

Breastfeeding is important for the health of mothers and babies. Breastfeeding is a learned skill and may take time and patience. It is important to get help while learning.

## The early days

- Newborns are very alert in the first few hours. Skin-to-skin contact after birth helps with breastfeeding. Your baby may find the breast and self-attach for their first feed. Your midwife will offer you guidance if needed. Keep baby skin-to-skin until after their first feed.
- Continue to keep baby close to you, with lots of cuddles and skin-to-skin contact over the first few days and weeks. This helps get breastfeeding off to a good start. Keeping your baby close day and night will help you understand their hunger and tired signs.
- Colostrum (first milk) is a concentrated milk which is important for your baby's immune system. Babies only need small amounts of colostrum in the early days. Look for signs that your baby is ready to feed, such as opening their mouth and turning their head or bringing their hand to their mouth.
- Babies are more alert and show clear hunger signs within a couple of days. They will breastfeed eight to twelve or more times in a 24-hour period. Breastfeeding often, offering the breast whenever baby seems hungry, will get breastfeeding off to a good start.
- Ask your Midwife to sit and talk you through a feed.
- Correct positioning and attachment will prevent problems.
- You will start to make more milk three to five days after birth. Breasts will become firm and may be lumpy for a few days. Expressing small amounts of milk softens the areola and helps with attachment. If your breasts are uncomfortable, use cold compresses, gentle massage, and pain relief according to the directions on the pack.
- If your baby is not with you or you are not able to directly breastfeed, ask for help with learning how to express. This will help your supply and provide milk for your baby.

## Positioning and attaching your baby to the breast

- Get comfortable, support your back.
- Unwrap your baby for closer contact.
- Turn your baby towards you and hold your baby with your forearm – Tummy to Mummy.
- Support your baby's neck and shoulders (rather than their head) with your hand.
- Your baby's chin needs to be touching the areola and their nose in line with your nipple.
- Wait for your baby to open their mouth wide. Stroking your baby's lips with your nipple or expressing a little milk into their mouth may encourage them to open wide.
- Direct your nipple to the roof of your baby's mouth. Be sure your baby takes in plenty of breast tissue and not just the nipple.
- Watch your baby feed. Babies start the feed with rapid sucking and once the milk starts to flow (the 'let down') the sucking pattern changes to a slower suck/swallow pattern with pauses.
- Most babies will finish feeding when ready; there is no need to time feeds.
- Offer both breasts at each feed, but you may find at some feeds baby may only want one breast. Alternate the breast you start with at each feed.

- Your nipple should look rounded (although maybe a little larger/longer) when baby comes off the breast. Distorted nipples indicate your baby needs to be attached more deeply.
- Nipple tenderness can be normal in the first few days. Ongoing nipple pain, cracks and bleeding are not normal - ask for help.

### The early weeks

- Breast milk is digested quickly, and babies need frequent feeds. Feeding will take less time as your baby gets older and more efficient at the breast.
- Many babies sleep more during the day in the first few months. They catch up on their breastfeeds in the late afternoon or evening. Most babies will have at least one or two breastfeeds overnight. Catch up on your sleep during the day – sleep when baby sleeps.
- Mature milk can look a 'watery' whitish- blue colour at the start of the feed. This milk satisfies your baby's thirst. It is creamier towards the end of a feed to satisfy your baby's hunger. Your full, firm breasts settle after two to four weeks.
- Your breastmilk contains all the nutrients your baby needs for optimum growth and development. It also contains other important ingredients which are vital to your baby's development and protect baby from infections.
- Most women make plenty of milk for their baby if they feed when their baby is hungry and do not restrict feeds. Trying to make a baby feed to a schedule by using a dummy or giving formula instead of a breastfeed can lead to engorged breasts, mastitis, or a drop in milk supply. There is also a risk of the baby developing allergies or other health issues.
- Women who exclusively breastfeed their baby generally get more sleep overnight than women who supplement their babies with formula.

### Signs that your baby is breastfeeding well

- Baby feeds 8-12 or more times in 24 hours.
- Baby is generally content, settles after most feeds and has a good colour and skin tone.
- After the first few days, baby has six to eight pale, wet, cloth nappies or five to six heavy, wet disposable nappies every 24 hours and regular soft mustard yellow bowel motions.
- Evidence of weight gain.
- If you have any concerns about your breastfeeding, it is important to talk to a health professional or an Australian Breastfeeding Association Counsellor on **1800 686 268**.

#### **Resources**

- Your Midwife, Child and Family Health Nurse, or Lactation Consultant
- Australian Breastfeeding Association [www.breastfeeding.asn.au](http://www.breastfeeding.asn.au) Helpline: 1800 686 268.
- Raising Children Network [www.Raisingchildren.net.au](http://www.Raisingchildren.net.au)
- Global Health Media Videos [www.globalhealthmedia.org](http://www.globalhealthmedia.org)
- Australian Infant Feeding Guidelines (2012) [www.eatforhealth.gov.au](http://www.eatforhealth.gov.au)
- If you need an interpreter, call Translating and Interpreting Service (TIS) on 131 450

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