

### How can I increase my milk supply?

Lots of people worry that they may have milk supply problems when baby might actually be unsettled for other reasons, or they might be feeding more frequently to increase your supply for the future. It's a good idea to talk to someone trained in breastfeeding if you are worried. Good positioning at the breast is also important for a good milk supply.

### What does it feel like when your milk 'comes in'?

Colostrum (the 'first' milk) begins to change to mature milk during the first few days, and this is often referred to as the milk 'coming in'. Your breasts may be swollen with extra fluids and may become uncomfortable. Frequent feeding with an effective latch can relieve this. Call us on the helpline or speak to your midwife if anything else is worrying you.

### Will breastfeeding spoil my breasts?

No, research tells us that it's pregnancy that affects your breast shape. Breastfeeding may actually help them to remain firmer than they otherwise would. A well-fitting nursing bra will support your breasts and keep you comfortable during the day. A bra that is too tight can lead to blocked milk ducts and mastitis.

### Do I have to eat a special diet?

No. A normal, balanced diet will provide your body with all the nutrients necessary to make plenty of milk for your baby's needs without depleting your own stores of nutrients or energy. Just eat to hunger and drink to thirst. You don't have to avoid particular foods unless you are medically advised to do so.

### How do I know if my baby is getting enough milk?

If your newborn baby is feeding whenever they ask to, is gaining weight steadily, has plenty of pale, wet nappies, has at least two poos a day and seems contented, then relax - they're getting enough. They'll enjoy the cuddling and close contact with you, so don't be afraid of "spoiling" them by breastfeeding frequently.

### What about night feeds?

A baby's tummy cannot hold much milk so your baby will ask to breastfeed often. Night feeds help boost your milk supply and prevent engorged breasts. There's no set age at which a breastfed baby will stop wanting to feed at night. Each baby is an individual with individual needs. Research suggests that breastfeeding mums get better quality sleep at night than mums who don't breastfeed, even if they are woken several times.

### What if I need more help?

Visit the ABM's website to find out the different ways we can support you and how you can find us on social media. You might also choose to become a member.

The ABM has an online course called 'Team Baby: getting ready to breastfeed' which is a great introduction to the world of breastfeeding for a new family:

<https://courses.abm.support/courses/team-baby-getting-ready-to-breastfeed/>

**Association of Breastfeeding Mothers**

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## Questions New Mothers Ask



helpline: 0300 100 0212

[www.abm.me.uk](http://www.abm.me.uk)

## Why is breastfeeding good for my baby?

Breastmilk contains everything a baby needs to eat and drink for around the first six months of life. But breastfeeding is much more than nutrition: it's also about comfort, relationship-building and brain development.

Breastmilk increases baby's resistance to many infections and diseases, and reduces their risk of developing allergies, diabetes and childhood cancers, and being readmitted to hospital with conditions like gastroenteritis and respiratory infections. Breastmilk costs less than the alternatives. It's always available and is fresh, clean and served at the right temperature.

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## Is breastfeeding good for me?

Breastfeeding reduces your risk of breast and ovarian cancers and helps your uterus return to its pre-pregnancy size. Research suggests that mums who breastfeed are less likely to suffer from mental health issues postnatally and may find it easier to lose weight after the birth.

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## How often should I feed my baby?

Breastfed babies need to feed frequently. Young babies will generally need at least 8-12 feeds in 24 hours, perhaps more. Your baby may 'cluster' feed, having a few breastfeeds close together. Feeding in response to your baby's signals allows your milk supply to develop and meet your baby's needs, so you and your baby get breastfeeding off to the right start. Occasionally a sleepy young baby may need to be woken to be fed. Your midwife can guide you. At times during the early weeks, your baby may appear to be more hungry than usual. They will be "asking" to build up your supply in preparation for a spurt of growth and development.

## How do I put my baby to the breast?

A baby's suckling instinct is strong in the first hour after birth, so allowing your baby to come to the breast as soon as possible will get you off to a good start. After you give birth, you will usually have skin-to-skin with your baby and you'll stay together. Your baby has natural instincts that help them to come to breast. Sometimes you may need to offer them more guidance.

We use the memory aid C.H.I.N to help us remember how to get started with breastfeeding:

**C for Close.** Your baby should be held close to your body and should be able to reach the breast easily without having to stretch or twist.

**H for Head free.** Your hand supports their neck so they can move their head to latch on, but they are free to move and flex their head.

**I for In line.** Baby's head, shoulders and body are in a straight line without their body being twisted. They are facing the breast.

**N for Nose to Nipple.** Hold your baby with their nose opposite your nipple. Brush your nipple against their lips or nose to encourage them to open their mouth and reach for your breast. Wait for the 'gape' (their mouth opening like a yawn). Bring them to the breast with their chin touching the breast first. Make sure they take a good mouthful of the areola (the darker area surrounding the nipple) and not just the nipple itself.

Allowing your baby to suck on just the nipples will make them sore and can lead to cracking and bleeding. The baby moves to you, rather than you moving the breast to the baby.

A more reclined position is sometimes called biological nurturing or laid-back breastfeeding. This can trigger baby's natural latching instincts. Your midwife can support you with this, or you can try it yourself by relaxing back in an armchair or in bed with your back supported. You may see a lot of head bobbing as baby finds and attaches to the breast in this position, and you can gently guide them.

## How can I avoid sore nipples?

Some nipple tenderness is common during the first few days as your body gets used to the natural stretching of the nipple. Any discomfort should get easier after the first few moments of the feed and the nipple shouldn't come out of baby's mouth looking squashed, flattened or ridged. If the discomfort persists, don't hesitate to seek help from a breastfeeding counsellor or midwife to check how your baby is positioned.

Breastmilk is a natural antiseptic. If your nipples are sore, express a little milk after a feed and allow the milk to dry on the nipple. If your nipples are cracked, you may need more than breastmilk. Someone trained in breastfeeding can talk to you about 'moist wound healing'.

## How long does a feed last?

Feeds can vary a lot from baby to baby and from hour to hour. Anything from 5 to 40 minutes may be normal and sometimes longer. Let your baby decide when a feed has ended. Taking your baby off the breast too soon may reduce the amount of milk you produce and might mean they don't get everything they need.

## How does my baby "tell" me they're hungry?

Signs that a baby needs a feed include opening/closing their mouth, putting their fist in their mouth, rooting or latching onto anything around them, wriggling and squirming, and finally crying. Crying is a late cue, and latching may be more difficult at this point, so try and look for the early signs.