

Getting off to a good start

1. Be skin to skin with your baby for as many hours of the day as you can manage. Why? Not only does skin to skin stabilize your baby's heart rate, blood oxygenation, blood sugar and body temperature and help with brain development but it will also help to establish breastfeeding. When your baby is skin to skin with you he will wake more readily for feeds, you will be able to see his early feeding cues (licking his lips, bobbing his head) and get him to the breast quickly while he is still calm and patient. Crying is a late cue and it is hard for a frantic, upset baby to latch on.
2. Get the best latch possible (see latching handout). Baby should approach the breast with his head tilted back, chin first and your nipple should just skim his upper gums and be far back in his mouth. It should NOT hurt! If there is pain, something is not right. If a deeper latch is still painful, consult an IBCLC for advice quickly.
3. Now watch your baby to see if he is sucking or drinking. When he is sucking and not getting milk his chin moves up and down quickly with no pausing of the chin. When the baby's chin drops lower and hangs there for a second this is his mouth filling with milk. The longer the chin remains down, the more milk the baby got for that mouthful. (Try sucking water up through a straw yourself and watch how your chin drops). When we know this we can then help the baby to feed more efficiently at the breast.
4. If you see that the baby is just sucking rather than drinking, this is the time to take action. The first thing to try is to add breast compressions. Squeeze your breast when baby starts sucking and hold until he takes a break. Keep your hand far back from the nipple so as not to change the shape of the latch. You can move your hand around the breast so as to drain all the ducts.
5. Once compressions are no longer helping to turn the sucks into drinks then it's time to delatch your baby and switch to the other breast.

How to know if baby is getting enough milk

1. **Wet Diapers.** In the early days, your baby typically has one wet diaper for each day of life (1 on day one, 2 on day two...). Once your milk comes in, expect 5-6+ wet diapers every 24 hours. To feel what a sufficiently wet diaper is like, pour 3 tablespoons (45 mL) of water into a clean diaper.

2. **Dirty diapers.** In the early days, your baby will typically has one dirty diaper for each day of life (1 on day one, 2 on day two...). After day 4, stools should be yellow and baby should have at least 3-4 stools daily that are the size of a quarter (2.5 cm) or larger. Some babies stool every time they nurse, or even more often, this is normal too. The normal stool of a breastfed baby is loose (soft to runny) and may be seedy or curdy.
3. **Weight gain/loss.** Normal newborns may lose a percentage of their birth weight in the first few days.(If you had a lot of IV fluids during the birth the weight loss can be increased). The average breastfed baby gains 6 oz/week (170 g/week).



How much does you baby need?