

Remember to immunise your baby as they grow and develop into a healthy child.

Immunise at 6 weeks; 3 months; 5 months; 15 months; and 4 years. If you are unsure talk to your family doctor or practice nurse.

The National Women's Health website has good, accurate and up to date information which you may find helpful.

<http://nationalwomenshealth.adhb.govt.nz/>

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## Nipple Shield use to support breastfeeding



Auckland District Health Board  
National Women's Health

## What is a nipple shield?

Nipple shields are thin, flexible silicone covers that can be placed over the nipple to support your breastfeeding.

## When to use

- If your baby is premature, unwell or small, a nipple shield may make feeding easier for a small or weak baby
- If you have true inverted nipples where after several attempts baby either cannot latch or latch is shallow

**You can start using a nipple shield** once your milk is “in” and flowing well, or if one of our lactation consultants recommends it.

## Why use nipple shield

- It keeps your nipple in an extended position, so baby can pause without ‘losing’ the latch. Milk pools in the tip of the shield, and provides an immediate reward when the baby starts suckling again.
- Research shows that the milk intake of premature (early born) infants increases when a nipple shield is used.
- As the baby gains weight and matures, the shield becomes unnecessary.



## When not to use

The aim of using a nipple shield is to help a baby to transfer milk. **Do not use a nipple shield to cover up nipple damage caused by incorrect positioning or latching.**

If you are not sure how to hold your baby and latch them to the breast without pain or nipple damage, ask your midwife or nurse for help.



If you have been using the nipple shield for flat or inverted nipples, start feeding with the shield on, then several minutes after the baby has settled into a good suckling pattern and is feeding well, try removing it and reattaching baby.

- Gently remove the baby from the breast, then holding the baby in the same breastfeeding position, remove the nipple shield and gently latch the baby on to your bare breast.
- If your baby doesn't latch on to the breast without the nipple shield, apply the shield again and try without the shield at another feed. Try at times when you and your baby are relaxed and when there is someone there to help you with other children or distractions, You may decide that you don't want to try removing it at every feed.
- Pre-term infants may need the nipple shield longer.
- NEVER cut the end off the shield.



A list of Breastfeeding Support in the Community is available from your midwife/LMC.



## Cleaning the nipple shield

- After use the nipple shield should be rinsed then washed in hot soapy water, rinsed again then stored into a clean covered container until needed
- *1 x a day either boil or use a microwave steriliser*

## How long before I can stop using the nipple shield?

This depends on why you need the shield. You may need a shield for a few feeds, days, weeks, or months. **When the time is right for you and your baby, you can stop.** For most women, using a nipple shield is only for a short time.

- **Your baby should be feeding effectively** without any more weight loss, appear satisfied after feeds, have at least 6 to 8 wet nappies in every 24 hour period once your milk has come in, and have normal breastfed baby bowel motions.
- **Your breast should feel softer and well drained after the feed.** You should be able to hear your baby swallowing frequently during the feed. (Ask your midwife/nurse if you need further explanation).



## How to choose the correct shield size

The large size (24mm) nipple shield is mainly used at Auckland DHB as this allows more nipple and the areola to be drawn into the shield. Small nipple shields may cause nipple compression leading to pain, nipple damage and poor milk removal. Smaller shields are available if needed, 20mm and 16mm.

## How to apply the shield

1. Wash and dry your hands well.
2. Before applying a shield with a cut-out at the top - decide where your baby's nose will be when feeding at the breast
3. Warm the shield with hot water. This also helps to soften the shield and helps it stick.
4. Invert or turn the shield's brim back on itself and with your fingers holding the brim, stretch the part of the shield where the teat joins the brim
5. Place the stretched shield over your nipple, and release the tension. This should draw your nipple into the teat and help the shield to stay in place.
6. You may want to hand express a few drops of milk into the teat of the shield before you latch baby
7. You can tape it in place whilst you are learning how to use it if needed. You may also like to apply lanolin on the edge to help it stay in place



## Breastfeeding using the shield

If fitted correctly, it will not be necessary to hold the shield in place. However, you may wish to place your fingers at the edge of the shield, or tape in place.

1. Start with the teat of the shield resting above your baby's top lip.
2. Touch your baby's lips with the nipple shield or the lower part of your breast.
3. Your baby must open their mouth very wide so that you can bring your baby on to the breast.
4. When latched, your baby's lips must reach on to the brim of the shield. **If you can see the teat of the shield, your baby is not latched correctly.**
5. Use breast compression and massage to help milk flow.



Poor Latch



Correct Latch

## What to look out for

- Check the shield during the feed to ensure there is milk in it, and that baby is not just sucking saliva.
- It is important that the baby does not slip back on to the teat of the shield as this may cause pinching and nipple trauma. Your baby may also get less milk.

Make sure the baby is sucking AND swallowing. "Milk transfer" means the milk is getting into the baby.

## Expressing your milk

**You may need to express to keep your milk supply up** while you are using the nipple shield, particularly if your baby was born before 37 weeks or if they are under 3kg.

Work with your LMC or hospital midwife to:

- Make a feeding plan
- Learn how to hand express
- Learn how use an electric breast pump

If you can, it is recommended you express once a day on top of your breastfeeding.

Record **all** wet nappies and the number and colour of stools on the feed chart.

Before you go home and once you are at home the plan needs to be revised with your LMC/ homecare nurse or Lactation Consultant.

You will need to express once a day to keep your supply well stimulated in the early weeks after the birth.