

Breastfeeding: Tips for success

Although breastfeeding is the natural way to feed your baby, it doesn't always come naturally. Breastfeeding is a learned skill for both mom and baby, requiring time and patience. Here are some tips for success.

Breastfeed often

Breastfeed your newborn on demand, meaning whenever he or she shows signs of hunger. This usually means breastfeeding every 2 to 3 hours throughout the day and night. As long as your baby is latching on to your breast correctly, frequent feedings will send a signal to your body to make a healthy supply of breast milk. During the first few days after your baby's birth, breastfeeding very often can also help to prevent some of the problems that newborns sometimes encounter such as jaundice and low blood sugar (hypoglycemia).

Recognize signs of hunger

Understanding your child's signs is important to help you know when and how often to feed your little one. Crying is often a late sign of hunger.

Signs that your baby is hungry:

- · Puts hands to mouth
- Opens mouth wide like a yawn with tongue down and forward over the bottom gum (rooting)
- Turns head towards mom's breast or bottle
- Puckers, smacks, or licks lips
- Has clenched hands

Signs that your baby is full:

- Closes mouth
- Turns head away from mom's breast or bottle
- Relaxes hands

Ensure a good latch

A proper latch — how a baby attaches to a mother's breast — is one of the keys to successful breastfeeding. A good latch helps your baby draw the milk out of your breast and sends a signal to your body to make a healthy supply of breast milk. A good latch also helps prevent painful problems with breastfeeding such as sore nipples, plugged milk ducts and breast engorgement.

When your baby has a good latch, you'll feel a gentle pulling sensation on your breast. Your baby's jaw should be moving in rhythmic motion, and suckling deeply with short pauses.

Look and listen carefully to tell when your baby is swallowing and/or see milk in your baby's mouth — usually after several sucks in a row. You'll hear a soft "k" sound and see a ripple under your baby's chin and lower jaw. If your baby swallows quietly, you might only notice a pause in his or her breathing.

You may experience uterine cramping, increased bleeding, thirst, breast ache, breast tingling or sleepiness when breastfeeding. Also, your breasts might feel firm or full before the feeding, and softer or emptier afterward. If breastfeeding hurts or is uncomfortable, ask a lactation consultant for help.



Wait to offer the bottle until breastfeeding is well established

Some women may need to supplement with formula temporarily. But unless it's necessary, don't give your baby formula between breastfeeding sessions. Milk supply responds to demand, meaning a mother will produce milk based on how often it is expressed. Additionally, babies suck differently on a bottle than they do on their mom's breast, and bottles flow differently than a breast, which can cause flow preference: a baby can start to prefer the faster, easier flow of a bottle.

You can minimize flow preference by using paced bottle-feeding techniques, which include:

- Holding your baby upright or tilted back only slightly.
- Selecting a medium or wide-base nipple with a slow flow.
- Holding the bottle horizontally, just filling the nipple with milk.
- Encouraging your baby to open wide while sucking on the bottle nipple.
- Slowing the pace of feeding to 15-30 minutes. If your baby drinks too fast, tip the bottle down or remove it to slow the pace of the feeding.
- Giving your baby periodic breaks while feeding; during these breaks, you can assess your baby for signs of fullness.

Delay the use of a pacifier

During the first few weeks after childbirth, when you're trying to get breastfeeding off to a good start, it's better to put your newborn to the breast and skip the pacifier. Even though many babies can go back and forth between the pacifier and the breast without any issues, some can tire from sucking on the pacifier and not nurse as well, which can interfere with the development of your milk supply.

Position your baby properly

There are several ways to position your little one for breastfeeding:

Cross-cradle hold: The cross-cradle position can allow you to have more control over how your baby latches on to your breast. Many moms find that they're able to get their babies latched on more deeply with this hold. This hold is similar to the cradle hold, but your arms are positioned differently. Instead of supporting your baby's head in the crook of your arm, use the hand of that arm to support your breast. Your opposite arm should come around the back of your baby. Support your baby's head, neck and shoulder by placing your hand at the base of your baby's head with your thumb and index finger at your baby's ear level. Like the cradle hold, your baby should be belly to belly with you.

Sitting and cradle hold: Sit with your baby supported by a pillow in your lap and cradle your baby's head in the crook of your arm with your baby's nose opposite your nipple. Use that same arm's hand to support your baby's bottom. Turn your baby so that your baby is belly to belly with you. Then,



raise your baby to your breast. You can support your breast with your other hand. At home, you may find an armchair helpful for this position, but make sure the chair offers sturdy back and arm support and is not too low or high.

Side-lying position: You may find that feeding your baby in a reclining position, rather than sitting, allows for relaxation. Breastfeeding while lying down helps particularly if you have had a cesarean delivery or otherwise feel tired or unwell in the days after childbirth. Your baby should be positioned opposite of your nipple. Use your lower arm to cradle your baby's back, or you can tuck a rolled-up receiving blanket behind your baby to help nestle your little one close to you while you use your arm to support your own head. You can support your breast with your other hand. Make sure that you return your baby to the crib or bassinet before falling asleep.

Clutch or "football" hold: This is also a good position for moms who have had a C-section, have large breasts or have small babies. Mothers with twins who want to feed the babies at the same time may also choose this position. To achieve the football hold, place a pillow next to you. Cradle your baby — facing upward — in your arm. Use the palm of your hand on that same arm to support your baby's neck, and nestle your baby's side closely against your side. Your baby's feet and legs should be tucked under your arm. Then lift your baby to your breast.



