



# Breastfeeding Tips & Essentials

Breastfeeding is one of the most effective ways to ensure child health and survival. However, nearly 2 out of 3 infants are not exclusively breastfed for the recommended six months, a rate that has not improved in 2 decades.

According to the World Health Organization (WHO), breast milk is the ideal food for infants. It is safe, clean and contains antibodies that help protect against many common childhood illnesses. Breast milk provides all the energy and nutrients that an infant needs for the first months of their life, and it continues to provide up to half or more of a child's nutritional needs during the second half of the first year and up to one third during the second year of life.

Breastfed children perform better on intelligence tests, are less likely to be overweight or obese and less prone to diabetes later in life. Women who breastfeed their babies also have a reduced risk of breast and ovarian cancers.

Colostrum, the yellowish, sticky breast milk produced at the end of pregnancy, is recommended by WHO as the perfect food for the newborn, and feeding should be initiated within the first hour after birth.

Exclusive breastfeeding is recommended up to 6 months of age with continued breastfeeding and appropriate complementary foods up to two years of age or beyond.

## How do you breastfeed?

For each feeding, you go through these basic steps:

- Get ready for the feeding. Be calm, relaxed and try not to be distracted. Get some water or juice for yourself and have two or three pillows to help support your baby while he or she is nursing.
- Find a breastfeeding position that is comfortable for you and your baby, such as the cross-cradle or the football hold. Make sure the baby's head and chest are lined up straight and facing your breast. It's best to switch which breast you start with each time.
- Get the baby latched on properly. Your baby's mouth needs to be wide open, like a yawn, so you may need to touch the middle of your baby's lower lip gently. When your baby's mouth is open wide, quickly bring the baby onto your nipple and areola (the dark circle around your nipple).
- Provide a complete feeding. Let your baby decide how long to nurse. Be sure to burp your baby after each breast.

## What's the best position for breastfeeding?

Here's how to hold your baby and get him/her into the right position for breastfeeding and latching-on properly.

- **Side-lying position.** This position is great for night feedings in bed. Side-lying also works well if you're recovering from an episiotomy, (an incision to widen the vaginal opening during delivery). Use pillows under your head to get comfortable. Then snuggle close to your baby and use your free hand to lift your breast and nipple into your baby's mouth. Once your baby is correctly "latched on," support your baby's head and neck with your free hand, so there's no twisting or straining to keep nursing.
- **Cradle position.** Rest the side of your baby's head in the crook of your elbow with his whole body facing you. Position your baby's belly against your body, so he feels fully supported. Your other, "free" arm can wrap around to support your baby's head and neck or reach through your baby's legs to support the lower back.
- **Football position.** Line your baby's back along your forearm to hold your baby like a football, supporting his head and neck in your palm. This works best with newborns and small babies. It's also a good position if you're recovering from a cesarean birth and need to protect your belly from the pressure or weight of your baby.

## How do I get my baby to 'latch-on' during breastfeeding?

Position your baby to face you so he/she is comfortable and doesn't have to twist his neck to feed. With one hand, cup your breast and gently stroke your baby's lower lip with your nipple. Your baby's instinctive reflex will be to open the mouth wide. With your hand supporting your baby's neck, bring your baby's mouth closer around your nipple, trying to center your nipple in the baby's mouth above the tongue.

You'll know your baby is "latched-on" correctly when both lips are pursed outward around your nipple. Your infant should have your entire nipple and most of the areola, which is the darker skin around your nipple in his mouth. While you may feel a slight tingling or tugging, breastfeeding should not be painful. If your baby isn't latched-on correctly and nursing with a smooth, comfortable rhythm, gently nudge your pinky between your baby's gums to break the suction, remove your nipple, and try again. Good "latching on" help prevent sore nipples.

## What are the benefits of breastfeeding for your baby?

Breast milk provides the ideal nutrition for infants. It has a nearly perfect mix of vitamins, protein and fat; everything your baby needs to grow, these are all provided in a form more easily digestible than infant formula. Breast milk contains antibodies that help your baby fight off viruses and bacteria. Breastfeeding lowers your baby's risk of having asthma or allergies. Plus, babies who are breastfed exclusively for the first 6 months without any formula, have fewer ear infections, respiratory illnesses and bouts of diarrhoea.

## Benefits of breastfeeding to the mother.

Breastfeeding burns extra calories, so it can help you lose pregnancy weight faster. It releases the hormone oxytocin, which helps your uterus return to its pre-pregnancy size and may reduce uterine

bleeding after birth. Breastfeeding also lowers your risk of breast and ovarian cancer. It may lower your risk of osteoporosis.

## What are some common challenges with breastfeeding?

- **Inverted nipples.** An inverted nipple doesn't poke forward when you pinch the areola (the dark skin around the nipple).
- **Breast engorgement.** Breast fullness is natural and healthy. It happens as your breasts fill with milk, staying soft and pliable.
- **Blocked ducts.** A single sore spot on your breast, which may be red and hot, can signal a plugged milk duct. This can often be relieved by warm compresses and gentle massage over the area to release the blockage.
- **Breast infection (mastitis).** This occasionally results when bacteria enter the breast, often through a cracked nipple after breastfeeding. If you have a sore area on your breast along with flu-like symptoms like fever and fatigue, call your doctor.
- **Sore nipples.** You can expect some soreness in the first weeks of breastfeeding. Make sure your baby latches on correctly and use one finger to break the suction of your baby's mouth after each feeding.
- **Dry and cracked nipples.** Avoid soaps, perfumed creams, or lotions with alcohol in them which can make nipples even more dry and cracked. You can gently apply pure lanolin to your nipples after breastfeeding, but be sure you gently wash the lanolin off before breastfeeding again. Changing your bra pads often will help your nipples stay dry and you should use only cotton bra pads.
- **Worries about producing enough milk.** A general rule of thumb is that a baby who's wetting six to eight diapers a day is most likely getting enough milk. Avoid supplementing your breast milk with formula and never give your infant plain water.
- **Pumping and storing milk.** You can get breast milk by hand or pump it with a breast pump. It may take a few days or weeks for your baby to get used to breast milk in a bottle.

## References:

1. [https://www.who.int/health-topics/breastfeeding#tab=tab\\_1](https://www.who.int/health-topics/breastfeeding#tab=tab_1)
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