

Baby Health Care

Source of the original information of the following note that is in Mandarin Chinese (Traditional) from a take home booklet, is from and is given to parents with newborn babies at MacKay Hospital (Taipei), with medical terms referred from Pai's English-Chinese Medical Dictionary (sixth edition), given by Professor Dr. Kenny Kuo, Dean (郭天明) of the YMCA International College, Taipei, plus advice, clarification and help from McKay Hospital professional nurse / and the dearest friend, Ms. Shu-ting Lu.(呂淑婷) This translation (Mr. Fun-yuen Chang)(張根源), done at no cost and aimed for no monetary gain, is made to help foreign mothers who are having their babies in Taiwan. Hopefully, this will serve to be insightful (as it is translated directly from MacKay's booklet). It must be noted with exclamation marks that some hospitals might have different rules and suggestions for treating babies. Please treat it with regard and appreciation to the growing technology and endless effort of all wonderful nurses delivering, treating, and taking care of your babies.

1. Baby Behavior

Below are things the parents could do for the babies when they are sleeping:

When the babies are sleeping calmly (first sleeping stage), they usually breathe calmly, show less facial or eye lid movement, and may be sucking on their fingers (do not disturb them, they are not hungry and them angels sucking on their fingers while sleeping is natural behavior).

At this moment, the parents can clean the babies' ears, clip their nails, but do not try to feed them when they are sleeping.

When the babies are in deep sleep, they might breathe at irregular pace, and you could see eye lid movement from their shut eyes.

When the babies are awake and inactive, their eyes are open and they rarely move around. At this time the parents can go hug and tease the babies, change their diapers, and feed them.

When the babies are active, they may seem agitated as they move around or cry loudly. These may be signs for the parents to feed the babies, to check the babies' diapers, and to make sure of the babies' physical condition (whether or not they are ill with fever or are feeling uncomfortable from indigestion or related pain).

2. Congenital Metabolism Sieve Check

There have been many congenital (innately born with) metabolism-related problems with the babies that would influence the babies' growth and physical conditions, and will inevitably affect the parents.

Abnormal metabolism of the babies is hard to detect during infancy, therefore we rely on Congenital Metabolism Sieve Check to understand the babies' conditions.

Should the babies be detected with metabolism-related problems, it is strongly encouraged that the babies receive treatment as soon as possible.

Below are possible symptoms that may be detected from Congenital Metabolism Sieve Check:

1. Congenital Weakness of Thyroid Gland

Congenital weakness of thyroid gland could occur if the babies do not have thyroid glands, or the babies' thyroid glands had not been developed properly. Babies with weakness in thyroid gland may occur dull, have smaller noses, drier skin and hair, acquire husky voices, got hernia on the navel, have constipation / astriction, have difficulty in breathing, have jaundice / icterus, and show slow development in growth (physically).

Because the above possible signs of the babies having weakness in their thyroid glands are not easy to detect until two or three months after the babies are born, the only way to diagnose the above possible symptoms is by performing sieve check. Moreover, from the sieve check that detects the above symptoms (if any) the doctors will perform further physical check of the entire body, and to help understand the symptoms the doctors will diagnose thyroxine (also called T4 since such secretion/excretion includes four iodinated amino acid and relates to the metabolism of cells) and the content of thyroxine from the babies.

To treat weakness in thyroid gland, the right amount of thyroxine injection will do. However, the period of time treatment is done has essential influence on how well the babies turn out from thyroxine injection. Normally, there is an approximately 80% of babies that are ranged to be newborn or three months old that receive thyroxine injection to be cured and have normal development. Babies that are treated after they are six months old (or older) would not have proper development after receiving thyroxine injection. If thyroxine treatment is done when the kids were five or six years old, aside from improper development of intelligence, the babies would also seem physically small.

2. Phenylketonuria

Phenylketonuria is caused due to abnormal metabolite of amino acid. Such disease is caused due to the lack or insufficiency of enzyme in the body, the process of metabolism of enzyme, enzyme and / or its metabolite in blood, could all influence the intellectual growth and the central nervous system, and cause lifelong damage affecting the intelligence. This abnormal metabolite of amino acid is recessive and the chance of occurrence is 25%.

Treating phenylketonuria is done through changing the food babies eat. Babies found with phenylketonuria should eat from specialized milk powder, and

regular milk is prohibited. Other food used or taken must be granted and given by the pediatrics department; pediatrics or/and a dietician.

3. Galactosemia

Galactosemia is caused to the lack of enzyme, which leads galactose not to normally transfer into glucose. It is a type of recessive disease related to metabolite of carbohydrate. Babies with this disease will have excessive storage of galactose within their bodies. This symptom does not usually occur at birth. However, severe symptom will cause puking, lethargy, not increasing weight, abnormal enlargement of the liver, jaundice / icterus, or death. Babies with not as serious symptom of Galactosemia could be slow in growing development, have cataract, or cirrhosis (of the liver).

One could treat Galactosemia by feeding newborn babies soymilk. Any galactose-included products such as milk or dairy products must be prohibited.

4. Glucose-6-Phosphate “Anoxia” (Note: not sure how to translate this one!)

More easily understood as “G-6-P-D” (this is the correct acronym, though) is a disease that occurs in high percentage among Taiwanese babies (3 out of 100), with a higher chance applying to male babies than female babies. Due to the lack of G-6-P-D in blood, newborn babies could have jaundice/ icterus. When the condition becomes serious it might lead to cerebral paralysis. Whether an infant or an adult, one should not be in contact with gentian violet or eat broad beans, in case it leads to anemia and other side effects.

5. Congenital Adrenalin Gland Increase

This is one of the most severe possible illnesses that may be found on babies. Babies with such symptom would have imbalance of electrolyte and negative effect on adrenal gland, and would occur 10 days after birth. Such symptom could also cause lack of sodium and surplus of potassium, puking, not increasing weight, and possible death if ignored. Another possible symptom is unclear signs of the babies’ reproductive organs or excessive length of clitoris. Immediate treatment and taking medicine on time are keys to curing this symptom.

Congenital Metabolism Sieve Check can be done by having medical doctors and personnel to sample blood from newborn babies two to three days after they were born, or twenty-four hours after they had been fed.

3. Examining Jaundice/ Icterus and Ways to Treat Jaundice/ Icterus

Jaundice/ icterus on newborn babies usually occur two to three days after birth. It should reach to the peak of development on the fourth or the fifth day, and begins to disappear after seven to 10 days, and should completely disappear in two weeks. However, when bilirubin measured from the baby comes out to be over 15 mg/dl,

the baby is considered to have high bilirubin and should be given therapy. Since every newborn babies check out from the hospital at different times, the parents ought to continue to examine if their babies still have jaundice / iceterus everyday for 10 to 14 days after check out from the hospital. Some babies being fed with breast-milk could have longer period of time having jaundice / iceterus, which would disappear from the bodies a little bit later.

You could examine the skin to see changes of jaundice / iceterus by using the table (attached), while dividing the baby's body into five examine parts into head, body, private parts, legs, and foot:

1. Start by examining the face by lightly press on the forehead of the baby so the pressed spot turns white. As pressure of your finger is released and as the pressed spot turn back from white into original skin tone, if during this short time the pressed spot turned yellowish, that means the baby has jaundice / iceterus.
2. Follow step 1 by examining parts 2, 3, 4, and 5.
3. If pressed spot does not appear yellowish, record it anyway for comparison.
4. If as you examine from part 1 to part 5 more and more pressed spots turn yellowish, such as from part 2 to part 3, it means jaundice / iceterus has gotten worse and you must return to the hospital. However, if as you examine less spots have turned yellowish, such as when examining from part 3 to part 2, then it is not as severe but continue to examine.

Note: Jaundice / iceterus must be examined under a room of white fluorescent lights. Do not perform examination under a room of yellowish lights or a room with pinkish paint. If after checking out of the hospital the baby still has jaundice / iceterus for more than two weeks, return to the hospital immediately.

4. Excrement

There is a close relationship between the amount of excrement and the amount of feeding times.

Feeding babies with natural breast milk would cause thinner and more moisture excrement that are more golden in color and are less strong in terms of smell.

On the other hand, feeding babies with milk powder would cause less amount of excrement that is drier and lighter in terms of color. If the excrement of babies comes in gray color, come with blood stream, are too waterish or too sour in smell, please contact your doctors immediately.

5. Bathing Babies

The purpose of bathing babies is to make babies more comfortable and for parents to understand and to check on babies' physical conditions.

Babies may be bathed one to two times a day. It is suggested that the parents

choose the bathing time during the hottest period of the day, and to bathe babies before feeding, to prevent possible puking problems.

The textbook suggestion for the environment to bathe babies is at a safe, windless, and warm place under room temperature of approximately 25 to 27 degree Celsius.

Parents must remember to take off watches, jewelries of any kind, and keep their nails short before bathing babies.

Preparations for babies: wrap part of the babies taking bath in cloth (doing so is to keep the bodies warm when other parts of the bodies are being bathed) made of cotton yarn, which is good at absorbing water. Also prepare clean diapers at hands to be used after the babies are bathed.

Bathing Tools: small towels (2), bathing towel (1), baby oil (to moisturize the skin), bathing water (when preparing bathing water, add cold water first before adding any hot water to prevent burn, and remember to test the water with your hands before bathing babies), umbilical cord caring tools (for babies that have still gotten their umbilical cords).

Bathing Principle: while bathing, cleanse from the cleanest parts of the body and move on to the rest of the body. That is to say, cleanse from the eyes to the face, and then cleanse the bodying and then the private areas.

Bathing Steps:

1. Facial Cleaning

Cuddle the baby next to your waist with one hand, and gently hold on to the baby's head from behind (as if holding an American football (also see picture) (no offense, angels!)). Clean in the following order: eyes (clean from the inner corners of the eyes and outward), nose, ears, and then the face. In case soap may hurt the eyes of the babies, you may clean the baby's face with clean water only.

2. Cleaning the Head

Hold on to the baby gently as if you were carrying a football during a hurtle (meaning there should be one free arm). Press your thumb and middle finger on both of the baby's ears (do so with the supporting arm, or in football, the arm that's carrying the football) to prevent water from going into the ears. Use your "free arm" and gently apply shampoo onto the baby's head and gently rub the hair. Rinse with water and gently pat dry.

3. Cleaning the Body

First, to wet the body, gently rinse water onto the baby's body. You can do so by squeezing a wet small towel on the baby in your arm.

After placing the baby into the bathing tube (or bathing sink), firmly grab on

the baby's arm (the one farther away from you (since it is suggestive in this article that we place the baby slightly horizontally in front of you when bathing)), and clean in order the front chest, the upper arm, the stomach, and the legs.

When cleaning the back, first turn the baby around and let the baby lie on one of your hands, and then use the same very hand to hold onto the baby. As the baby's back is now facing at you, clean in order the back, the bottom, and the legs.

Turn the baby back into the original position and clean the baby's genitals.

4. Drying the Body

Dry the baby with big bathing towel. Especially, make sure that behind the baby's ears, the baby's joint areas, and / or wrinkled parts of the body are pat dry.

5. Putting on Clothes

When putting clothes on after the baby is all clean and dry, make sure the baby is comfortable with the clothes put on him / her and that these clothes are not too tight on him / her.

6. Putting on Diapers

Avoid using plastic diapers.

Take closer look at the baby's legs and make sure the diapers are not too tight that hurt the baby's groin areas or legs.

Diapers should be placed on below the baby's belly, so that if the diaper gets wet, it would not affect the umbilical cord (this is for babies that still have gotten umbilical cord on them).

If there is no irritation or rash on the baby's skin, there is no need to use baby powder or baby lotion. Keeping the baby dry will do just fine. If there is any irritation or rash on the baby's skin, see your doctor immediately.

7. Bathing Notes

Depending on the current day's temperature, you may add additional clothing on for the baby.

When decortications occur or when skin turns dry, apply lotion that can be easily absorbed by skin.

In order to prevent germs or bacteria from the anus part to infect babies' private parts, cleanse the babies' private parts from the front to the back.

6. How to Disinfect Baby's Bottle

After each feeding, you should always throw away the leftover milk, cleanse the baby's bottle, the cap of the bottle, and the baby's nipple inside and out. Rinse the baby's bottle with water several times. Make sure you squeeze the water out of the

baby's nipple before you disinfect it. If the above equipments are difficult to clean, you may place them all in a sink full of water, let them sit there for a period of time and then clean them afterwards.

Disinfecting by Steaming:

You could steam feeding equipments in steaming pots. When the steam from the pot has vaporized and the equipments are cooled, you may then take the feeding equipments out.

Disinfecting by Boiling (you may use a clean and not oily pot as substitute):

Place baby's bottle upside down in disinfecting pot, place cold water into the pot to 80 percent full, in prevention that the water spills out of the pot when boiling (if disinfecting equipment by using a normal pot, place baby's bottle horizontally in the pot, and the water added into the pot must be over the baby's bottle).

When boiling glass baby bottles, place them in a pot of cold water, and boil for five minutes, then place assorted feeding equipment into the same pot and boil for three to five minutes.

When boiling plastic baby bottles, place assorted feeding equipment into the same pot *after* the water is boiled. After boiling, dump the water out of the pot but keep the pot lid on and wait for the remaining steam inside the pot to vaporize. Take out disinfected feeding equipments out after they are cooled.

Remember to wash your hands before taking feeding equipments out. You can take baby bottle out by hand, but only take the cap of the baby bottle by the side.

As for the baby's nipple, take it out with a disinfected clip.

7. Vaccine

Below includes details on the modern vaccine provided by hospitals in Taiwan.

Vaccine	Time of Inoculation	Note
Bacillus Calmette-Guerin vaccine (named after Calmette and Guerin); (BCG)	First shot: taken after the baby has born for more than 24 hours, and weigh more than 2500 grams. Second shot: given to sixth grade kids who are tested negative from the result.	BCG shot can help prevent tuberculosis; T.B. 10 to 14 days after inoculation on the left arm may appear a tiny red dot that increases in size and is a little bit itchy. After 4 to 6 weeks, red dot (place where vaccine was shot on the arm) may grow into a pustule, but it is perfectly normal. By average, in 2 to 3 months

		<p>the part will heal and will leave a scar looking like an eschar on the upper left arm.</p> <p>After inoculation, if there's an increase in lymph under the arm, see a doctor immediately.</p>
<p>Diphtheria, whooping cough; hoping cough; pertussis; chincough, cold, and Sabin vaccine (DPT & OPV)</p>	<p>Basic shot: First shot: taken when the baby's two months old. Second shot: taken when the baby's four months old. Third shot: taken when the baby's six months old. Additional shot: First shot: taken when the baby's eighteen months old. Second shot: taken when the baby's in first grad (elementary).</p>	<p>Do not feed the baby 30 minutes before taking Sabin vaccine. Baby's anus temperature to be measured to be 38.5°C or higher must see medical treatment immediately. Do not rub the part of the baby's body where taken the shot. If the part of the baby's body where taken the shot seems red or should the baby feel tired, the above situation will disappear in one to two days.</p>
<p>Measles, German measles, parotitis; the mumps (MMR vaccine)</p>	<p>Shot: taken after the baby's been born for 15 months (however, Isjlfjsdf, 9-month-old baby may take the shot).</p>	<p>5 to 12 days after inoculation the baby might appear to have a fever, measles or have headaches. Reactions such as partial lymph increase or rash may occur but will be self cured in four to five days. Baby's anus temperature to be measured to be 38.5°C or higher must see medical treatment immediately. After inoculation, avoid</p>

		<p>contact with cold wind. Drink more water or fluids and care for the body hygiene.</p>
<p>Encephalitis B; Japanese encephalitis (Japanese vaccine)</p>	<p>Basic shot: First shot: taken when the baby is 15 months old. Second shot: taken two weeks after the first shot. Additional shot: taken one year after the first shot.</p>	<p>Most babies would have no significant physical reaction after the inoculation, but a few babies might seem tired and may have fever. After inoculation, avoid contact with cold wind. Drink more water or fluids and care for the body hygiene.</p>
<p>Hepatitis B vaccine (HBV)</p>	<p>First shot: taken when the baby is two days old. Second shot: taken when the baby is 30 days old. Third shot: taken when the baby is six months old.</p>	<p>If the mother appears to have the result of HbsAg (positive) / HbeAg (positive) from the hepatitis check, the newborn baby must receive immunoglobulin shot within 24 hours. Newborn babies must receive immunoglobulin shot regardless of their weight. Newborn babies born with or more than 2200 grams must receive hepatitis inoculation. However, newborn babies that appear to have difficulty in breathing, incomplete heart function, serious jaundice / icterus, bilirubin higher than 15 mg/dl, congenital defect, or internal dysfunction; a</p>

		<p>lesion; a functional disturbance are not suitable for neither HBV or immunoglobulin shot. Very few cases of newborn babies with different kinds of body would have the following reactions within three days after inoculation: fever, tired, or agitated.</p>
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Note: HbsAg is short for hepatitis B surface antigen (formerly known as HAA).

HbeAg is short for e*antigen.

8. Umbilical Cord Caring

1. Time: umbilical cord caring should be done at least four times a day, and be done after bathing babies. However, do not perform umbilical cord caring right after feeding the babies (in order to prevent choking). If umbilical cord should be infected by excrement, increase the number of times of umbilical cord caring. The parents should continue to perform umbilical cord caring for at least two more days after the umbilical cord has detached itself from the baby's body, and until the end of the umbilical cord part is completely dry.
2. Newborn babies' umbilical cords get smaller and darker within two to three days, and they should naturally detach within three to four weeks.
3. Prepare 95% cleaning alcohol (for drying) and at least four q-tips.
4. Steps: fold down the babies' diapers, apply alcohol onto q-tip. Firmly hold the umbilical cord with your fingers, slightly tilt the root of the umbilical cord and cleanse around parts attaching the umbilical cord and the skin as you slowly turn the q-tip in hand (do not rub around the root of the umbilical cord repeatedly with your q-tip). If the root of the umbilical cord still seems wet, repeat the above steps until the root of the umbilical cord dries up.
5. The babies may be bathed as usual. The parents must do umbilical cord caring every time after bathing. As the umbilical cord begins to detach from the body, there might be some blood but it is normal. However, if pus or smell occur, see a doctor immediately.

9. Measuring Body Temperature

When: during the first month after the baby was born, you shall measure his/her body temperature at least once a day. You may measure the baby's body temperature, especially when the baby is sick or if the baby's body feels cold.

Avoid measuring body temperature right after the baby had cried, after feeding, or after bathing.

Measuring body temperature from the anal part:

Normal body temperature of newborns should be in the range of 36.6 to 37.7 °C .

How: shake the clinical thermometer to it is shown below 35°C , wipe the thermometer with baby oil or Vaseline. Lift the baby's legs and place the thermometer into the anal for about one inch, leave the thermometer in position for one to three minutes to measure the body temperature.

Measuring body temperature from the arm pit:

Normal body temperature of newborns should be in the range of 36.4 to 37.4 °C .

How: shake the clinical thermometer to it is shown below 35°C , place the thermometer under the baby's arm pit, and stabilize the baby's arm with clothing for 10 minutes.

What to do when body temperature is too high:

When the body temperature seems too high, check if the baby's wearing too much clothes or if the room is too hot. Check the body temperature in an hour. If the body temperature is still high, you may try rinsing the baby's body with warm water, and recheck the body temperature in half an hour. If the body temperature is still too high, return to the hospital for check ups.

What to do when body temperature is too low:

When the body temperature is too low, check is the baby's wearing too less clothes or if the room is too cold. Check the body temperature in an hour. If the body temperature is still too cold, or when feeding the baby does not eat much, return to the hospital for check ups.

10. Increasing Breast-Feed Amount

As the baby eats from the mother more frequently, the mother's body naturally increases the amount of milk produced. Normally, after the baby's been born after five to seven days, the baby's body weight ought to return to the usual weight.

After 10 to 14 days the baby should increase weight. Eventually the baby ought to weight about 1 kg after a month. You may feed the baby with milk powder if the baby does not increase body weight. Otherwise, as long as the baby excrements five to six times a day, the amount of milk temperature should be enough.

If the mother could not feed the baby with her own milk, the mother could feed the baby with milk powder and according to the following chart to increase the amount of milk powder feed to the baby:

Age	Amount of Milk	Feeding Frequency
1 Month	90 – 120 cc	every 3 – 4 hours
2 Months	150 cc	every 4 hours

3 Months 180 cc every 4 hours

4 Months 200 cc every 4 hours

11. Ways for People at Work to Breast-feed Their Babies

- Rest regularly and do not keep yourself under pressure or tiredness
- Make sure to have feeding equipments with you
- Bring along pictures of your baby
- You could feed the baby before you go to work and after you come back
- Make sure the babysitter does not feed the baby soon before the mother comes home from work
- The mother may try milking and saving the milk every three hours to avoid pressure in breasts
- Wear comfortable clothing
- Increase the amount of feeding times at night and over the weekends
- Consult colleagues and ask for their experience in feeding
- Consult professionals if you encounter any problem
- Keep a storage of breast milk:

Under room temperature:

6-10 hours (mature milk)

12-24 hours (fresh milk)

In storage:

Five days

In cooler:

Keeping milk in the cooler: 14 days

Independent cooler: 3-4 months

Constant temperature cooler: 6-12 months

Milk that is unfrozen and has not been warmed:

Under room temperature: 4 hours

In cooler: 24 hours

Remember not to refreeze milk from freezer

Milk from freezer that is already warmed:

In cooler: 4 hours

Remember not to refreeze milk from freezer

Ways to store milk:

Just milked breast milk should be placed in cooler after it is left cool

Just milked breast milk that is immediately placed in cooler can be placed in freezer within 10 hours.

Do not mix warm milk with cold milk.

Already frozen milk cannot be refrozen

Milk bags that are you throw away after you'd used them once are not suitable for storing milk. If you must use milk bags to store breast milk, double bag it and squeeze the air out before using milk bags

Ways to reheat milk:

Place frozen breast milk in a container filled with warm water

Try to feed the baby right after the breast milk is unfrozen

Do not reheat breast milk from the cooler/freezer or with microwave it

Note:

Remember that the taste and the condition of breast milk changes as the baby grows

If the breast milk milked comes with separated fat, it is normal

When storing breast milk in cooler/freezer, avoid storing it close to the door as when opening cooler/freezer may affect the temperature of milk

12. Spill or overflow / To throw up milk; to vomit milk from repletion

Reason for spilling or throwing up milk is due to the fact that the part connecting the baby's gullet and the stomach is not yet physically grown, and this is why the baby might spill or throw up milk. Normally, the baby does not spill or throw up milk after 3 to 4 months.

If the baby vomits the milk fed, stop feeding. Try tapping the baby's back. Or, after feeding, let the baby stand or sit straight for 30 minutes as it sometimes helps the vomiting condition. If after vomiting the baby occurs to have a fever or seems to have difficulty digesting milk, see a doctor immediately. There is another symptom called pyloric stenosis, which might occur when the baby is a week to a month old. Babies with pyloric stenosis would puke out milk immediately after feeding and would lose weight.

13. Returning for Check-ups

When the baby is one month old, the baby may now receive the second hepatitis B shot.

For further information of receiving hepatitis B shot, please consult your hospital.

14. Frequently Asked Questions

1. Why does baby have stuff-up nose and is breathing heavily? Why is such condition more severe during feeding? Is the baby sick?

Newborn baby tends to have smaller nasobronchial, and newborn baby usually cannot properly control his/her own soft palate/the velum until the baby is three or four months old. When the baby breathe his / her nose might vibrate the cartilage inside the nose, and that is why the baby might breathe heavily. Normally the condition gets better in three to four months. Newborn babies tend to breathe with their mouths more. So when feeding, you could try

feeding the baby for a while, also stopping for a while so the baby (who breathe with the mouth more in the beginning) will be more comfortable. Newborn baby breathes in a frequency faster than adults. Newborn babies breathe 30 to 60 times a minute, and it is normal.

2. What to do if the baby has gum on eyes?

Often the newborn baby's nasolacrimal duct may be stuck until after seven to eight months. If it is still stuck, consult an eye doctor. Since stuck in nasolacrimal duct may lead to conjunctivities, once there is yellowish secretion of any kind found, see a doctor immediately.

3. Why does the baby sleep all day, but stay up all night crying?

The baby might cry at night due to hunger, the diaper is wet, sick, tired, or want to sleep but could not sleep because of the environment. There is also a kind of stomach pain (reason still unknown) that makes the baby's legs hard and creates gas in the baby's stomach (which might lead to farting). What you could do is let the baby sleep face down and see a doctor. Usually the baby naturally gets better after three months.

4. What to do if the baby does not eat?

There are many reasons why the baby does not feel like eating. First, see if the baby is sick. Second, consider the size of the baby's nipple on the baby's feeding bottle – if the sucking nipple is too big or too small, it might be the reason that causes baby not to eat as much as before. Third, check to see if you've changed your feeding habits and time.

Things parents should remember: when feeding the baby for the second meal (for cases where the baby had been fed earlier), do not force the baby to eat if the baby does not eat much, but feed him later when the baby gets hungry again. Do not, for the sake of worrying that the baby is hungry, give the baby glucoside water – it will actually affect the baby's appetite. Do not purchase medicine or drug from commercial pharmacies. Do not force feed.

5. Why does the baby sneeze?

There is usually white catarrh in the baby's nostrils. Sneezing is also normal as it is due to the air around the baby that the baby is not used to.

6. Why are there little white dots on the baby's nose or chin?

These white dots are called Milia, they are caused due to stuffing of sebaceous glands and they will naturally disappear.

7. What to do if the baby spills or vomits milk?

Reason for spilling or throwing up milk is due to the fact that the part connecting the baby's gullet and the stomach is not yet physically grown, and this is why the baby might spill or throw up milk. Normally, the baby does not

spill or throw up milk after 3 to 4 months.

If the baby vomits the milk fed, stop feeding. Try tapping the baby's back. Or, after feeding, let the baby stand or sit straight for 30 minutes as it sometimes helps the vomiting condition. If after vomiting the baby occurs to have a fever or seems to have difficulty digesting milk, see a doctor immediately. There is another symptom called pyloric stenosis, which might occur when the baby is a week to a month old. Babies with pyloric stenosis would puke out milk immediately after feeding and would lose weight.

8. How many times of excrement is good for the baby?

1. Feeding milk: excrement is lighter in color and is harder. Excrement times may be 2 to 3 times a day.
2. Feeding breast milk: excrement seems browner and is more waterish. Excrement times may be 5 to 6 times a day or more.

9. What if the umbilical cord does not naturally detach itself?

The umbilical cord usually detaches off in two weeks after birth. If it is not yet detached, follow your hospital's instruction of umbilical cord caring.

Note: watch for any significant rash around the baby's belly or secretion.

10. What to do with baby's jaundice / icterus?

Newborn babies usually have jaundice / icterus in two to three days after they were born, and the condition reaches its peak in four to five days. After a week, the jaundice / icterus begins to disappear because, as red blood cells continue to grow and die out and need the liver to metabolize while the baby does not yet have a completely grown liver, died out red blood cells cannot completely be removed as these cells transfer into jaundice / icterus, leading the skin to turn yellowish. After you take the baby home, remember to recheck the baby's skin by the window or in a room under white light bulbs (not under yellow light bulbs). Lightly press on the baby's nose and you can easily tell if the baby has jaundice / icterus. If the baby still has jaundice / icterus after seven to 10 days, return to the hospital immediately.

11. How to know if the baby is sick? And what to do if the baby is sick?

Measuring body temperature from the anal part:

Normal body temperature of newborn baby should be in the range of 36.6 to 37.7 °C.

How: shake the clinical thermometer to it is shown below 35°C, wipe the thermometer with baby oil or Vaseline. Lift the baby's legs and place the thermometer into the anal for about one inch, leave the thermometer in position for one to three minutes to measure the body temperature.

Measuring body temperature from the arm pit:

Normal body temperature of newborn baby should be in the range of 36.4 to 37.4 °C.

How: shake the clinical thermometer to it is shown below 35°C, place the thermometer under the baby's arm pit, and stabilize the baby's arm with clothing for 10 minutes.

Fever is a way to strengthen the body's immune system. What is more important is not the fever itself, but the side effects and/or other condition caused by fever. As long as the baby is still quite active, and still eats and sleeps well, perhaps enough rest will help self cure the fever. When the baby has fever, the parents could try not using fewer blankets when the baby sleeps, puts on less clothes, and bathe in warm water. If the condition of the baby with fever does not get better (or if there are other condition caused by fever), see a doctor immediately.

12. Why is there red secretion found from female babies?

After female babies are born, their bodies' hormones that came directly from the mother's body gradually disappear, and red secretion or small amount of blood, similar to periods of menses; a period; menstrual/monthly period, might be found in female babies' vaginas. This is normal.

13. Why do the babies head tilt one way?

This is what is called torticollis, and it usually appears one or two weeks after birth, and there is usually a thumb size lump or something hard on the side of the baby's neck which cannot tilt the other side. You could let the baby sleeps face down, and try letting the baby tilt his/her head the opposite way (where he/she might not like) to fix torticollis. If the condition does not get better, see a doctor immediately.

14. What to do with clubfoot or extroversion in the baby's ankle?

Clubfoot or extroversion in the baby's ankle means abnormal twist of the foot or the ankle. If discovered soon or the baby's condition of clubfoot or extroversion in ankle is not as serious, it could be fixed by messaging. If the condition does not get better after a period of time, see a doctor immediately.

15. How to examine baby's excrement?

Feeding babies with natural breast milk would cause thinner and more moisture excrement that are more golden in color and are less strong in terms of smell.

On the other hand, feeding babies with milk powder would cause less amount of excrement that is drier and lighter in terms of color. If the excrement of babies come in grayer color, come with blood stream, are too waterish or too sour in smell (like dead fish), please contact your doctors immediately.

16. What to do when the baby has constipation; astriction?

Every baby has different condition when it comes to excrement. If the excrement is very hard and the baby does not seem comfortable, that is considered constipation; astriction. If the baby's excrement happens in only two to three days and is soft, it is not considered constipation; astriction. constipation; astriction could be caused due to wrong percentage of mixture of milk powder, not enough water, or that the baby's digestion system runs a bit slow. If the above reason does not apply, see a doctor immediately.

17. What to do with when the baby diarrh(o)ea; enterorrhea?

When the condition of the baby's excrement changes, it is strongly advised that the baby see a doctor immediately.

15. Suggested Websites (Taiwan's websites) on Breast Feeding

Bureau of Health Promotion, Department of Health, R.O.C. (Taiwan)

<http://www.bhp.doh.gov.tw/BHP/index.jsp>

Breastfeeding Association of Taiwan

<http://www.breastfeeding.org.tw>