Breastfeeding Mom's Survival Guide for the first few Weeks

Breastfeed every 1 -3 hours

It sounds like a lot, but your baby needs your milk and your breasts need the stimulation to bring an abundant milk supply. Newborns need to be fed around the clock so they get 8-12 feedings each 24 hour period.

Wake your baby up well before feedings

A drowsy baby will not feed for long. Undress to change diaper, rub baby's tummy and back, talk to baby and rock back and forth if necessary until baby's eyes open. A good strategy is to put the baby naked (except for a diaper) on your chest skin to skin for 1/4 hour prior to feeds.

Keep your baby sucking through the feeding

If baby drifts off to sleep, try to keep the baby awake. Massage, blowing on to baby's face, and talking to baby will help keep going. Look for about 10-15 minutes of vigorous sucking on each breast.

• If your breasts get full, have your baby empty them for you by frequent feeding
If that is not enough, you may use a breast pump prior to feedings to get the milk flowing
and shape the nipple, then feed the baby. After feedings, if you are still over-filled, use the
breast pump again. Ice is also a good way to slow down breast milk production at this time.

Look for wet diaper until day 6

Continue with 6 wet diapers and 2-3 stools daily. More is fine, but if you are not getting these minimums, talk to your paediatrician for evaluation of your situation and advice.

When do I get to sleep?

Sleep when your baby sleeps. Newborns tend to feed a lot at night and sleep more during the day. Around the clock feeds are grueling and you can maximize your sleep by napping when your baby does. Accustom yourself to these quick "cat-naps" to help you feel refreshed. You can also encourage the baby to spend more time awake during the day by feeding and playing with him

Do as little as possible at night

Feed your baby when he /she tells you he / she is hungry. Don't turn on any bright lights don't change the diaper (unless it is soaking wet or baby has a diaper rash). If your baby "really wakes" up you will be ready to go back to sleep and he/she will be ready to play.

Find your groove

It will take several weeks for you and your baby to get into a pattern of feedings and nap times. Go with the flow and allow your baby to show you what his natural rhythms are. He will develop a pattern that works for him. Schedules don't tend to work until the baby is a bit older and bigger. You can encourage a more predictable pattern, later.

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Signs of Good Feeding

A good latch-on is the key to a good feeding. Regardless of the position you hold your baby, the latch-on remains the same.

Signs of a good latch-on

- Both upper and lower lips are flanged (rolled out)
- All or most of your areola is in the baby's mouth (at least 1" from the base of the nipple). More from the bottom of the areola than the top (asymmetrical latch-on).
- You are comfortable through the feeding. There may be some "latch-on" pain that subsides quickly.
- There is movement in the baby's temples with sucking and the jaw moves up and down an inch or more.
- There is slight movement of your breast near the baby's lips.

Signs of a good feeding

- Hearing swallowing at least every third suck once the milk comes-in. Seeing milk in the baby's mouth
- Consistent sucking with only brief pauses
- The breasts are softer after feedings
- Appropriate output for age. (approx 6 wet nappies and several stools each day)
- Feeling strong, deep, pulling or sucking, no sharp pain of biting.
- Leaking from the other breast or feeling of a "let-down" reflex or noticing a change in the baby's sucking rhythm from faster to slower
- 10 15 minutes vigorous sucking on each breast or 20 30 minutes on one side for a newborn. 5-10 minutes for an older baby
- Your baby nurses 8 -12 times per day (24 hour day). Less than 8 or more than 12 is a concern
- Your baby latches-on easily with minimal attempts and stays latched-on.
- Minimal weight loss during the first few days (<10% of birth weight) and return to birth weight by 2 weeks

For any concern please contact your paediatrician

