



Before we start I'd like to say it's important to think about how your birth and personal well-being will play into your breastfeeding experience. Don't be hard on yourself, take it a moment at a time and a day at a time. If you've had a traumatic birth or experienced something negative then always seek support as these can impact breastfeeding. If you've had a C-section you may experience some discomfort and remember you are healing from surgery. If you have experienced something traumatic before birth, seek help from someone experienced with breastfeeding and trauma. You can also look at breastfeeding aversion articles. I have no affiliation with the links used. They simply provide some useful illustrations and demonstrations.

Here are two useful videos I share with clients:

<https://youtu.be/kKPrPmc1zXo>

<https://youtu.be/y--syZR0u1E>

1. Position

Think about position. There are many guides for positioning, it's important to find what is comfortable for you and for your baby. If you hold baby across your lap, in a cradle or cross cradle hold, try to make sure you are tummy to tummy, his ear, shoulder and hip should be aligned and his head supported. It is better to bring baby to you than to be hunched over to baby. Hold your baby close. His nose should be clear so that he can breathe and his chin tucked into or touching the lower part of your breast. Other positions include rugby hold and laying down. Some mothers and babies prefer these other positions. Laying down can be useful if a mother has a fast let down.

Here is a short video to demonstrate some variations in breastfeeding positions:

<https://youtu.be/kKPrPmc1zXo>

<https://youtu.be/ZJan8xCNgY4>

2. Latch

A baby who has latched properly will be able to feed effectively. He will be able to draw the milk from the breast and it should not be painful for the mother. To achieve a deep latch, aim to have your nipple pointing towards baby's nose. You can stroke his nose with the nipple to encourage him to open WIDELY. Once your baby opens nice and wide, bring him into your breast and allow him to suck. Your baby's suckling will change from being a faster pace to a slower rhythmic one.

Here is a useful video for latching:

<https://youtu.be/h39NK2O4iRc>

3. Time, support and motivation

A newborn will nurse frequently in the first few days of life. Sometimes a baby can be sleepy and this means shorter feeds. Sometimes if a baby is sleepy it might mean that they are feeding frequently because they become hungry sooner. You can work this out with your care provider but the main thing to know is that breastfeeding takes time. It is important for adults to not have adult expectations from a new born. Your baby isn't supposed to sleep through. Your baby has a tiny tummy, your breast milk is not only the right type of food nutritionally, but it will be sufficient providing you give your baby plenty of opportunities to nurse. In the first few days feeding helps to establish a supply. This means feeding during the day and the night.

Consider asking for help, be direct with your partner about asking for help so you can have plenty of time with baby. You can ask visitors or friends to help with chores, cooking or whatever else you need to free your hands so you can get that time. Time well utilised also means making time to eat well and drink plenty. Try to take time to care for yourself as much as possible. If you don't have family around, you may be able to seek extra help by finding a postnatal doula (some useful sites Birth and the city, Red rent doulas, Abuela, Birthworkers of colour, Doula UK), family support worker (Homestart), or an NCT BBCS (Birth and beyond community supporter).

Check out this video for some reassurance:

<https://youtu.be/mTm9zvz5-Dc>

4. Skin to skin

You might hear this all the time but it's true- lots of skin to skin. There are many ways to encourage milk production. By giving yourself and your baby **time** you can incorporate lots of opportunities to have skin to skin contact.

Skin to skin helps the breastfeeding relationship for many reasons. Skin to skin encourages the production of oxytocin. There are many factors involved breastfeeding and helping you to meet your goals. The two hormones that it's important for you to think about is prolactin and oxytocin. A little bit about prolactin first...

When a baby suckles, it sends impulses to the brain and in response our pituitary glands secrete prolactin and oxytocin. Prolactin increases in blood and stimulates milk production. Prolactin can also help a mother feel relaxed. Oxytocin's role is to help the milk 'eject'. This is a **reflex** known as milk ejection reflex. This is also referred to as the 'let down'. If you remember the tips given to have a gentle birth, well it's a similar principle to getting breastfeeding off to a good start.

“Oxytocin starts working when a mother expects a feed as well as when the baby is suckling. The reflex becomes conditioned to the mother's sensations and feelings, such as touching, smelling or seeing her baby, or hearing her baby cry, or thinking lovingly about him or her. If a mother is in severe pain or emotionally upset, the oxytocin reflex may become inhibited, and her milk may suddenly stop flowing well. If she receives support, is helped to feel comfortable and lets the baby continue to breastfeed, the milk will flow again.”

(1. *Infant and Young Child Feeding: Model Chapter for Textbooks for Medical Students and Allied Health Professionals*. Geneva: World Health Organization; 2009. *SESSION 2, The physiological basis of breastfeeding*).

Cuddling up to your baby is a great way to promote the release of oxytocin. Alternatively, in a reclined position and placing baby on top of you, your baby may be able to search for the breast. Babies have an early reflex which mimics walking/crawling (step reflex and crawl reflex), this helps baby to find their food. Skin to skin is an important part of building the microbiome which I will talk about later. Another option is baby massage. Baby massage has so many benefits to mum and baby. It helps both to relax. It is also a way to communicate with your baby and bond. It can help with a baby who has 'colic' and who may be restless although we must be careful about our expectations of infants and imposing our interpretation on their behaviour. The reality is, babies like to be held because they feel safe.

If you wish, wearing your baby in a sling can also be another way to get more close contact and encourage the flow of hormones needed to stimulate milk production.

5. Understanding your milk: foremilk and hindmilk

When a baby begins a feed, the fore milk is more of a watery consistency. It has many benefits and many professionals summarise by saying it is thirst quenching, or it's almost like a starter. The hind milk, this is a thicker consistency. It has more fat in it and baby accesses this by generally feeding longer. Now this isn't to say there isn't any fat in foremilk, I am simply giving an overview. It is important to keep baby on the breast as long as he is drawing milk and when your breast feels empty/soft, offer the other side. Continue the next feed from the side you left off to prevent engorgement and also to access hindmilk. Hindmilk can help baby feel more satisfied and having an imbalance can result in tummy discomfort for some babies. They may have more watery stools and it might have a sour or vinegar-like smell. For more information about getting feeding off to a good start, please read about **responsive feeding**.

6. Microbiome

The best and most simplest way to explain the microbiome is, "all the organisms that live in the human body...The organisms that make us home" 2. (22, *Your Baby's Microbiome*)

In addition to this, it is noted that we are more microbial organisms than we are human cells. These microbes outnumber our human cells in so much that it means we are only roughly 10 per cent human. Your baby experiences what we call seeding during the birth process. Seeding, to summarise is your baby's first dose of microbes. This is beginning to be explored more but generally some ideas are that it happens when the waters break, as there is no longer a protective 'barrier' around baby. As your baby moves along the birth canal, then through the vagina he is exposed to microbes and even with some faecal matter. Your baby's eyes, nose, mouth are coated in this microbial cocktail. You baby is likely to even swallow it. Lactobacilli is found in the vagina and populates baby's mouth and in so doing is swallowed, then it fills baby's gut and will populate there too. Lactobacilli helps to digest lactose but it also helps to fight off competing harmful bacteria. Additionally bifidobacterial is another beneficial bacteria that is in a mother's gut and can pass on to baby through her faecal matter. This again helps to inhibit the growth of pathogens, covers the lining of the baby's intestine as well as helps to digest sugars.

Another opportunity is when they get skin to skin, believe it or not our skin is home to millions of bacteria, if a mother's water broke and the water came into contact with other body parts, the baby will get some of that too; and then there is a mutual exchange through breastfeeding. So remember that, some of those beneficial

bacteria actually comes from the breast itself. Lastly, breastmilk itself, is full of nutrients, vitamins, minerals and immune factors. All the exposure a baby gets helps to train his or her immune system.

7. Benefits of breastmilk

There are so many benefits to breastfeeding and breastmilk. Breastfeeding itself has benefits for both mother and child. It can protect her from a number of cancers, it can protect her from diabetes and can help with depression and despite what many people think it can even help to get more rest and sleep. Breastmilk has nutritional benefits, it also contains antibodies, hormones and changes throughout the day as well as the child's development over the months and years. There are useful infographics on it's components. Here is a link to the composition of breastmilk.

<https://kellymom.com/nutrition/milk/bmilk-composition/>

For support contact National breastfeeding helpline: 0300 100 0212

If you would like some more information or support from me send an email to edensscript@outlook.com. I currently offer free breastfeeding support.

It is also free for groups but I ask for expenses to be paid. (Travel, parking etc).

References

1. Infant and Young Child Feeding: Model Chapter for Textbooks for Medical Students and Allied Health Professionals. Geneva: World Health Organization; 2009. SESSION 2, The physiological basis of breastfeeding. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK148970/>
2. Harmon., A. Wakeford. *Your Baby's Microbiome*, White River Junction, Vermont, Chelsea Green Publishing, 2017.