. Most often it will happen within two, three or four days after birth. Some women will experience mastitis (inflammation of the breast), but the experience of mastitis is not the same for all women. Some women might feel mastitis only a single day or time of the day, for others it will be a whole day filled with tender or painful breast, a reddened or hard breasts or part of the breast. In some cases the area around the nipple can be so painful and hard that the baby cannot grip the nipple.

Here are some advices to help you in case of mastitis:

- Let the baby suck as long and as often as it likes. This might ease the pain and the inflammation will decrease.
- You might ease the pain by putting a hot towel on the breast.
- Take a long hot shower. Let the hot water massage your breasts. Use your hands to massage your breasts by moving them from the inner side, out towards the nipple. Gently press on the nipple so milk will come out. This way the infected area will soften up a little and it will be easier for the baby to grip the nipple
- If you experience hard and painful areas on the breast after breastfeeding; you can try to massage these areas until they feel soft and not so tender.
- To prevent blocked milk ducts and other infections in the breast you should avoid draughts. Keep your feet warm and keep the breasts warm. You might do this by using woollen shields in your bra.
- In case of fever over 37,5 degrees Celsius or red marked areas on the chest, you must contact the health visitor or general practitioner (local doctor).

During the first days, the child will get all it needs from the colostrums. When your milk 'comes in' the consistency of the milk will change. During the first part of breastfeeding, the milk, called foremilk is thin and watery like skim milk. During the last part of the breastfeeding comes the hind milk, which is thick and rich like cream. The proteins and fat that makes the child satisfied are in the hind milk. Therefore it is important that the baby finishes sucking from one breast before starting on the other. Changing breast

several times during breastfeeding will result in the baby is not fed enough because it doesn't get a perfect balance of foremilk and hind milk.

### **Dummy/pacifier**

You can offer your baby a dummy/pacifier when the breastfeeding is going well. It's better to wait until then because the baby might find it difficult to switch from sucking on a dummy or artificial teat back to sucking on the breast. This is called nipple confusion. You should therefore not offer your baby a dummy/pacifier until its breastfeeding well.

### **Urination and stools**

A newborn does not urinate much, but should at least urinate once in his or her first 24 hours. This shows that the kidneys are functioning normally. As the infant feeds more, it will urinate many times during the day. Pinkish stains on the baby's diaper is not blood, but concentrated urine, which looks pink in babies. Newborns will have at least one bowel movement. During the first 36 hours after birth the newborn should have its first stool called meconium. Meconium is a greenish, black, sticky stool. During the next 2-4 days the stools are likely to be semi-liquid and green-brown. This is a sign that the milk production is full and the baby is feeding well.

Infants who are breastfed, will not necessarily have bowel movements every day. Stool frequency can vary from once a week up till 8-10 times a day.

### **Genitals**

Newborn girls might have a little bit of bleeding from their vagina, and some vaginal mucus. This is perfectly normal and caused by the withdrawal of the hormones of the mother. Some newborn boy's testicles are swollen after birth. This is also perfectly normal. It's most likely because of the extra fluid newborns carry. The swelling is harmless and will disappear by itself. Newborns can have swollen breasts too because of the mother's hormones. This is perfectly normal and will disappear by itself.

lining is renewed. The normal blood loss from the womb after childbearing is called lochia. It starts by being red and turns to a reddish brown or brown colour after a week to ten days. Thereafter, it becomes brown or clear and ceases altogether, usually after six to eight weeks. Generally, bleeding should decrease over time, but there can be some bursts of activity for up to a month. Often most of the real bleeding should be over within a few days.

You can go swimming in the ocean and swimming pools once the bleeding has stopped. It's important to avoid using tampons until you've completely healed inside because they could introduce bacteria.

If you experience strong abdominal pain or a change in the look, size and smell of the vaginal drainage, contact the local practitioner.

### **Stitches**

If you have been sewn up after birth, the stitches will dissolve after a week or two. Sometimes not until five weeks after birth.

Some women find their stitches painful and slow to heal, others do not experience much discomfort. The following might help you in case of pain:

- Sitting on a soft pillow. Don't use a rubber ring
- Use ice-sanitary towels (pour water on, put in the freezer)
- Use painkillers, such as paracetamol or ibuprofen (see more on the next page)

### **Personal hygiene**

To avoid infection in the stitches or in the uterus, you should wash or rinse with water each time you use the toilet. Wash your perineum daily with soap and water during your shower or bath. Change sanitary towels when necessary and after going to the restroom.

### **After birth pain**

After birth the uterus begins to return to its pre-pregnancy size. The shrinking can be painful and is called after-pain. After-pain will

## **Smoking**

Newborns are very sensitive to the chemicals in tobacco smoke. If exposed to passive smoking, children are more likely to develop sensitive airways and are more susceptible to health problems. Exposure to smoking increases the risk of a child developing asthma, inflammation of the middle ear and other respiratory infections.

## **Becoming a parent**

### **Reactions after birth**

Adjusting to a new baby can be an overwhelming task. As a parent you are still recovering from the birth. The baby requires "24 hour-around-the-clock care," and you may be exhausted from late night feedings, a crying baby, too little sleep and so on. After having a baby, many women have mood swings. One minute they feel happy, the next minute they start to cry. These are all understandable and normal feelings. These symptoms usually start about 3 to 4 days after delivery and may last several days. Usually the symptoms will disappear after a few days.

However, some women have more severe symptoms or symptoms that last longer than a few days.

Some feel depressed, worthless, hopeless or guilty. Some are having a hard time concentrating and lose their appetite. Some parents experience a strong sense of anxiety and experience difficulty sleeping even when the baby is asleep. This is called postpartum depression.

Postpartum depression is treated much like any other depression. Support, counselling ("talk therapy") and medicines can all help. Talk with your doctor or health visitor about what treatment is best for you. Do not hesitate to contact the doctor if you are experiencing any of the symptoms above.

### **Postpartum bleeding**

After birth your bleeding is similar to a heavy menstruation. It is normal for you to lose some blood from the womb (uterus) until its

## **Navel care**

After the birth some blood or fluid might come from the navel. This is perfectly normal. You don't have to wash or do anything else. Simply leaving the stump alone will help it fall off sooner with no increased risk of infection. The stump will fall off within 5-6 days or so.

## **Eyes**

The baby's eyelids may be a bit swollen the first couple of days. If the baby has sleep in its eyes, you can wash it off with cooled boiled water on cotton wool. If the baby still has greenish-yellow discharge, or crust or has red eyes after one day, you should contact the local practitioner.

## **Skin**

Different kinds of spots can occur in the skin of newborns. Some of them occur because the baby's too hot, others will occur without an explanation. The spots will disappear quickly. If the spots look like acne (mainly small, red bumps) you should contact the general practitioner or health visitor.

## **Bath**

A bath one or two times a week during the first time after birth is sufficient. Wash the baby from the head and downward. Soap is not necessary. You need to be very careful to dry the armpits, groins, and nates.

## **Temperature**

The newborn cannot regulate its temperature as well as an adult and therefore needs to be protected from cold and heat. A good way to check the baby's temperature is to feel the baby's chest with a finger. If the skin is either chilly or moistly warm, the baby's temperature is right.

You can go for a walk with the baby in a baby carriage. Walk for a short time in the beginning and feel the baby during the walking to see how it keeps its temperature.

## Fever

Any temperature over 37,5 with a rectal thermometer is considered a fever, Nevertheless, you do not need to rush the baby to the clinic because of fever, if the child is alert, active and playful. If your baby has a temperature over 37,5 degrees, you can try to take of some off the child's clothes and measure the temperature again ½-1 hour later. You should contact the doctor or health visitor if the baby still has a temperature over 37,5 degrees and is crying, acting uninterested, inactive and sleepy and doesn't want to be breastfed.

## Jaundice

Jaundice is the yellow colour seen in the skin of many newborns. Everyone's blood contains bilirubin, which is removed by the liver. Before birth, the mother's liver does this for the baby. Most babies develop jaundice in the first few days after birth because it takes a few days for the baby's liver to get better at removing bilirubin. Most infants have mild jaundice that is harmless. Some infants get drowsy and don't want to eat because of the jaundice. In this case the child must be breastfed every fourth hour. Contact the general practitioner if the child is very drowsy and does not want to eat. You must also contact the local practitioner if the skin of the child gets very yellow.

## Sleeping positions

You can reduce the risk of Sudden Infant Death Syndrome (SIDS) by:

- Putting your baby to sleep on its back. Even if you place your child to sleep on its back, it is possible that your child will roll over during the night. As soon as the baby can turn around by itself, you don't have to worry if the baby sleeps on the stomach

- Protecting your infant from exposure to cigarette, cigar, or pipe smoke.
- Making sure that your baby doesn't get too hot when sleeping. The child should be warm, but not too warm. An easy way to check if your baby is warm enough is to place your hand on the abdomen. Her skin should feel as warm as yours. If she feels hot or clammy remove one of the blankets.
- Baby nests, sheepskins and duvets are all heat insulators and should not be used for young babies as they prevent heat loss.

## Head positions

If your baby continues to lie with her head turned to one side all the time, the head will become flattened. Here are some good advices to prevent a flattened head:

- **Sleeping:** change your baby's head position each time you lay her/him down. Lay your baby with the head towards the top of the crib one time and the next time lay it down with the head at the other end.
- **Infant seats, strollers, bouncy seats, and swings:** Pay attention to see if your baby likes to put his head to the same side all the time while sitting in a seat.
- **Playtime:** It is very important to start placing your baby on the stomach for playtime once the umbilical cord has dried up and fallen off. Time spent lying on the tummy helps develop neck, stomach, arm, and back strength. It also helps to get the baby ready for rolling, sitting, and crawling.
- **Diaper change:** Pay attention to your baby's head positions. The baby should not always look to one side only. If it does, you might place toys in front of him, and encourage him to look to the other side.
- **Generally:** Try encouraging the baby to look at you from different sides by talking to the baby from both sides and by placing toys around the baby