

Common Concerns About Breastfeeding

Breastfeeding is healthy and natural. So are the questions and concerns that you may have about it.

Whether you just decided to breastfeed or you have always planned to do it, you may have questions. Even mothers who have breastfed their other children may now have a baby who feeds differently.

Your friends or family may give you *advice* about breastfeeding. We think giving you correct *information* is also very helpful as you make the best feeding choices for your and your baby.

This chapter talks about the most common breastfeeding concerns and questions.

Remember that we are here to help. If you have any concerns about breastfeeding, no matter how small, call Lactation Services at 206.598.4628. A lactation consultant can talk with you over the phone or meet with you in person.



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I am not sure my baby is getting any milk.

When your baby is breastfeeding, listen closely for the sound of swallowing. At first when your breasts are making small amounts of early milk, called “colostrum,” you may hear your baby swallow occasionally. In a few days, your breasts will make a lot more milk and you will hear your baby swallow more loudly and very often.

I don't know if my baby is getting enough milk.

One way to tell if your baby is getting enough milk is to count wet and dirty diapers:

“Breastfeeding is a rewarding experience. Fun, easy, and FREE! It is also the best food your baby can get.”

“I wish someone had told me it can take work. Even though it felt natural, it took work to get a routine down and for both of us to learn how to breastfeed correctly.”

Wet Diapers

Look for at least:

- 1 wet diaper on the 1st day of life
- 2 on the 2nd day of life
- 3 on the 3rd day of life

Once your baby is 5 days old, your milk volume will increase and you will probably see at least 5 to 6 wet diapers each 24 hours.

Dirty Diapers

During the first few days after birth, your baby will most likely have **at least** 1 or 2 bowel movements every day. These will start out dark and sticky and then turn brownish-green and soft. Once your baby is 5 days old, you will probably see at least 4 yellow bowel movements each 23 hours.

When you breastfeed, your baby’s bowel movements will probably look mustard yellow after the first few days. Some babies start to have fewer bowel movements after the first month of life.

Be sure to take your baby to those first follow-up visits for weight checks. **Your baby’s weight is the key factor** that tells us that she is getting enough to eat.

Your baby may be having a hard time getting enough to eat, or may not be gaining weight as quickly as expected. If this happens, your pediatrician and lactation consultant can work you with and make sure your baby is getting enough milk.

My baby is still fussy or crying, even after being breastfed.

Babies are often fussy. Sometimes they need burping or just comforting. But, in the first days, some babies need to breastfeed very often. They often do some “cluster feedings,” where they are awake for a couple hours and nursing a lot during that time. Often, after cluster feeding, your baby will sleep.

Mothers have a better milk supply and less engorgement when their babies nurse 8 or more times in 24 hours. Their babies gain weight better and have less jaundice than babies who eat less often.

Almost all babies start crying more when they are about 2 weeks old. Crying keeps increasing until about 6 to 8 weeks of age and

“Just when I was starting to wonder if my baby was getting enough to eat, my milk came in. Then she often slept a little longer after she fed and I could tell she was really getting my milk.”

“... it's love that is the most important thing I could give my baby.”

then begins to lessen. Most babies, whether breastfed or bottle-fed, spend 2 or more hours a day in a fussy or crying state. This is normal and does not usually mean anything is wrong.

Call your baby's doctor if you think your baby is crying too much.

I don't know how long each feeding should take.

Babies let you know that they are finished with a feeding by slowing down their sucking and swallowing. Your baby's body will become relaxed.

It is best not to interrupt the feeding from the first breast just to get to the other breast during each feeding. When your baby is done feeding from the first breast, she may let go of your nipple and fall asleep. Or, if she wants the other side, she will open her mouth as if searching for the nipple. You can give her a moment to burp if needed. If she is still showing feeding cues, then offer the other side.

A feeding usually lasts about 20 to 45 minutes. Some feedings are shorter and some are longer than this. In the first days, it is normal for your baby to get small amounts of your colostrum. Staying on your breast for long periods can help her feel satisfied. It also gives your breast the message to increase milk production.

If your baby is latched deeply on your breast, long feeding sessions do not lead to sore nipples. Prevent nipple soreness with careful latching, *not* with limiting feeding time.

When should I switch to the other side?

Let your baby decide when it's time to switch breasts. If your baby is satisfied, it is fine to breastfeed from just one breast at some feedings. Just start the next feeding on the other breast.

The milk your baby gets after several minutes of feeding from one breast is called *hind milk*. Hind milk is higher in fat than the milk at the start of the feeding. This makes for a well-balanced meal.

How often should my baby breastfeed?

In the first days after birth, some babies seem to be awake and eating most of the time, but others would sleep right through the feedings they need. In the first week or so, breastfeed at least every 3 hours during the day when you are awake – or more often if your baby shows feeding cues.

“The main thing that surprised me was the frequency that new babies need to be fed. I thought that every 3 hours day and night was unbelievable, but I was totally shocked when he demanded MORE feedings for quite some time...”

“Don’t let anyone discourage you from doing what’s best for your baby. There are plenty of other mothers out there that can offer support if you need it.”

If your baby is still asleep 3 hours from the *start* of the last feeding:

- Undress her and change her diaper.
- If she still doesn’t wake up, let her sleep for 15 to 25 minutes more, but watch for feeding cues (mouth movements, bringing hands to mouth, rooting). It will be easier to feed her when you see these signs than if you try to wake her from a deep sleep.

A good guideline to keep in mind is *at least 8* feedings in a 24-hour period. As your baby gets older, it will be easier to tell when she needs to eat. Then you can depend on her and not the clock to let you know when it is time to feed.

I can’t tell if my baby is latched onto my breast well.

To make sure your baby is latched on well:

- It is best to position your baby at your breast without a blanket. Remove her blanket and clothing from the waist up.
- Hold her close to you, “tummy to tummy,” with her whole body turned toward you. When her body is facing you, she can swallow easily and she doesn’t have to turn her head to nurse.
- Let her head tilt back a little. Place your nipple across from her nose. Express a little drop of colostrum or milk to help her pay attention.
- Wait for her mouth to open very wide with her tongue forward. Bring her quickly onto your breast only when you see her mouth wide.
- These are signs of a good latch:
 - Lips are curled out around your *areola* (dark skin around the nipple).
 - More than just the nipple tip in her mouth, chin, and nose are touching your breast.

If sucking is still painful after a slow count to 10, use your finger to break the suction and start over. Some babies have to learn to suck the right way. The more times they practice it right, the better they learn.

“The most helpful thing was hands-on help from the nurse.”

“I had to return to full-time work at 12 weeks. Having that special connection to my little one, that only I could provide for her, helped me deal with taking her to day care.”

Letting your baby suck in a way that is painful for you is not good for you or your baby. Ask for help if you are having a hard time getting a good latch.

My baby won't stay latched on.

Some babies have to learn how to suck well. Here's how you can help:

- In the first day or two, you may need to help your baby re-latch a few times until it seems to work.
- Sometimes a baby will seem to be on the breast correctly, but will come off easily. If this happens, it may be that she didn't get enough of your breast in her mouth to begin with.
- For step-by-step instructions, read the chapter “Position and Latch for Breastfeeding.”

After a few days, most babies have figured it out. When that happens, you will not have to pay such careful attention to latching.

My baby wants to stay latched on all day.

It is normal and healthy to have your baby in your arms and at your breast much of the time at first. This helps your baby feed often, keeps your baby warm and safe, and helps your milk come in.

By about the 4th day, you will be making more milk and your baby will likely have some longer sleep times between feedings.

Can I give my baby a pacifier?

It is best **not** to give your baby a pacifier in the early days, since this can lead to breastfeeding problems. If your baby wants to suck, put her to the breast. This helps bring in your milk and encourages correct sucking at the breast. After you have been breastfeeding for a few weeks and your baby is latching to your breast easily and gaining weight, you may find that giving your baby a pacifier from time to time does not cause problems with feeding.

My nipples hurt.

It is normal to have some tenderness as you begin to breastfeed. You may feel some pain in the first seconds after your baby latches. Then, as your baby gets into the rhythm of sucking, you will feel strong pulling, but it should not be painful.

“We had several nights of trying to work out the proper latch. She would get frustrated and then wouldn’t try. My advice is to stick with it.”

“I had a friend visit me a month after I had the baby, when I thought nursing was getting better. And she told me that it seems crazy but it is going to get even easier in a couple of months, and she was totally right.”

When your milk increases after a few days, your nipple tenderness will likely lessen. But, call the lactation consultant if:

- Your pain does not seem like normal discomfort
- Your pain does not go away when your milk increases
- You see skin damage

If you have breast pain and a fever, call your doctor or midwife. See the chapter “Sore Nipples.”

My breasts hurt.

Breasts often become engorged around the 2nd, 3rd, or 4th day after birth. This is a sign that your milk volume is increasing. See the chapter “Comfort Measures for Breast Engorgement,” pages 77 to 78 in this book.

After the normal engorgement time, call the lactation consultant if you:

- Have pain in one breast
- Feel a lump that does not soften after breastfeeding a few times

We will help find out what might be going on.

What if my baby is born preterm?

Full-term babies are born with extra fat and fluid that are meant to last until their mother’s milk supply increases, by about the 3rd day. Preterm babies are born before they have a chance to store this extra fat and fluid.

Preterm babies can also be too sleepy to feed well, or they may not yet have developed strong sucking. For those reasons, some preterm babies need extra milk or formula until their mother’s milk has increased.

We can help you express or pump to help stimulate your breasts and increase your milk supply.

I have trouble breastfeeding in public.

In the first weeks, many women do not feel comfortable breastfeeding in public. You may be working on the latch, or helping your baby learn. You may need to open up your shirt to see that your baby is in the right position.

As you and your baby get better at breastfeeding, you will most likely find that you are thinking less about how you do it. Your baby will find your breast with only a little help. Breastfeeding in public may feel more comfortable then.

To make it easier to breastfeed in public, wear tops that open wide or lift from the waist. You can also buy tops that are designed for nursing. These are available at maternity stores and online. You can also buy nursing bras that you can open with one hand.

You may be more at ease breastfeeding in public if you cover yourself with a pretty blanket, shawl, or large scarf. Or, you can use a “nursing cover,” a light blanket with a strap that hangs around your neck. A nursing cover lets you easily see your baby and gives you some privacy.

Some women just decide that private breastfeeding works best for them. If this is true for you, find private places to nurse when you are away from home. Many stores have nursing rooms or women’s lounges where you can nurse in privacy and comfort.

I’m tired. Can we feed our baby a bottle?

Studies show that giving a bottle too early (even with your expressed milk) can cause problems in breastfeeding. This is because:

- Milk production falls.
- Many babies do not nurse as well after being given a bottle.
- Many women stop breastfeeding before they planned to.

For these reasons, avoid bottles for the first 4 to 6 weeks. After that time, if you want to give your baby a bottle:

- Try to express or pump milk at about the time your baby would be eating. This will help you keep up your milk supply.
- Talk with the lactation consultant. We can help you meet your breastfeeding goals.
- Read the chapter “Pumping and Storing Breast Milk” in this book.

Questions?

Your questions are important. Call Lactation Services if you have questions or concerns:
206.598.4628

Lactation Consultants are available weekdays from 9 a.m. to 9 p.m. and on weekends and holidays from 9 a.m. to 1 p.m.

