

Helping Your Baby Take the Breast

QUESTION: How do I get off to the best start?

ANSWER: Did you know that babies are born with feeding reflexes that can help them get to the breast and latch on their own? In fact, when mothers and babies are kept skin to skin in the first hour or two after birth, most healthy babies demonstrate these instinctive behaviors by slowly pushing their way up to the breast, opening their mouths, dropping their tongues and latching on their own or with just a little guidance.

- Right after your baby is born, let her lie skin to skin on your chest until she breastfeeds for the first time.
- Keep your baby with you. Share a room with your newborn.
- Learn to identify your baby's early hunger cues as it is best to start breastfeeding with a calm, quiet and alert baby. Some early hunger cues include:
 - **rooting** (moving her head side to side with an open mouth when her cheek is touched);
 - **sticking her tongue out**
 - **sucking on her hands**
- If your baby is crying, don't force her to breastfeed. First, soothe your baby by holding, swaying, walking or rocking her then try again.

QUESTION: What positions should I use to breastfeed?

ANSWER: It may take some time to figure out the most comfortable, effective breastfeeding positions for you and your baby. What might work for one mom and baby may not work well for another. Do what feels good for both of you and whenever you can, breastfeed skin to skin.

- Some commonly used positions include laid-back, side-lying, football, cross-cradle and cradle.
- The key is to bring your baby in close to your body and turn your baby's chin, chest and knees in a straight line so they are facing your body.
- Place your baby at the level of your breast by using pillows for comfort and support.

- Your baby's head should be tilted back a little so she comes into the breast chin first. Her chin should never be touching her chest (this places her tongue and jaw in the wrong position for a good latch).
- If your baby needs neck support, make a c-shape with your hand by spreading your thumb and forefinger apart. Support your baby's neck/head in the web of your hand (between your thumb and forefinger) so that her head is tilted back a little as you guide her towards your breast.
- These positions are described below on ameda.com, but keep in mind you may find you need to change them a little to work for you and your baby.



Laid-Back Position



Side-Lying Position



Football Position



Cross-Cradle Position



Cradle Position

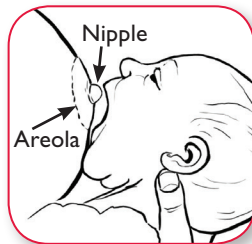


Some discomfort the first minute or two of breastfeeding as your baby latches on can be normal the first few weeks.

QUESTION: How do I help my baby to latch on deeply?

ANSWER: In laid-back positions, gravity helps the nipple reach the comfort zone. In other positions, you may need to work harder to help your baby latch deeply. As you guide your baby to a deep latch:

- Guide your baby’s body gently into you with her nose pointed up and her head tilted back a little (avoid pushing on the back of her head).
- Hand express a drop or two of colostrum or breast milk.
- Brush your nipple back and forth on your baby’s upper lip until your baby opens really wide, as wide as a yawn.
- Bring your baby towards you, chin first. You can gently press between your baby’s shoulders with the palm of your hand that is supporting her. Guiding her this way, the nipple points up, towards the softer part of the roof of your baby’s mouth—the comfort zone.



Breastfeeding tends to feel better when your baby latches on asymmetrically, so that more of the areola under the nipple is in her mouth than on top of the nipple. (The areola is the dark circular area that surrounds your nipple.)

References

Mohrbacher N. *Breastfeeding Answers Made Simple: A Guide for Helping Mothers*. Amarillo, TX: Hale Publishing, LP; 2010.
 Spangler A. *Breastfeeding: A Parent’s Guide*. 9th ed. Cincinnati, OH: Specialty Lithographing Co; 2010.

QUESTION: How do I know my baby is latched on well?

ANSWER: Here are a few signs that your baby is latched on well:

- You feel a tugging but no pain, rubbing or pinching while breastfeeding.
 - Some discomfort the first minute or two of breastfeeding as your baby latches on can be normal the first few weeks.
- Your baby’s lower lip is rolled out.
- Your baby has most of your areola in her mouth.
- Your baby’s chin is touching your breast and there is a small space between her nose and your breast.



QUESTION: I am still having trouble getting my baby to latch on well. Is there anything else I should be doing?

ANSWER: If your baby has trouble taking the breast, shaping the breast may help. Shaping the breast will help make it like the shape of a sandwich and a little easier for your baby to get a deep latch:

- Place your thumb and fingers in the same direction as baby’s lips. (Imagine your thumb or finger as your baby’s mustache.)
- Keep your fingers back, out of the way of where she will latch on. Place your lower finger down under your breast and your upper finger above your areola.
- Your fingers will make the shape of a C or U depending on your baby’s position.



If these tips don’t help and/or breastfeeding is uncomfortable or painful, seek breastfeeding help from a board-certified lactation consultant (IBCLC). The sooner you get help, the better.

This is general information and does not replace the advice of your healthcare provider. If you have a problem you cannot solve quickly, seek help right away.

Every baby is different, if in doubt, contact your physician or other healthcare provider.