

## Breastfeeding: the first few days

In the first few days, you and your baby will be getting to know each other. It may take time for both of you to get the hang of breastfeeding.

This happens faster for some women than others. But nearly all women produce enough milk for their baby.

## Skin-to-skin contact

- Having skin-to-skin contact with your baby straight after giving birth will help to keep them warm and calm and steady their breathing.
- Skin-to-skin means holding your baby naked or dressed only in a nappy against your skin, usually under your top or under a blanket.
- Skin-to-skin time can be a bonding experience for you and your baby. It's also a great time to have your first breastfeed. If you need any help, your midwife will support you with positioning and attachment.
- Skin-to-skin contact is good at any time. It will help to comfort you and your baby over the first few days and weeks as you get to know each other. It also helps your baby attach to your breast using their natural crawling and latching-on reflexes.
- You'll still be able to bond with and breastfeed your baby if skin-to-skin contact is delayed for some reason, for example if your baby needs to spend some time in special care.
- If necessary, your midwife will show you how to express your breast milk until your baby is ready to breastfeed. They can also help you have skin-to-skin contact with your baby as soon as it's possible.

## Colostrum: your first milk

The fluid your breasts produce in the first few days after birth is called colostrum. It's thick and usually a golden yellow color. It's a very concentrated food, so your baby will only need a small amount, about a teaspoonful, at each feed.

Your baby may want to feed quite often, perhaps every hour to begin with. They'll begin to have fewer but longer feeds once your breasts start to produce more "mature" milk after a few days.

The more you breastfeed, the more your baby's sucking will stimulate your supply and the more milk you'll make.

## How to breastfeed

Breastfeeding is a skill that you and your baby learn together, and it can take time to get used to.

There are lots of different positions you can use to breastfeed. You can try different ones to find out what works best for you. You just need to check the following points:

- Are you comfortable? It's worth getting comfortable before a feed. Use pillows or cushions if necessary. Your shoulders and arms should be relaxed.
- Are your baby's head and body in a straight line? It's hard for your baby to swallow if their head and neck are twisted.
- Are you holding your baby close to you, facing your breast? Supporting their neck, shoulders and back should allow them to tilt their head back and swallow easily.
- Always bring your baby to the breast and let them latch themselves. Avoid leaning your breast forward into your baby's mouth, as this can lead to poor attachment.
- Your baby needs to get a big mouthful of breasts. Placing your baby with their nose level with your nipple will encourage them to open their mouth wide and attach to the breast well.
- Try not to hold the back of your baby's head, so that they can tip their head back. This way your nipple goes past the hard roof of their mouth and ends up at the back of their mouth against the soft palate.

## How to latch your baby on to your breast

Follow these steps to help your baby latch:

- Hold your baby close to you with their nose level with the nipple.
- Let your baby's head tip back a little so that their top lip can brush against your nipple. This should help your baby to make a wide, open mouth.
- When your baby's mouth is open wide enough their chin should be able to touch your breast first, with their head tipped back so that their tongue can reach as much of your breast as possible.
- With your baby's chin firmly touching your breast and their nose clear, their mouth should be wide open. When they attach you should see much more of the darker nipple skin above your baby's top lip than below their bottom lip. Your baby's cheeks will look full and rounded as they feed.

## How often should I feed my baby?

In the first week, your baby may want to feed very often. It could be every hour in the first few days.

Feed your baby as often as they want and for as long as they want. They'll begin to have fewer but longer feeds after a few days.

As a very rough guide, your baby should feed at least 8 to 12 times, or more, every 24 hours during the first few weeks.

It's fine to feed your baby whenever they are hungry, when your breasts feel full or if you just want to have a cuddle.

It's not possible to overfeed a breastfed baby.

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When your baby is hungry, they may:

- get restless
- suck their fist or fingers
- make murmuring sounds
- turn their head and open their mouth (rooting)
- It's best to try and feed your baby during these early feeding cues as a crying baby is difficult to feed.

## Your let-down reflex

Your baby's sucking causes muscles in your breasts to squeeze milk towards your nipples. This is called the let-down reflex.

Some women get a tingling feeling, which can be quite strong. Others feel nothing at all.

You'll see your baby respond when your milk lets down. Their quick sucks will change to deep rhythmic swallows as the milk begins to flow. Babies often pause after the initial quick sucks while they wait for more milk to be delivered.

Occasionally this let-down reflex can be so strong that your baby coughs and splutters. Your midwife, health visitor or breastfeeding supporter can help with this.

If your baby seems to be falling asleep before the deep swallowing stage of feeds, they may not be properly attached to the breast. Ask your midwife, health visitor or breastfeeding supporter to check your baby's positioning and attachment.

Sometimes you'll notice your milk letting down in response to your baby crying or when you have a warm bath or shower. This is normal.

## How to tell if your baby is getting enough milk

There are several ways you can tell if your baby is getting enough milk.

- Your baby starts feeding with a few rapid sucks followed by longer sucks.
- Their cheeks stay rounded out, not sucked in, and you can hear them swallowing.
- Your baby seems calm during the feeding and comes off your breasts themselves when they've had enough.
- They appear content and satisfied after most feeds.
- They should be healthy and gaining weight (although it's normal for babies to lose a little weight in the first week after birth). Talk to your midwife or health visitor if you're concerned your baby is not gaining weight and is unsettled during or after breast feeds.
- After the first few days, your baby should have at least 6 wet nappies a day.
- After about 5 to 6 days, your baby's poop should stop looking black and thick and they should also have at least 2 soft or runny yellow poos.

## Building up your milk supply

Around 2 to 4 days after birth you may notice that your breasts become fuller. This is often referred to as your milk "coming in".

Your milk will vary according to your baby's needs. Each time your baby feeds, your body knows to make more milk for the next feed. The amount of milk you make will increase or decrease depending on how often your baby feeds.

Feed your baby as often as they want and for as long as they want. This is called responsive feeding. In other words, responding to your baby's needs. It's also known as on-demand or baby-led feeding.

In the beginning, it can feel like you're doing nothing but feeding. But gradually you and your baby will get into a pattern and the amount of milk you produce will settle down.

It's important to breastfeed at night because this is when you produce more hormones (prolactin) to build up your milk supply.

In the early weeks, before you and your baby become comfortable with breastfeeding, "topping up" with formula milk or giving your baby a dummy can lower your milk supply.

Speak to a midwife or health visitor if you are worried about breastfeeding or think your baby is not getting enough milk.

They might suggest giving your baby some expressed breast milk along with breastfeeding.

## Breastfeeding premature and ill babies

- If your baby is in a neonatal or special care unit after the birth, you'll probably be encouraged to try something called kangaroo care once your baby is well enough.
- Kangaroo care means holding your baby close to you, usually under your clothes with your baby dressed only in a nappy.
- This skin-to-skin contact helps you bond with your premature baby and increase your milk supply.