

Breastfeeding Your Baby: The First Few Weeks



Breastfeeding is the natural way to provide all the nutrition your baby needs. Kaiser Permanente recommends the American Academy of Pediatrics' guidelines to feed your baby only breast milk for the first 6 months of life. Breastfeeding works on a supply and demand basis: The more your baby nurses, the more milk you will produce. It may take some time for your body to get into a rhythm, so be patient and keep trying. Breastfeeding is a learned skill. It takes practice!

Getting a good start!

Breastfeeding should begin within the first hour of your baby's life. Nurse whenever your baby wants to eat (or at least every 1½ to 3 hours). This is called feeding on-demand. Put your baby to your breast at the first sign of willingness to nurse (i.e., stirring about in the bassinet, rooting, or making sucking motions).

Allow your baby to nurse for as long as he or she wants. If your baby is still hungry after finishing the first breast, offer the second breast. Some newborn babies may nurse for about 10 to 15 minutes on each breast. Others may nurse for 15 to 20 minutes on only one side per feeding. You should wake your baby up to eat if more than 3 hours have passed since the last feeding. Feedings should be timed from the beginning of one to the beginning of the next.

Unless your baby's doctor tells you to, don't offer any supplements such as water or formula.

How do I help my baby latch onto my breast?

Find a comfortable chair to sit in. Place pillows behind your back and on your sides to support your body and another pillow on your lap to support your baby.

- Cradle your baby with one arm and hold your breast with the hand of the other arm.
- Support your breast by placing your thumb lightly above the areola (dark area around the nipple) and your fingers under the breast.

- Make sure that your baby's head is at the level of your breast and that his or her lips are lined up with your nipple. Your baby's face, chest, and knees should be turned toward you so that the two of you are tummy to tummy.
- Tickle the baby's lower lip with your nipple and wait for the baby to make a wide "O" with his or her mouth before putting the baby to your breast.
- Quickly bring your baby towards you, centering your nipple in the baby's mouth.
- Make sure your baby is taking the nipple and a good portion of the areola in his or her mouth.
- Make sure your baby's lower lip is sticking out and that the chin is touching your breast. Your baby's nose should barely touch your breast.

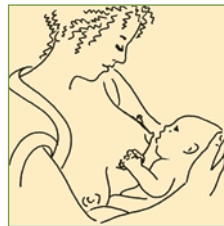
What can I do to prevent and relieve engorgement (swollen breasts)?

Your breasts may become engorged (swell) during the first few days of breastfeeding, or when you cut back on nursing. Regular, frequent breastfeeding is the best way to prevent and relieve engorgement.

WAYS TO HOLD YOUR BABY FOR BREASTFEEDING



CRADLE HOLD



CROSS-CRADLE HOLD



CLUTCH OR FOOTBALL HOLD



LYING DOWN WHILE FEEDING

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Here are some other tips:

- Take a warm shower or apply moist heat to the breast before nursing.
- Express milk before nursing to help with latch-on.
- Apply a cool compress to the breast after nursing.
- Take a pain reliever such as Acetaminophen (*Tylenol*) or ibuprofen (*Advil, Motrin*). Avoid aspirin.

How can I prevent sore or cracked nipples?

Proper positioning will help you prevent soreness and cracking.

- Vary your nursing position from time to time to relieve the pressure on your nipples. Try sitting up, lying down, and switching between different ways of holding your baby while breastfeeding.
- When you are done nursing, break the suction by putting your finger in the corner of the baby's mouth between the gums.
- After nursing and bathing, allow your nipples to air dry.
- Wash your breasts with water only; avoid lotions and creams.
- Apply breast milk to sore areas.

If sore nipples, engorgement, or poor latch-on persist, talk with your practitioner or a lactation consultant.

How do I know if my baby is getting enough to eat?

Breastfed babies normally nurse **more** frequently in the first couple of months. Because of this, many new mothers worry about whether their

babies are getting enough milk. Make sure to feed your baby whenever you see signs of hunger. Your baby is getting enough to eat if, by the third day of life, your baby:

- Has 3 or more wet diapers every 24 hours. (Highly absorbent disposable diapers can make it hard to tell if your baby has urinated.)
- Has 3 to 4 loose, yellow stools every 24 hours, not meconium (sticky, dark green stools).
- Has stools that have changed from dark green to yellow.
- Has brief active periods.
- Makes swallowing sounds after every 1 to 3 sucking movements.

You should feel some breast fullness and may notice drippings from the opposite breast while nursing. Breastfed babies should be seen by a medical professional between 2 to 4 days of age to check for signs of successful breastfeeding.

Are there foods or medications that I should avoid?

In general, there aren't any foods you should not eat while nursing. It's important not to diet while nursing because you're eating for both you and your baby. The best rule is to eat and drink enough to satisfy your hunger and thirst. While you're nursing, avoid drinking alcohol and using tobacco and drugs because they pass into your milk and they can harm your baby. Since too much caffeine can cause poor sleeping and fussiness, try to limit your caffeine intake to 1 to 2 cups a day while breastfeeding.

Most medications are safe to take while breastfeeding, but there are a few that can be harmful to your baby. Acetaminophen (*Tylenol*) and ibuprofen (*Advil, Motrin*) are safe to take while nursing, but aspirin should be avoided. You should let your practitioner and your baby's pediatrician know that you are breastfeeding. Let your pharmacist and your practitioner know about all medications, including non-prescription drugs and herbal products that you take. Also, take medication just after you nurse rather than just before nursing.

Additional resources

- American Academy of Pediatrics: aap.org
- The American College of Obstetricians & Gynecologists: acog.org
- La Leche League International: lalecheleague.org
- *The Nursing Mother's Companion* by Kathleen Huggins (Harvard Common Press, revised 2005).
- *Breastfeeding Pure & Simple* by Gwen Gotsch (La Leche League International, revised 2000).
- Connect to our Web site at kp.org to access health and drug encyclopedias, interactive programs, health classes, and more.
- Check your *Kaiser Permanente Healthwise Handbook*.
- Contact your Kaiser Permanente Health Education Center or Department for health information, programs, and other resources.

This information is not intended to diagnose or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor. If you have questions or need more information about your medication, please speak to your pharmacist. Kaiser Permanente does not endorse any brand name: any similar products may be used.