

Basics of Lactation



Why is lactation and chest-feeding important?

The American Academy of Pediatrics recommends chest-feeding exclusively for the first 6 months of life to benefit both parent and baby.

What are the benefits for the baby?

- Human milk has antibodies created just for your baby's needs. The antibodies can help protect them from common illnesses like stomach bug and ear infections. It can also help with chronic illnesses like asthma, diabetes, obesity, stomach bugs, and ear infections.

What are the benefits of chest feeding for the parent?

- Chest-feeding can lower the chances of breast and ovarian cancer, diabetes, and high blood pressure
- It is convenient you can do it anytime and anywhere
- Less equipment and supplies are needed. With less waste it is better for the environment.

How do I know if my baby is hungry? (Hunger Cues)

- Baby wakes up
- Soft sounds (cooing)
- Mouthing (licking lips, sticking out tongue)



- Rooting (turning head and opening their mouth towards chest or bottle)

- Hand-to-mouth activity (Placing a hand in or around their mouth)



- Crying (begins as a soft cry and slowly gets louder and stronger)

*Important to note: Your baby does not have to cry to let you know they are hungry. Crying is often the last hunger cue that you see. Look for hunger cues earlier to avoid you or your baby getting frustrated.

How do I know if my baby is **not** feeding well?

- Baby easily falls asleep during feeds
- Inconsistent sucking (too much and too little time during sucks while they feed) or weak sucking
- Trouble with latching and staying latched to the nipple
- Hearing clicking or popping sounds from your baby during the feeding
- Baby still seems hungry after feeding (hunger cues after feeds)
- Inconsistent nursing pattern (baby does not wake up every 3 hours to feed)
- Nipple pain during feeds
- Swollen breast or chest feeling full

How do I know if my baby is feeding well?



- A strong, regular sucking pattern without many breaks in between
- Seeing milk in the baby's mouth
- Hearing the baby swallow every third suck
- Nipple is round as the baby comes off of the breast
- Strong, deep sucking with no nipple pain
- Baby easily latches and stays latched
- Breasts look and feel softer after feeding

- Your baby is waking up to feed at least every three hours or nurses at least 8 times in 24 hours

How do I make sure that chest-feeding is successful for me and my baby?

Proper positioning and latch (attaching the baby to your chest) are ways to help make the chest-feeding experience for you and the baby a positive one



- Feed in a position that is comfortable. Feed in a chair with good back support. Using a footstool and pillows can help support your feet and arms.
- Proper positioning includes having the baby's tummy touching your tummy so that their mouth can easily reach your nipple without turning their head.
- Touch nipple to baby's nose and allow them to latch deeply. Baby's chin should be touching the chest tissue. Most of the areola should be in baby's mouth.
- You should feel a deep pulling sensation and no pinching.

What are some common ways to hold and position my baby for chest feeding?

Football holds (clutch hold)

- c-hold with baby facing you, baby's mouth at nipple height, baby's hips flexed with baby's feet tucked in under your arm.



Cross cradle hold

- preferred for early days of breastfeeding, hand behind baby's ear and roll baby to face you belly to belly.



Side-lying

- lying on a flat comfortable surface and roll baby towards you belly to belly.



Cradle hold

- most common position, best to use once baby can latch easily.



- What do I do if the latch is uncomfortable?
- To remove the baby from the chest, put a finger between the baby's mouth and nipple to break the suction. Try latching again or you can try pulling the baby's body closer to you by supporting their back and butt.

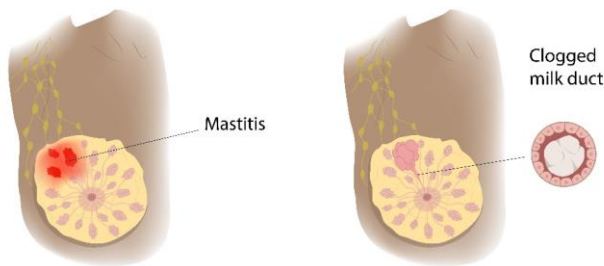
What are some issues that can happen with Chest-feeding and pumping?

Plugged Ducts:

- Plugged pore (bleb) – you will see a small white dot on the top of the nipple, this happens when the milk duct has become plugged.
- A small lump may form in your breast. It is usually the size of a pea. This happens when a milk duct has not emptied completely.

Mastitis:

- This can occur while chest feeding if your nipples are cracked or have blisters. This also happens during times of stress.
- Symptoms may include: Sudden high fever, pain or lump in the breast, flu-like symptoms, skin hot to touch, skin changes color (often red), extreme tiredness, an area of the breast that feels hard.



If you have any of these signs or symptoms, please call your doctor.

How do I maintain my milk supply when pumping is my only option?



- start pumping as soon as the baby is born
- Pump 8 or more times per day. At least every 3 hours, for at least 15 minutes per session or until the milk stops flowing.
- Use a medical grade pump and at the end of the session massage the breast with your hand to remove any remaining milk.
- Adjust settings on the breast pump to match how it feels when your baby feeds.

How do I Stimulate my Letdown Reflex?

- Letdown is when milk sprays from the breast as the milk is pushed out by hormonal release or when milk is flowing easily
- Stress can prevent milk letdown

Tips to help with letdown:



- Hold your baby skin to skin
- Look at pictures of your baby
- Listen to the sounds your baby makes, or relaxation nature sounds
- Eat or drink while pumping
- Be in a comfortable position while pumping
- Smell your baby or their clothes

Works Cited:

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