

# Breastfeeding

# Breastfeeding is best for you and your baby

You and your baby will learn the best way to breastfeed together, but our tips should help.



## Effective attachment

Baby's mouth opens wide to latch onto the breast, covering the areola. It may take a bit of practice, but don't hesitate to ask your midwife or a breastfeeding expert for advice. No two babies are the same. So, whether this is your first child or you've breastfed before, preparation and support will always help you achieve your breastfeeding goals.

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## Learn to recognise the stages of a feed

- Baby starts with short, rapid sucks. This gets your milk flowing, beginning with the foremilk, which quenches baby's thirst.
- Baby then performs slow, long and rhythmic sucking and swallowing with pauses.
- The end of the feed – known as the hindmilk – contains the most fat and is essential for baby's growth and development.

## Learn the indicators of effective breastfeeding

- An active, alert, generally happy baby with good tone and skin colour, who is generally settled between feeds.
- Good weight gain is the best indicator. Consider having your baby weighed once a week until 8 weeks old and then around once a month until 6 months of age.

## Find the most comfortable position for breastfeeding

- **Cradle hold:** Hold baby across your lap horizontally or at a slight angle, cradling his or her neck and shoulders with the crook of your arm. Extend your forearm and hand to support baby's neck, spine and bottom. This works best for babies after about 1 month old when they're stronger and it's easier to guide them to the breast.
- **Cross-over or cross-cradle hold:** Use your other arm to support your baby's neck and shoulders. For instance, if you're nursing from your left breast, use your right hand to hold your baby. This works well for small babies who have trouble latching on.
- **Lying on your side in bed:** Supported by pillows behind you, under your head and shoulders, and sometimes between your bent knees. Draw baby close and cradle his or her neck and shoulders. Keep your back and hip in a line – don't bend towards your baby. Baby shouldn't strain to reach your breast. Try this if you are recovering from a caesarean or a difficult delivery, or nursing in bed at night.
- **The clutch or rugby ball hold:** Hold baby under your arm, facing you with her mouth and her feet pointing towards your back. Support the shoulders, neck and head and guide baby to your nipple, chin first. This position works well after a caesarean or if you have large breasts, flat nipples, or twins (put a cushion under your twins and gently support them with your hand on their upper backs).
- **Koala hold:** Straddle baby across one of your legs and support her or him while breastfeeding.
- **Laid-back breastfeeding:** You are semi-reclining and baby is lying on his or her tummy across your stomach while breastfeeding.

Usually minor adjustments to position is all that's needed to breastfeed effectively. Many mums find breastfeeding a little uncomfortable and your nipples may be a bit sore during the first few days as you and your baby get used to effective attachment and milk transfer. See a breastfeeding expert, midwife or health visitor if breastfeeding is painful or the discomfort does not resolve.

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