

When Latching

Push baby's bottom into your body with the side (the same side as where your baby finger is) of your forearm.

- This will bring him towards your breast with the nipple pointing to the roof of his mouth.

Mother's hand under the baby's face, palm up.

Head supported but NOT pushed in against breast.

Head tilted back slightly.

Baby's body and legs wrapped in around mother.

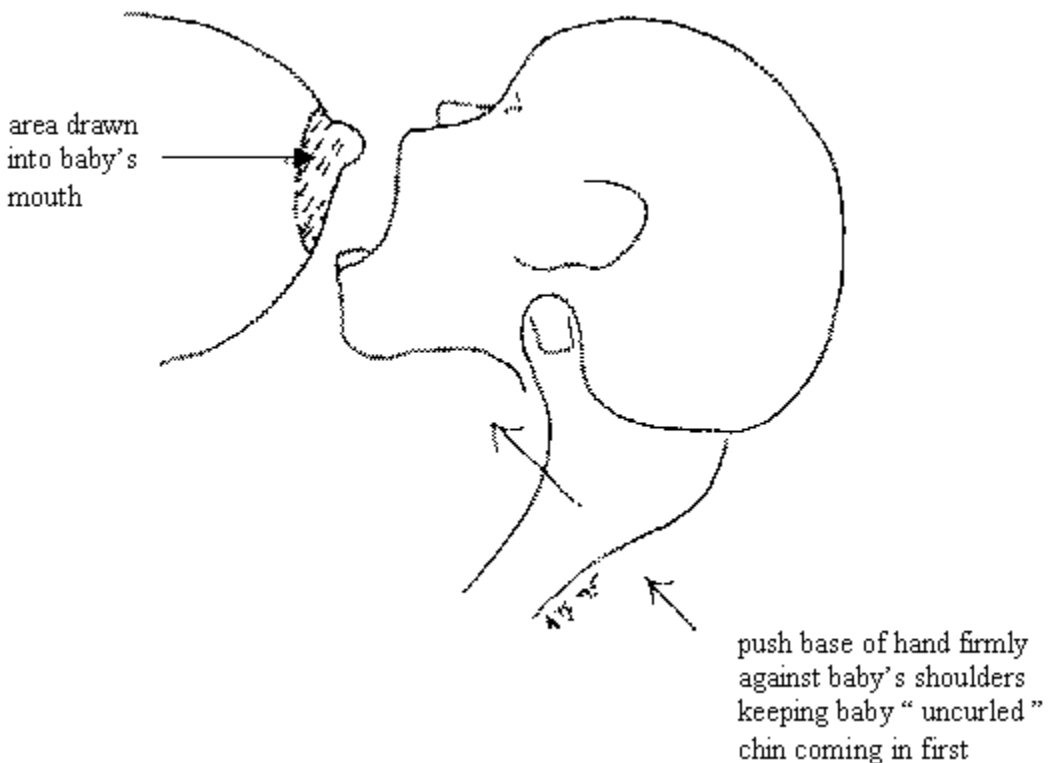
Use your whole arm to bring the baby onto the breast, when mouth wide.

- Chin and lower jaw touch breast first.

WATCH LOWER LIP, aim it as far from base of nipple as possible, so tongue draws lots of breast into mouth.

Move baby's body and head together – keep baby uncurled.

Once latched, top lip will be close to nipple, areola shows above lip. Keep chin close against breast.

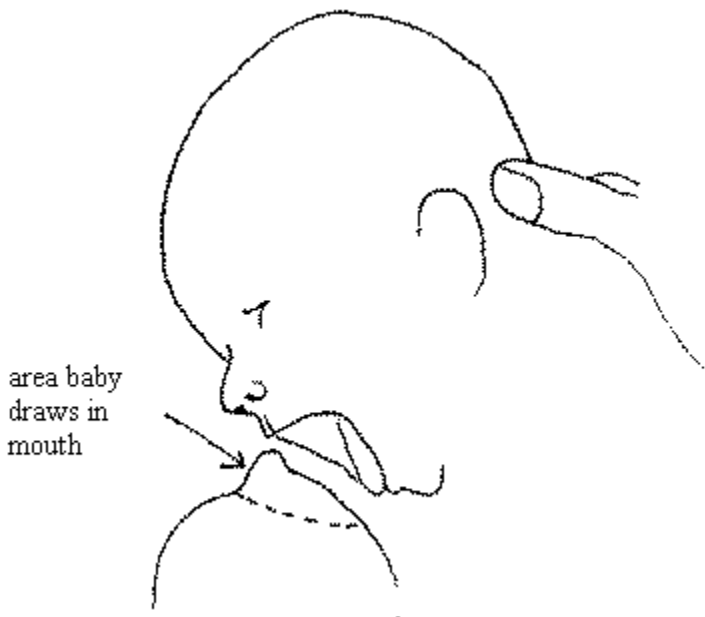


WIDE MOUTH / GAPE

Need mouth wide before baby moved onto breast. Teach baby to open wide/gape:

- move baby toward breast, touch top lip against nipple
- move mouth away SLIGHTLY
- touch top lip against nipple again, move away again
- repeat until baby opens wide and has tongue forward
- Or, better yet, run nipple along the baby's upper lip, from one corner to the other, lightly, until baby opens wide

MOTHER'S VIEW WHILE LATCHING BABY



baby's head tilted slightly back

bring baby in quickly

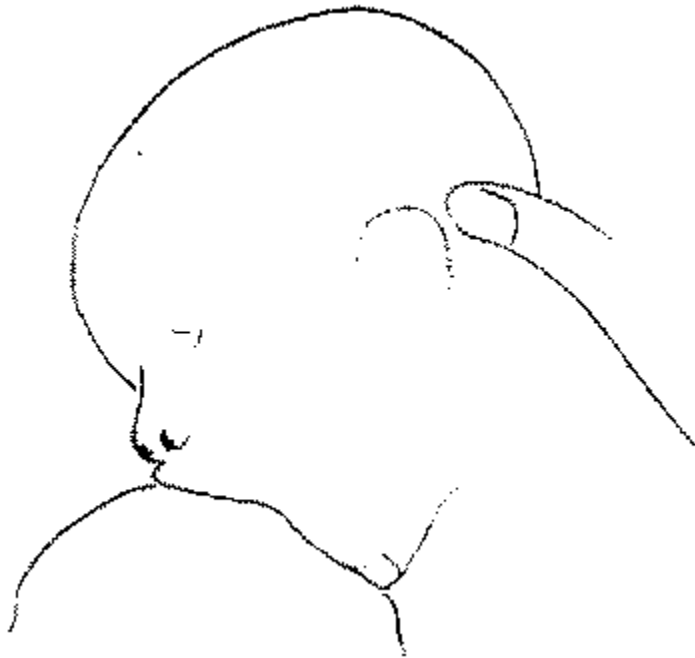
push with base of hand on shoulders

chin touches first

baby's body close against mother

Move baby not breast

MOTHER'S VIEW OF NURSING BABY



head tilted slightly
back

chin well in against
breast

hold in firmly
against shoulders
keeping baby
uncurled

RECOMMENDATIONS FOR THE MOTHER

Mother's posture

- sit with straight, well-supported back
- trunk facing forwards, lap flat

Baby's position before feed begins

- on pillow can be helpful,
- nipple points to the baby's upper lip or nostril

Baby's body

- placed not quite tummy to tummy, but so that baby comes up to breast from below and baby's eyes make contact with mother's

Support breast

- firm inner breast tissue by raising breast slightly with fingers placed flat on chest wall and thumb pointing up (if helpful, also use sling or tensor bandage around breast)

Move baby quickly on to breast

- head tilted back slightly, pushing in across shoulders so chin and lower jaw make first contact (not nose) while mouth still wide open, keep baby uncurled (means tongue nearer breast) lower lip is aimed as far from nipple as possible so baby's tongue draws in maximum amount of breast tissue

CAUTIONS

Mother needs to AVOID

- pushing her breast across her body
- chasing the baby with her breast
- flapping the breast up and down
- holding breast with scissor grip
- not supporting breast
- twisting her body towards the baby instead of slightly away
- aiming nipple to centre of baby's mouth
- pulling baby's chin down to open mouth
- flexing baby's head when bringing to breast
- moving breast into baby's mouth instead of bringing baby to breast
- moving baby onto breast without a proper gape
- not moving baby onto breast quickly enough at height of gape
- having baby's nose touch breast first and not the chin
- holding breast away from baby's nose (not necessary if the baby is well latched on, as the nose will be away from the breast anyway)