



Breastfeeding: Getting Started

Breastfeeding Basics

When it comes to feeding your baby, it's hard to beat the benefits of breast milk. Your milk contains the perfect balance of nutrients that make your baby a tiny infection fighter. The nutrients will help your baby fight common childhood diseases and recover more quickly from illnesses.

For most infants, feeding from the breast is a natural response. Others need a little help from Mom. Here we offer simple, straightforward advice to help you and your baby get started. If you find you need more advice and support, you always can seek the expertise of a lactation specialist. Your health care professional, or the nurses where you delivered your baby, can help you locate a specialist in your area.

Your First Milk

Once your baby is born, and for three to four days afterward, your breasts produce colostrum. It's thicker than typical breast milk, but packed with the nutrients your newborn needs. The flow of colostrum is slow, making it easier for your newborn to practice sucking, swallowing, and breathing at the same time.

By day five, your baby probably will have mastered the rhythm of feeding, and your milk supply will increase to match his increasing appetite.

Latching On Correctly

Your newborn may latch on as soon as you hold him to your breast. If not, don't be disappointed. To latch on correctly, your baby's mouth needs to be positioned over the pockets of milk located 1 to 1-1/2 inches behind the nipple. This way, he'll get the most milk and you'll be less likely to have sore nipples.

If your baby doesn't open his mouth wide enough, gently stroke his bottom lip with your nipple in a downward motion. Repeat this stroking until he opens his mouth wide. Then quickly pull him onto your breast so his nose, cheeks, and chin all are touching the breast. He then should begin to suck.

Recognizing His Hunger

Crying can be a telltale sign of hunger, but there are others. When your baby makes sucking movements or puts his fingers to his mouth—even if he's sleeping—he may be telling you he's ready to eat. It's best to feed him when he's fully awake. You can help wake him by playing with him, changing his diaper, or talking to him before he eats.

Breastfeeding Positions

There is no "best" position for breastfeeding — it's easiest when both you and your baby are comfortable. But some positions can work better than others. Here we explore the basics of: the cradle hold, lying down, the cross-cradle hold, and football hold.

Some experts suggest alternating positions. That way, your baby won't latch on and apply pressure at the same spot every time.



The Cradle Hold

Sit in a comfortable chair with support for your arms and back. Try not to hunch your shoulders. Support your breast with your hand in a cupped C-shape. Place your baby across your stomach, tummy to tummy.

Your baby's head should be in the bend of your elbow; and her mouth should be directly in front of your nipple. Use a pillow to support your arm.

If correctly positioned, your baby's body should form a straight line from her ear to her shoulder to her hip. Tuck her lower arm around your waist, out of the way.



Lying Down

This is a comfortable alternative position, especially at night or when sitting is uncomfortable.

Lie on your side, using one pillow to support your head and another along your back. Your head and neck should be comfortably propped up with pillows. Or lie on your side with one arm bent under your head and the other hand supporting your breast. Put a pillow or rolled-up blanket behind your baby's back. Lay your baby next to you on the bed so her mouth is opposite your nipple.

How Often to Feed

Your newborn probably will be hungry eight to 12 times in a 24-hour period. As he gets bigger, his stomach will grow. That means he'll eat more at each feeding, and he'll eat less often.

Newborns will eat for at least five to 10 minutes on each breast. Your baby will tell you when he's finished by coming off of the breast.

During the daytime, if three hours have passed since his last feeding, or if your breasts are full, you'll want to wake him to feed. Talking, rubbing, patting, unwrapping or undressing him will help. It may take five to 10 minutes to wake him completely, but it usually will result in a better feeding.

If he shows signs of hunger — even if he just ate an hour ago — it's OK to feed him again. Sometimes infants "cluster feed" before taking a nap. It doesn't mean your milk supply is low. Instead, this is normal breastfeeding behavior.

Changing Breasts

To keep a steady milk supply in each breast, it's important to switch breasts during feedings. Begin feeding on the breast that was not used last. After five or 10 minutes, try burping your baby, and then offer the second breast for as long as she wants. If he doesn't seem interested in the second breast, offer that breast first at his next feeding.

If one or both breasts become engorged between feedings, using a breast pump or hand-expressing will help to relieve them.

More Information

If you're looking for more information and resources about breastfeeding, visit the [American Academy of Pediatrics](http://www.AmericanAcademyofPediatrics.org), or check out [womenshealth.gov](http://www.womenshealth.gov).

Breastfeeding Positions (cont.)



The Cross-Cradle Hold

This position often is preferred by moms who are having trouble with latch-on, and by moms with small or premature babies. It lets you see the latch-on more clearly than the traditional cradle hold.

Hold your baby across your body in the arm opposite the breast from which she'll be feeding. Her position will be the same as in the cradle hold, but you'll use your other arm to hold her. Your baby should be level with your breast, with her body turned toward you. (Some mothers find they can tuck the baby's bottom into the crook of their arm.) When she opens her mouth wide, pull her onto the breast far enough that the tip of her nose, her cheeks, and her chin all are touching your breast.



The Football Hold

Like a running back cradles a football, you'll cradle your baby under your arm. This lets you see if she is latching on properly. This position often is preferred by moms who:

- Have large breasts
- Are concerned about latch-on
- Have a small or premature baby
- Are sore from a cesarean birth

Place pillows at your side to support your elbow and your baby's bottom. Tuck her into the side of your waist. Place her head in the palm of your hand. Support the base of her head between your thumb and forefinger. If she doesn't seem comfortable, place a soft blanket between your hand and her head for padding.