

“Is this normal?” – The first week with a breastfeeding newborn

Article written by IBCLC and ABM BFC Emma Pickett

I've been taking calls from new parents on the National Breastfeeding Helpline since it opened in 2008. Calls often begin with a mum in tears and she's sounding desperate. Breastfeeding really matters to her and she wants it to work. She's overwhelmed and confused. The first voice we hear might sometimes be the partner's and a mum is too upset to even come to the phone.

Hundreds of these calls end with a contented calm voice saying, “Thank you. It's such a relief to know that's normal. I feel so much better now”. As it happened, breastfeeding was actually going OK; what was interpreted as a breastfeeding ‘problem’ was actually a new baby's normal and natural response to their new environment. The family just didn't know how babies were ‘supposed to behave’.

If I had a magic wand, I would download into all parents the knowledge of what is normal in a newborn. Think *The Matrix* film – but instead of the ability to pilot helicopters or practise high level martial arts, you'd know about cluster feeding and a newborn's desire for closeness, nappies and normal fussiness. The National Breastfeeding Helpline would be quieter overnight but we'd all feel a lot more relaxed and able to enjoy these teeny new people in our lives.

But actually ... you've already had that download. You just may not have realised it. It's deep in there after millions of years of evolution, facilitated by hormones and natural instincts. It may not mean you know the exact details of the colour of baby poo on day three, or how to correct a baby's latch without help, but there's so much you do know. You may not have grown up surrounded by breastfeeding, and for some aspects you will need support and information, but there's a ton you do know about your baby: things that just feel right and things that don't. And your baby had the download too. Sometimes it gets fuzzied with a birth that didn't go to plan but their instincts are in there too.

Two things that are normal:

1. Babies want to be close to you.

Imagine a news story about a baby gorilla just born in London zoo: “ZSL London are delighted to announce the birth of new baby Fumbi. Mother and baby are in good health” but days later it's reported that staff are concerned. Fumbi's mother (despite being surrounded by other older female gorillas and having observed newborn care) keeps trying to put Fumbi down. She places her in the hay and walks off repeatedly and appears to be trying to avoid holding her for long periods. Fumbi is agitated. Her heart rate and respiratory rate shows signs of distress. She's losing heat (because teeny newborn gorillas have a large surface area and need to be held to regulate their temperature). Fumbi isn't feeding as often a newborn usually does because of the periods of separation. The mother appears to be missing out on some of the oxytocin- (the hormone that promotes feelings of love) induced bonding that helps the formation of their early relationship. Fumbi is at risk.

Oh dear. Something seems to have happened to Fumbi's mother. We'd be worried.

However, this is exactly what is happening in human homes across the UK today (though not in many other countries and cultures). We are primates just as gorillas are. We're designed to be close to our babies. We can see that by looking at the constituents of our breastmilk. Other mammals have much higher fat milk so babies can be left while mum fishes or grabs a rabbit for lunch. Our babies are born immature because of our pelvis shape from being upright and our large brains, and they are designed to have milk regularly for a relatively long time. We are supposed to hold our babies. Some people call us ‘carry mammals’.

But instead we get the message that babies can be ‘spoilt’. We are supposed to encourage them to be independent and sleep apart from us. If we can't put them down, if they want to sleep touching us, if we hold them when they sleep – we've apparently failed some test. Though it's not quite clear who the examiner is. There are popular books that even use terms like ‘accidental parenting’ just to load on the value judgments. Parenting experts such as Truby King in the 1910s told parents to avoid cuddling and unnecessary attention and the spectrum of ‘advice’ has been flip-flopping backwards and forwards ever since. Today one book will tell you to wear your baby in a sling as much as possible and another will tell you to arrange a baby's sleep by the clock and leave a baby only a few weeks old to cry if necessary.

What does your baby want?

They don't want to be put down and eaten by a sabre toothed tiger (less of a problem these days). They don't want to waste energy keeping warm and crying when they don't need to. They want to keep those calories to lay

down fat and develop their brain. They want to use your breathing rate to regulate their own respiratory rate. They want you to notice when they start to show early feeding cues. They want your familiar smell and taste. You are home to them.

“My baby won’t go down in its Moses basket”. Yes, it’s frustrating when you thought that was what they were ‘supposed to do’. But would it feel easier if you knew that wasn’t likely to be their first choice and there are good biological and evolutionary reasons for that?

“But I’m not going to get any sleep”. According to the Infant Sleep Information Source, “70-80% of breastfed babies sleep with their mother or parents some of the time in the early months, and many studies have found that mothers and babies who bed-share breastfeed for much longer than those who sleep apart.” Research shows that these mums breastfeeding through the night (and mostly bed sharing) will also be getting better quality sleep and be more rested than other parents. Good sleep is possible if we stop battling nature.

The book “Sweet Sleep: night time and naptime strategies for the breastfeeding family” is a great place to start. It talks to you about creating a safe space where everyone gets a better night’s sleep.

A lot of your baby’s urges are eminently sensible. If they don’t want to sleep in a separate pile of hay, trust them. They are here today because those urges have kept them safe over the generations.

Don’t expect to be up and making a moussaka on day five. The feeling that you ‘shouldn’t’ be holding your baby is exacerbated when we live in a society which tries not to let new parenthood change our lives. Our bodies aren’t supposed to change. Our commitment to work isn’t supposed to change. Our ability to engage with political life and housework and social media isn’t supposed to change. Actually, throughout much of human history, mum isn’t going to do much of anything for a good 40 days. Someone else is making the moussaka, just as you would have once made the moussaka for them. We are supposed to be doing nothing else other than eating the food made by others (really doesn’t have to be moussaka), sleeping and being with our new baby.

2. They come to the breast for lots of different reasons and they usually have a good reason for doing so.

Just as parents feel they’ve failed if their baby doesn’t sleep in the separate pile of hay (aka fancy Moses basket that cost £75 and granny knitted a blanket for), they feel a failure if baby is at the breast ‘too much’. I have written elsewhere on the dangerous obsession of the infant feeding interval. It’s dangerous for both babies and mothers. But we need to remember breastfeeding isn’t just about feeding and it never has been.

Babies have jobs to do. They are helping you to form new breast tissue in the first few weeks. They are elevating your prolactin levels (the hormone that governs milk supply). They are stimulating oxytocin (which is the key hormone in relationship-building and creating a sense of calm and well-being). They are increasing milk volume and altering fat content. They are reducing levels of the stress hormone, cortisol. They are facilitating digestion and the passing of stools. They are hydrating, regulating their temperature, feeling emotionally secure, growing brain connections and trying to get to sleep (which is one of the purposes of breastfeeding.)

To think breastfeeding is just about food and calories (and “quick, measure the gap between breastfeeds!”) is to do nature a huge disservice. Measuring all the different reasons a baby comes to the breast is like trying to measure fairy dust. Do you count all the times your partner cuddles you, strokes your arm, kisses you, smiles at you affectionately, communicates with you, has a drink of water, eats a snack or has a meal? You wouldn’t find an app for that.

Stop thinking about minutes. No one can tell you a baby should feed for X number of minutes because we all have different physiology and our babies do too. Create your world around you so you can meet your baby’s needs in the way they are asking you to. Don’t try and mould your baby to fit into a world that has become obsessed with counting and measuring. If you know you are a routine person and you are struggling with a feeling of ‘losing control’, give yourself a few weeks and see how it feels to trust your baby. Once your milk supply has maximised, you’ll have some options. Try and ‘control’ too early and you’ll find things go out of your influence in ways you can’t come back from easily.

Get help if things feel wrong – if breastfeeding hurts, if you’re not sure about weight gain or nappies, if you can’t work out how to meet your own needs for food and sleep. There are lots of people who will help out and we’re at the end of a phone or a Twitter account or Facebook page. But don’t confuse your baby behaving unexpectedly for something going ‘wrong’. Maybe no one told you what normal would be.

If we let normal happen it *will* make all of our lives easier in the long term. You’re creating a little person who enters this world with their needs being met.