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Latching The Baby Onto The Breast



There are remarkably few 'rules' connected with breastfeeding because each baby is so unique. Some babies are very no-nonsense about feedings. Others like to linger at the breast. Some are sleepy during the first weeks after birth, and it can be a challenge to stimulate them to finish a meal. Others may be recovering from stressful deliveries and may fuss more than a mother had expected. As time goes by, families adjust to life with their newborn, resume normal activities, and breastfeeding becomes part of everyday life.

Breastfeeding is so delightful because each meal comes with a cuddle.

Medela knows that good beginnings are important, and that breastfeeding is learned behavior. Getting the baby comfortably latched on to the breast is the key to successful and enjoyable breastfeeding. The next section will describe how to latch the baby to the breast, but nothing replaces good, hands-on assistance. Be sure to contact a breastfeeding specialist or a La Leche League Leader or Nursing Mothers Counselor if you experience painful breastfeeding.

Step 1



If mother is not comfortable, baby will not be comfortable. Sit in a chair or lie in bed in a position that feels good to you. Use pillows if you need extra support. A footstool to slightly raise your knees helps prevent back strain. The [NursingStool](#) from Medela is designed to be just the right height for breastfeeding. If you don't have a stool, use a thick phone book or firm pillow.

Step 2



Look at your breast to see where the nipple is located. Don't try to stretch your breast over to where the baby is lying.

This mother is 'chasing' the baby with her breast. Notice how the baby is tangled up in the blankets.



Instead, unwrap the baby and move the baby's body so that he faces in toward you and can easily reach the nipple.

Some mothers need to support their breasts when the baby is tiny.



Breasts come in different sizes and shapes. For some women, using a pillow to raise the baby up will help the baby reach the nipple. For others, the baby will need to be lowered.

This mother must tuck her baby slightly under her breast to help him reach the nipple.

Step3

To latch the baby, line him up with his nose opposite your nipple. Support your breast and gently stroke his lips with your nipple.

Aim the nipple to the roof of the baby's mouth. Support the baby's head at the neck and shoulders so that the head is free to slightly tip back as you bring the baby onto the breast. This pushes the chin into the breast and keeps the nose clear so baby can breathe easily.

When well attached, some of the dark areola tissue will show above the upper lip. Baby's lower lip will cover the base of the areola and baby will have a deep mouthful of breast. The cheeks and chin will be close to the breast, and the nose is tipped away.

Breastfeeding should feel comfortable and you should be able to hear sounds of swallowing. When the baby comes off the breast, the nipple should appear round, not pinched up into a shape that looks like a new tube of lipstick.]



Wait until the baby opens wide!



Don't push on the back of the baby's head. This buries the nose and makes it hard for the baby to see you.



Mother and baby should be able to look into each other's eyes when well attached.



Be sure to hug the baby's hips in close to your body. This helps stabilize the baby in a comfortable position for breastfeeding.



Side lying position allows mom and baby to rest while breastfeeding.





Be sure to break suction between the gums, not the lips, when you take the baby off the breast to re-latch if the feeding is uncomfortable. This will prevent nipple damage.

Positioning Styles



Transverse/crossover hold

Proper positioning is important for prevention of sore nipples. This is an example of the .



The proper way to hold the baby is chest-to-chest, at the level of the breast. Baby's head should be in the crook of your arm and your hand should hold baby's buttocks.



The **football hold** is a good position for latch-on problems, or for premature or Cesarean birth babies.



The **lying down position** is especially useful after a Cesarean birth.

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