Breastfeeding Your Baby

This information will help you through an actual breastfeeding session with your baby: how to prepare for the session, what positions you can use for breastfeeding, and how to be sure baby is latched on to your breast properly. Keep these pages handy until breastfeeding becomes second nature to you.

Getting ready to breastfeed
There are some things you can do before breastfeeding that will help make the feeding more relaxing for both you and your baby.

Preparing yourself for nursing
• Take care of your personal needs – go to the bathroom, wash your hands, etc.
• Think about creating your own “nursing nest” with supplies you wish to have close by – a beverage, snack, burp cloth, TV remote control, reading materials, phone, etc. If you have older children, you may want to include books, videos and toys for them in your nursing nest.
• Find a comfortable place to nurse – chair, rocking chair, sofa, bed.
• You may want to have pillows available to support your arms, back or baby.

Preparing your baby for nursing
• Watch your baby for feeding cues, such as looking around, rooting and bringing hands to his face. These are ways that your baby may show you they want to breastfeed. Babies feed best when they are awake and alert – not crying or frantic (very upset).
• Holding your baby skin to skin is one of the best ways to wake a sleepy baby or calm a fussy baby before feeding. Other ways to wake a sleepy baby might include talking to him, stroking him or changing his diaper.
Breastfeeding positions for mom and baby
Every time you breastfeed, keep in mind that what works for one feeding may not work for the next. Here are a few basic hints for all feeding positions:
• Be comfortable and relaxed.
• Baby should be held close to mom, tummy to tummy, or chest to breast and facing the breast. You both may enjoy being skin to skin.
• Baby’s mouth should be right in front of mom’s nipple; support the baby, or the breast, as needed.
• Bring baby to breast, not breast to baby.
• Avoid leaning over the baby; this could cause you neck and shoulder pain.

There are many possible positions for breastfeeding. Here are several examples. Be open to trying different positions so you can find the ones that work best for you.
Infant latch-on at the breast
It may be easier for the baby to latch on if you support your breasts during a feeding. You can do this with your hand in a C-hold (see diagram) or use a small rolled towel under your breast. It is important to keep your fingers away from the areola (dark area around the nipple).

Your baby has a natural response to open his mouth and grasp your nipple. This is called a “rooting” reflex. Gently “tickle” your baby’s lower lip to encourage baby to open his mouth. Be patient until he opens his mouth wide and his tongue is down, then gently pull baby in close to your breast. Your infant should take all of the nipple into his mouth and as much of the areola as he can comfortably manage.

Signs of a good latch-on include:
• The chin should be lightly touching the breast. Babies have little pug noses to help them to breathe when they are this close. If your baby’s nose seems to be blocked, carefully lift your breast slightly, try pulling the baby’s body in closer to you, or allow his head to tip back a bit more.
• Lips should be turned outward (like a fish). If your baby’s lips are curled inward, gently pull the lip out or remove the baby from the breast and relatch.
• Your baby may start out suckling with rapid movement of the jaw. A little wiggle may be seen by baby’s ear. This rapid sucking will slow down to a rhythmical pattern of sucking and swallowing after the first few days of life. You should hear swallows every one to two sucks as your milk amount increases.

When baby first latches on, you may feel some tenderness. If pain or discomfort continues past 15 to 20 seconds, remove the baby from the breast by placing your finger between his gums to release suction, and then relatch. You may need to relatch your baby several times before it feels right. Breastfeeding should be comfortable. Babies suckle differently at the breast than they suck on bottle nipples or pacifiers. Therefore, it is best to avoid bottle nipples and pacifiers until breastfeeding is well established (2 to 4 weeks of age).

Contact your breastfeeding resource person if pain continues, if you hear repeated “smacking” or “clicking” sounds while feeding, or if your nipples become sore.

The information presented is intended for general information and educational purposes. It is not intended to replace the advice of your health care provider. Contact your health care provider if you believe you have a health problem.