

TOPIC 5: FEEDING ON CUE

WHAT IS FEEDING “ON-CUE”?

Follow your baby’s lead. Feed your baby when showing feeding cues/hunger cues.



Early Hunger Cues (Licking/Rooting)



Late Hunger Signs (Over Hungry)

FEED YOUR BABY WITH *EARLY* FEEDING CUES:

Hunger Cues:

- Mouthing movements
- Licking
- Rooting
- Hand-to-mouth movements
- Hand-sucking
- *Crying is a late hunger sign*

Fullness Cues:

- Eating slows
- Turns face away
- Relaxed arms, falls asleep
- Stops sucking

LEARN YOUR BABY’S PATTERNS

- Feed baby whenever hunger cues are shown, for as long as baby wants until showing fullness cues.
- Babies typically eat 8-12 times in 24 hours.
- Some meals will be short snacks, others will be big Thanksgiving Dinner type meals.



BENEFITS OF “ON CUE” FEEDING

- Sucking and emptying milk from the breasts determines milk supply. Frequent feeding in the first few weeks builds milk production, making a good milk supply for months to come.
- Baby latches and feeds better using feeding cues. If you wait until your baby is crying, you may need to calm your baby first before feeding.
- You bring comfort, pain relief and nutrition to your baby when you feed on cue. Babies cannot be held too much or get spoiled.
- Feeding on a schedule or holding off feedings can limit your milk supply and the calories your baby gets. Babies gain weight better when they eat on-cue.
- The sucking motion on a pacifier (squeezing action) is different than the motion for breastfeeding (rolling action). Squeezing on the breast can cause pain if the baby learns this first. Sucking on a pacifier or bottle nipple can limit breast stimulation and cause low milk supply. Pacifiers can hide cues that your newborn baby is ready to eat. Avoid using pacifiers until breastfeeding is going well for you and your baby, usually by 3-4 weeks of age.

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TOPIC 6: BREASTFEEDING POSITIONING AND LATCH

Your baby may need your help
to learn how to latch correctly.

POSITION YOURSELF AND BABY (4 MAIN POSITIONS):



Football Hold



Cross Cradle Hold



Side Lying

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Cradle

1. Position yourself. Sit upright when possible or lay on your side facing your baby.
2. Position pillows (1-2) so that baby's body is at breast level.
3. Position baby in your arms. One arm holds baby around the baby's bottom and back, supporting baby's head and base of neck with hand.

HOLD YOUR BREAST:

4. Other hand holds your breast using a "C" with fingers at the base of the breast and thumb at the edge of the areola (dark brown area).



LATCH:

5. Tip breast and nipple up toward baby's nose. Stroke baby's lips slowly from top to bottom with your nipple and wait for wide open mouth (rooting).



6. Once mouth is wide open with tongue down, quickly drop breast into the back of baby's mouth. The end of your nipple should be at the back of baby's tongue.
7. Latch should be over the areola (dark brown area), and not just over the nipple.
8. Once baby begins to suck, you should feel a tug, with **NO PAIN**. Latch should not hurt. If you feel a pinch or bite, remove baby and re-latch. Latch over the nipple with pinching limits milk flow.

TIPS:

- Find a position that works.
- Have the nurses help you **every feeding** until you can get the baby to latch on your own with no pain.
- Babies learn to latch with practice. It often takes 2-3 days before they get good at it.

THE FIRST THREE DAYS AFTER BIRTH:

- *"The Golden Hour"* - Babies are alert for the first 1-2 hours after birth. This is the best time to start breastfeeding.
- *Sleepy Time* - After the initial wakeful 1-2 hours, babies often sleep for many hours and don't want to eat.
- *2nd Night Fussiness* - By the 2nd night, babies often are wide awake all night and want to "cluster feed." This helps them catch up from their sleepy time.