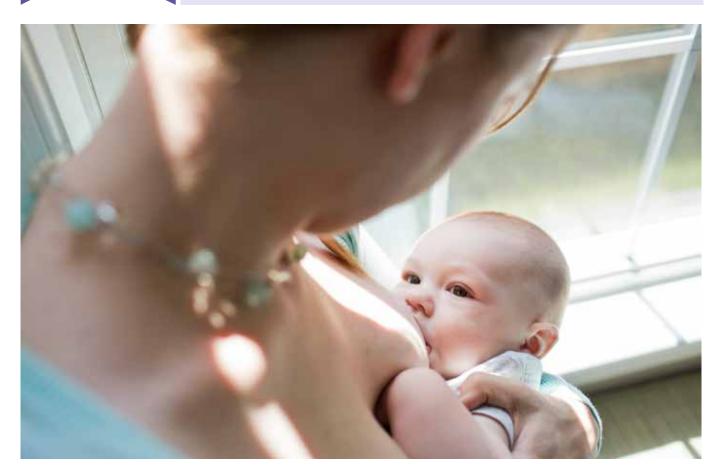


Helping mums breastfeed longer



Is my baby getting enough?



If you are worried about not being able to produce enough milk, you are not alone. This is one of the most common breastfeeding concerns for mothers around the world.

The truth is that only a tiny number of mothers physically cannot make enough milk. Feeding in response to baby's very early cues is the best way to ensure you have the full supply that baby needs, and if you are worried, seek support from someone experienced in breastfeeding to help you.

It is important, especially in the early days, to understand that baby is the best teacher and will help your body learn how much milk to make. Remember, baby does not work to the clock. Baby's early feeding cues include rapid eye movement when sleeping (dreaming of her milk!), licking her lips, and starting to turn her head. By the time she is crying, this is a late feeding cue, and getting her latched on is often more stressful for both of you at this point. If you respond to early feeding cues, and allow her to feed as often as she needs, her emptying your breasts will trigger your body to produce exactly what she needs.

Here are some factors to watch for to make sure baby is getting enough milk:

- Babies often lose some weight in their first week of life, but should quickly regain it. A 5-7 percent weight loss during the first 3-4 days after birth is common. Most babies will regain their birth weight by 10-14 days. If your baby is not gaining weight, it's important to get expert breastfeeding advice so that any problem can be resolved quickly, and with the least disruption to both of you!
- You can also gauge your milk supply from baby's nappies. Baby will generally have six or more wet nappies each day. Urine should be light and mild smelling. Pink crystals in your baby's nappy are called urates, and can be normal, but can also be a sign that baby is not getting enough, so consult your healthcare provider.
- Expect 3-4 (or more!) dirty nappies each day by day four. Baby's stools will gradually change from thick black meconium in the first days to yellow and mustardylooking by around day five. Baby's stool may be seedy and a little chunky or like cottage cheese curds. Sometimes breastfed babies go longer between stools. If you are concerned, consult your healthcare provider.

PATIENT REFERENCE GUIDE

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 You will start to be aware of your breasts feeling full as you come up to a feed, and then, after a feed, your breasts will feel softer and baby should seem full and calm, with periods of being settled between feeds, which may vary from 1, to 3 or 4 hours.

What to do if baby is not getting enough

If you and your healthcare provider feel baby is not getting enough milk at the breast, she will have assessed whether baby is well, and whether a paediatric review is needed and talked to you about a plan for how to get things back on track. This plan may include some, or all of the following:

- Spend plenty of time in skin-to-skin with your baby. (Look at safe co-sleeping practices https://www.isisonline.org.uk/sleep_health/, and consider going back to bed with baby for a day or two.
- Feed baby frequently Respond to early feeding cues.
- Encourage baby to have 'full, effective feeds' (Use breast compression, ie gently compressing your breast during feeding, or gently tickle baby's tummy or toes, or blow on her face, to encourage her to keep sucking and swallowing throughout the feed. (She should be mostly doing one swallow to every suck, and a feed should

last roughly 15-25 minutes. If feeds are frequently a lot longer than this, then she is probably not emptying the breast effectively, and doing a lot of 'grazing')

- Consider expressing after every feed and giving baby the expressed milk, preferably by cup to avoid nippleteat confusion in the early days. Expressing will increase your milk supply, whilst giving you the extra milk that you can give to baby after each feed to boost her weight.
- If you don't have any expressed milk then you may need to consider giving baby formula milk. This is a far inferior quality milk for your baby, and carries its own risks, so you are far better off using expressed milk if you possibly can. (See our 'pumping tips' for more advice on how to get the most from pumping).
- Work closely with your breastfeeding support/ healthcare practitioner to re-weigh baby and continue to give you on-going support and advice until you are confident in your supply and baby's ability to latch and access it.

Further support is available from local and National organisations such as:

http://www.thebabycafe.org
http://www.laleche.org.uk/
http://www.nct.org.uk/
http://www.breastfeedingnetwork.org.uk/

http://abm.me.uk/

Notes Section	