

Latching

Baby Led

- Sit back at a 45 degree angle with your back supported by pillows
- Place your baby skin to skin vertically on your chest, with his head just above breast level
- When your baby starts to bob towards one breast, gently lower him so that his face is facing the breast with his nose opposite the nipple. Support the baby's back at the top of the spine, not on the back of the head. You can support/stabilize your breast with your hand
- Allow your baby to reach for the nipple and latch on
- When your baby is latched, his chin will be up off his chest with his head tilted back

Cradle Hold

- Start with your baby skin to skin with his head just above your breast level
- When your baby cues, hold him in the same arm as the breast he will feed on, i.e. Left arm for left breast
- Your baby's head will be on your forearm, not in the crook of your elbow. Keep your elbow tucked close to your body
- Lower your baby so that he is below your breast with his nose level with the nipple
- Support your breast with your other hand
- Tickle the baby's upper lip from side to side with your nipple
- When he opens really wide, draw his body in close to you quickly. You will do this through his shoulder blades so that his head stays tilted back
- Your baby should approach the breast with his chin first, head tilted back and his nose will not be touching
- **TIP - Keep your elbow tucked close against your body and your wrist rolled away from your body (palm up)**

Cross Cradle Hold

- Hold your baby with the opposite arm to the breast he will latch on (i.e. left arm for right breast)
- Hold your baby with the space between your thumb and forefinger close up against the nape of his head and your other 4 fingers on his cheek. Try not to have any of your fingers on his shoulder or you will limit his range of motion
- Hold your baby close to your body and line up his nose to your nipple.
- Run your nipple gently from side to side across his upper lip
- When your baby opens his mouth really wide, tilt his head back so that the nipple is pointing to the roof of his mouth and then quickly draw his body in close with your forearm. **TIP- Do not bend your wrist, all pressure is through your inner forearm and your elbow stays close to your body**
- Your baby's chin should touch the breast first and his top lip will just skim the nipple. You should be able to see more areola above the top lip and your baby's nose should not touch the breast.

Side Lying

- Lie on your side on your bed. If your breast is too flat on the bed you can place a rolled up washcloth underneath to give some lift
- Lie your baby facing your breast, nose to nipple
- When your baby opens his mouth wide and tips his head back, use your hand to draw your baby towards the breast through his shoulder blades so that his chin touches the breast first
- Once baby is latched you should be looking at your baby's eyes not the top of his head
- You can use a rolled up receiving blanket against your baby's back to keep him in close and have a hand free to do compressions **TIP- Place the rolled up blanket below the baby's neck at the top of the spine so that the head can still fall back**

Things to avoid when latching

- *Pushing on the back of the baby's head.* The natural instinct of a baby (and of adults too) is to push back against anything pushing on their heads. When latching, this will be counterproductive as the baby will be pushing away from the nipple instead of trying to move towards it
- *Bringing the breast to the baby.* It can be tempting to move our bodies so that we are placing the breast in the baby's mouth. However this doesn't allow for a deep latch. Also, when you later try to move to a more comfortable position, the breast moves thereby changing the latch or resulting in the nipple slipping out of the baby's mouth
- *Not holding the baby close to your body.* Especially in positions where you are sitting up straight, the baby needs to feel securely held, close to your body. If there is a large gap your baby will likely fill that gap by drawing up her legs and can then push away from you
- *Aiming the nipple into the middle of the baby's mouth (bullseye).* If the nipple is in the middle of the baby's mouth then it will also be at the baby's hard palate which can be painful. Also, this position does not allow the baby to effectively remove milk from the breast
- *Letting baby's feet push against a hard surface.* A baby's natural instinct is to push back against a hard surface which can not only distract them from relaxing and nursing but if they are latched when they push off it can cause considerable pain for the mother

For links to visuals on latching including videos and diagrams, please go to the Resources section of my website