

is not enough for the infant's lips to close on the nipple, it must be inserted deeper into its mouth, so that the front part of the nipple is in contact with the palate and the upper surface of the tongue. Only this stimulus will release the jaw, tongue and cheek action of intense sucking. To achieve this juxtaposition, the region of breast immediately behind the nipple must be pliable and yielding. It is the length of 'hold' that the baby can manage on this yielding tissue which is critical. It is essential that suckling should be fully operative within four or five days of birth, if the breast-feeding process is to be successfully developed. If repeated failure occurs during the first week, the infant will never give the full response. It will have become fixated on the more rewarding (bottle) alternative offered.

Another suckling difficulty is the so-called 'fighting at the breast' response of certain infants. This often gives the mother the impression that the baby does not want to suck, but in reality it means that, despite desperate attempts to do so, it is failing because it is being suffocated. A slightly maladjusted posture of the baby's head at the breast will block the nose and, with the mouth full, there is no way for it to breathe. It is fighting, not to avoid sucking, but for air. There are, of course, many such problems that face the new mother, but I have selected these two because they seem to add supporting evidence for the idea of the female breast as predominantly a sexual signalling device, rather than an expanded milk machine. It is the solid, rounded shape that causes both these problems. One has only to look at the design of the teats on babies' bottles to see the kind of shape that works best. It is much longer and does not swell out into the great rounded hemisphere that causes so much difficulty for the baby's mouth and nose. It is much closer in design to the feeding apparatus of the female chimpanzee. She develops slightly swollen breasts, but even in full lactation she is flat-chested when compared with the average female of our own species. Her nipples, on the other hand, are much more elongated and protrusive and the infant has little or no difficulty in initiating the sucking activity. Because our females