

# Nutrition Guide

## Breastfeeding tips & techniques: latching on

**Learning to breastfeed takes time and practice for both you and your baby.**

### *Positioning baby*

Have your baby's face and body face you, with your baby's head at the level of your breast. If you can draw a straight line from your baby's shoulder to hip, you have your baby in the correct position. Make sure both you and your baby are as comfortable as possible, using pillows or an arm chair to support the weight of your baby.



### *Positioning the breast*

Gently lift and support your breast by placing your fingers below the breast and your thumb on top of the breast, well away from the areola (the dark area around your nipple). Think of cupping your breast with your hand in a "C" or "U" shape. Make sure that the fingers on the underside of your breast aren't touching the areola.

### *Offering the breast*

Gently stroke your baby's lower lip or cheek with your nipple in a downward motion or with your finger until your baby's mouth opens wide. If your baby's mouth does not open wide enough, repeat this stroking until it does. Then quickly pull your baby onto your breast, so that your baby's nose, cheeks, and chin are all slightly touching your breast. If your baby's nostrils are blocked, pull your baby's bottom upward and closer to you, so your baby's head will move back slightly.

Your baby needs to latch on to more than just the nipple. Your baby needs to take in at least 2.5 cm (1") of the areola, with the mouth positioned over the pockets of milk located 2.5 - 4 cm (1" - 1½") behind the nipple. This way, your baby will get the most milk and you will have less likelihood of developing sore nipples.

When your baby first nurses, you will feel a tugging sensation. You should listen for the sound of your baby swallowing. If you hear a clicking sound (your baby's tongue against the roof of his or her mouth) this may mean that your baby isn't latched on well. Other signs of a poor latch-on are nipple pain or pinching.

*The information provided in this fact sheet is intended to be used as a guide only. Please consult your doctor or dietitian for personalised advice.*



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## *Alternating breasts*

Alternate the side you start breastfeeding with, because your baby sucks more efficiently on the first breast used. If your baby does not nurse at the second breast or completely drain the second breast, begin nursing on that breast at the next feeding.

## *Removing baby from the breast*

If it is necessary to reposition your baby during a feeding or get a better latch, gently slip one of your fingers into the corner of your baby's mouth to first break the suction. This helps to prevent damage to the nipple and areola. Don't get discouraged, initially it may take several tries to get the latch-on correct. Two other ways to break the suction include gently pulling down on your baby's chin or pressing on the part of the breast closest to your baby's mouth.

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