

LET'S TALK ABOUT *breastfeeding*

Both breast milk and formula can provide the nutrition your baby needs for healthy growth and development. That said, breast milk is easier to digest, cheaper, promotes deeper bonding, and is associated with much lower levels of infant illness and chronic conditions (including SIDS, diabetes, and allergies). Breast milk is a living substance that actually changes according to your baby's specific needs. There's nothing else like it.

Breastfeeding Step by Step

Breastfeeding is natural, but learning how to do it is like learning most things in life: it often starts off feeling awkward and new, and it takes some time, instruction, and encouragement to get the hang of it.

- 1 Position your breast with your nipple at baby's mouth (your hand away from the areola as you hold your breast).
- 2 Wait for baby's mouth to open wide, like a yawn.
- 3 Bring baby to your breast, nipple aimed at the roof of his mouth.
- 4 Make sure the entire nipple and most of the areola (particularly at baby's lower lip) is in his mouth. His nose will touch your breast.
- 5 Make sure your nipple is centered over baby's tongue.
- 6 Insert your finger at the inside of baby's cheek and hook the nipple to pull your breast out and break the latch.

Natural, Living Nourishment

Your breast milk actually changes over time, based on what your baby needs. What's in it? Water, fats, carbs, proteins, vitamins, minerals, and antibodies that protect them from disease. It's everything your little one needs, in the right amounts to thrive.

Good for Baby and You

Breastfeeding releases oxytocin, a hormone that causes the uterus to contract and known for love and bonding. It has also been connected to positive emotional and physical health outcomes for parents, from lower risk of hemorrhage to smoother postpartum hormonal shifts.

A Learning Experience

Just because it's natural doesn't mean it's easy. Breastfeeding is learned in body and mind. Don't feel ashamed to ask for help and also that no one will know yours and your baby's cues and comforts better than you as you develop your relationship.

What to Do When You Can't

Whether because of challenges or preferences, when breastfeeding isn't an option there are many other ways to nourish your baby. Research, and talk to your care provider or doula about pumping, SNS infant feeding, donor breast milk, and formula.



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BREASTFEEDING POSITIONS

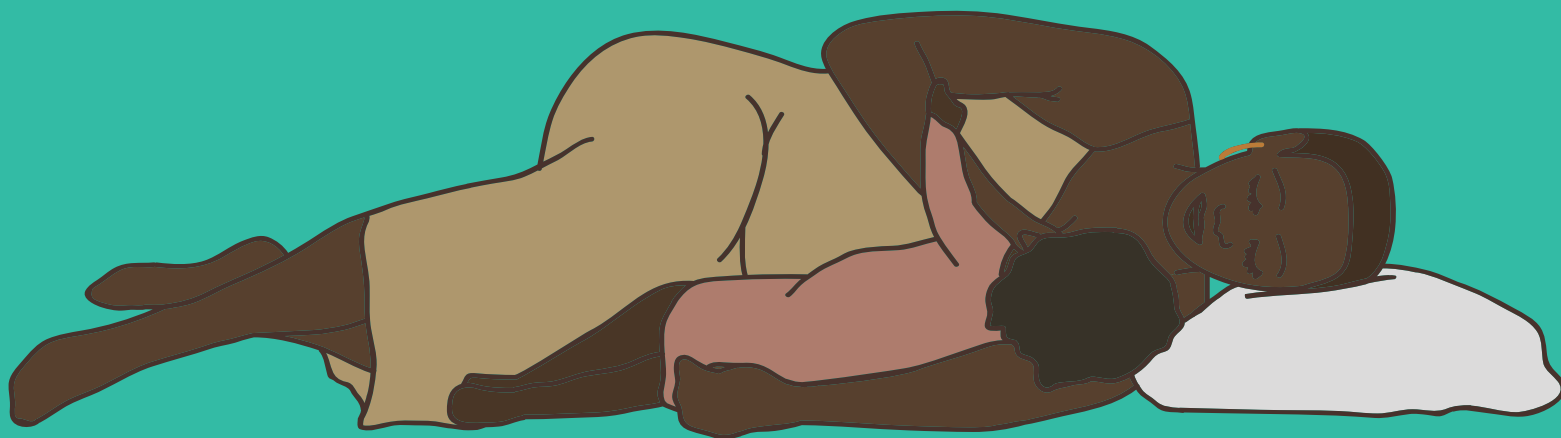
Football hold

Support baby's head in your hand and her back along your arm. She's facing you, her mouth at nipple level, her feet tucked under your arm. Use pillows to help bring her to the right height.



Side-lying hold

You and baby face each other on your sides. Use pillows to support both you and your baby as needed. Cradle baby with his back along your forearm. Keep his body positioned in one line from hip to shoulder to ear.



Cradle hold

Hold baby across your lap with his head on your forearm, his back along your inner arm and palm, and lying on his side. Use pillows as needed to bring him to nipple level and keep his head and bottom level.



Cross-cradle hold

With baby across your lap, place your hand behind her head, her neck resting between your thumb and index finger, palm of your hand between her shoulders. Use pillows as needed to raise her to nipple level and to support your elbows so your arms don't tire.



WHAT'S IN A BREAST?

what's going on behind the scenes

MILK GLANDS
(ALVEOLI)

DUCTULE

DUCT

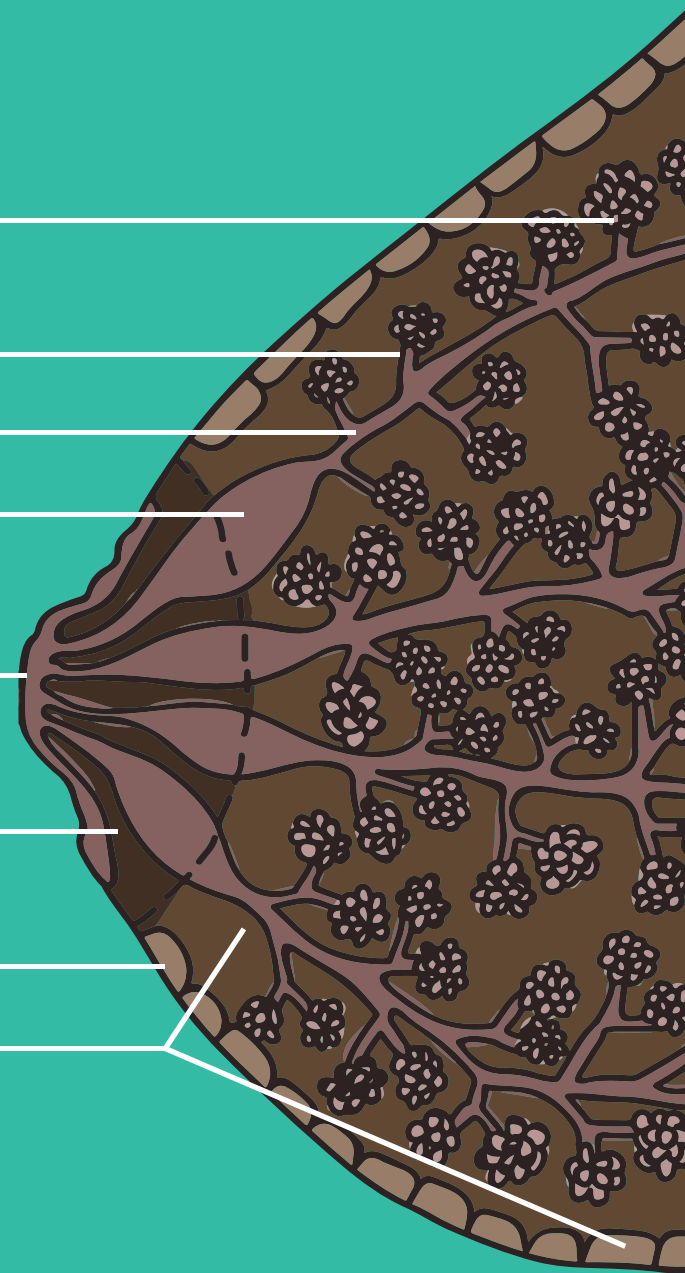
MILK SINUS

NIPPLE

AREOLA

FATTY TISSUE

LOBE



COMMON CONCERNS

Was that a contraction?

Nipple stimulation from breastfeeding releases oxytocin, a hormone that causes uterus contractions. This is felt mostly the first few weeks after birth. It's uncomfortable, but a part of healing.

How do I clean my breasts well?

You do not need to clean your breasts or nipples before or after feeding your baby. Rinse your breasts with clean water when you bathe or shower, and avoid soaps, which can damage your skin.

Are my breasts too small or big?

The size of your breasts doesn't reflect milk-gland content, just creates a different experience. Large breasts tend to leak less. Small breasts may be easier for baby to latch on when engorged.

Ow! My breasts feel too full!

Engorgement tends to begin 3-5 days postpartum. Mature milk fills your breasts and, yes, it feels uncomfortable. Nurse often to reduce engorgement and regulate your milk supply. If it causes baby to have a hard time latching, try expressing a little first.

My nipples are sore/bleeding/chapped!

It's likely baby hasn't latched properly; be sure to check that. Seek help if you need it! Also consider your nursing positions, how you break baby's suction, and using breast shells. Treat your nipples by applying your own breast milk, or a warm compress. If you want to try something else, La Leche League Intl. suggests only products safe for human consumption and free of allergens.

Help! My breasts are leaking/clogged!

Leaking happens when your milk supply is abundant! Nurse your baby frequently to prevent this or use absorbent pads to catch it. Plugged ducts happen when leftover milk forms a block in your breast. Frequent nursing and shifting nursing positions help here.

Information in this infographic comes from: *Pregnancy, Childbirth and the Newborn: The Complete Guide* by Penny Simkin, P.T., Janet Whalley, R.N., B.S.N., and Ann Keppler, R.N., M.N.; *The Everything Breastfeeding Book* by Suzanne Fredregill and Ray Fredregill; *How do I position my baby to breastfeed?* La Leche League International (<http://www.llli.org/>); *Nipple Pain: Causes, Treatments, and Remedies* La Leche League International (<http://www.llli.org/>)