

SORE NIPPLE BASICS

For most, the key to nursing comfort is a deeper latch

A minute or two of discomfort is common during the first two weeks of nursing. Strong pain or skin damage does not mean you are nursing too often. Most likely, it means it is time to adjust baby's latch.

Shallow versus deep latch:

With a shallow latch, your nipple presses against a hard area in baby's mouth. With a deep latch, your nipple extends further back into the pressure-free "comfort zone." Find this in your own mouth where the roof turns from hard to soft.



One easy way to get a deep latch

Lean back. Place baby on your body, tummy-to-tummy, with baby's head near your nipple. Support baby's full weight with your body and baby's head with your arm. Then let baby do the latching. This way, baby can adjust the latch as needed. When nursing feels better, you're there. If nipple pain does not improve, seek help. You may need more help with latch. Or the pain may have other causes.



No one over-the-counter treatment for sore nipples is better than another

Some find nipple creams and other products soothing. But they don't treat the problem's cause. For a no-cost treatment, after nursing express a little milk on your nipples. Let it dry.



Over time, nipple pain often goes away

But calluses never form on your nipples, therefore nipples don't toughen with nursing.

What changes? As babies mature, they gain more head control. At about six weeks, even when you nurse upright, most babies can latch deeper without much help. But why wait? A deeper latch now means greater comfort sooner.



In some cases, medical treatment is needed to relieve nipple pain

A nipple infection is one example. To heal a painful nipple infection, see your provider for a prescription. When tongue-tie greatly restricts baby's tongue movements, a simple procedure may provide relief.

