

Warning Signs of Breastfeeding Problems

Natural as the breastfeeding process is, problems can occasionally arise. When they do surface, they may grow worse very quickly and interfere with your milk production or your baby's ability to get the nutrition she needs. For this reason, it's vital to get help right away if you experience difficulty with breastfeeding at home or observe any of the symptoms listed below. Contact your baby's pediatrician, and don't stop asking for one-on-one guidance until you get the help you need.



- Your baby's nursing sessions are either very short or extremely long. Breastfeeding
 sessions that are consistently briefer than about ten minutes during the first few months
 may mean that your baby isn't getting enough milk and that not enough milk is being removed to stimulate your
 ongoing milk production. Sessions that last consistently longer than about fifty minutes may mean that your
 baby isn't receiving enough milk due to ineffective suckling or low milk production.
- Your baby still seems hungry after most feedings. She may not be ingesting enough milk. Consult your pediatrician and have her weighed right away. Meanwhile, double-check her latch-on and position at the breast to try to increase the milk she is getting.
- Your newborn frequently misses nursing sessions or sleeps through the night. Frequent feedings around the clock are a necessary part of breastfeeding a new baby. Your baby requires a feeding every few hours to gain sufficient weight to thrive. If your newborn sleeps longer than four hours a night, wake her up and encourage her to nurse. You don't hear frequent swallowing when your baby nurses after your milk supply has come in. Your baby will probably swallow occasionally as she begins to nurse, more frequently as she continues a session, and less frequently again near the end. Swallowing is an excellent sign that she is actually ingesting milk, and its absence should prompt you to call her pediatrician at once. (Remember, though, that you may not be able to hear your baby swallowing when she is taking small sips of colostrum in the early days.)
- By two weeks of age, your baby is under her birth weight or hasn't started gaining at least 5 to 7 ounces per week since your milk came in. Inadequate weight gain is one of the strongest indicators that a baby is not getting enough milk.
- After seven days, your baby has fewer than six wet diapers and four stools per day, her urine is dark
 yellow or specked with red, or her stools are still dark rather than yellow and loose. If you or your
 pediatrician is concerned about your child's milk intake, you might want to keep a written record of your baby's
 wet diapers and bowel movements during the early days to be sure she is progressing properly. Most hospitals
 and lactation specialists can provide you with a special diary to use in recording your newborn's feedings and
 diaper changes.
- After five days, your milk hasn't come in or your breasts don't feel as though they're filling with milk. If
 you feel this way, have your baby weighed by her pediatrician immediately. This is the most precise way to tell
 whether she is ingesting enough milk. You may also want to have your breasts examined.
- You experience severe breast engorgement. Hard, painful breasts may prevent your baby from latching on correctly and discourage both of you from nursing. You may need to express milk manually or with an electric breast pump until your breasts have softened somewhat. Severe, unrelieved engorgement can decrease your milk supply.
- The fullness and hardness of your breasts don't decrease by the end of a feeding. Your baby may not be drinking enough milk or may be suckling ineffectively.
- Severe pain interferes with breastfeeding. Your baby is probably not latching on correctly. If you have severe nipple pain or significant cracking of the nipples that makes it too painful to nurse, consult your physician or lactation specialist. She can check for a nipple or breast infection such as mastitis and help you with any problems with latching on. You may need to start breastfeeding on the less sore side or even use an electric breast pump until your nipples have healed. Your lactation specialist or La Leche volunteer can show you how to do this.
- After a week or two, you don't notice the sensations associated with your milk let-down reflex. Though this
 may not indicate a problem at all, it could mean that your milk production is low. Ask your baby's pediatrician to
 'aluate her and observe your breastfeeding technique. Your local La Leche League volunteer or lactation
 ecialist can help assess the situation, too.

Source New Mother's Guide to Breastfeeding, 2nd Edition (Copyright © 2011 American Academy of Pediatrics)

The information contained on this Web site should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.