

Helping Your Baby Learn to Breastfeed

How do I know when it's time to try putting baby to breast?

You may notice your baby showing interest in feeding by “feeding readiness cues,” such as:

- Rocking her head back and forth
- Sucking or sticking out his tongue
- Smacking or licking her lips
- Putting his hands to his mouth

Feeding readiness cues may signal that your baby is ready to start learning how to breastfeed. Before learning how to breastfeed, your baby must be able to:

- Tolerate being held in a side-lying position
- Have the strength and coordination to latch on to the breast
- Coordinate his or her breathing with sucking and swallowing, which can be a lot of work for your baby

CORRECTED GESTATIONAL AGE	DEVELOPMENTAL STAGES OF FEEDING ABILITIES IN THE VERY LOW BIRTH WEIGHT INFANT
26 – 28 weeks	Immature sucking of milk in mouth
28 – 30 weeks	Sticking out tongue May lap milk, lick the nipple or take a few sucks Infant cannot yet coordinate suck-swallow-breathe
30 – 32 weeks	May latch and suck Short bursts of sucking with long pauses Not able to drink milk reliably
32 – 36 weeks	Rooting to breast Longer sucking bursts Starting to drink a little better
36 – 40 weeks	Rooting to breast Sustained sucking and good suction on breast Learning to transfer milk

Non-nutritive Breastfeeding

Early breastfeeding — where the baby starts to latch and suck but does not drink any milk — is called “non-nutritive breastfeeding.” As your baby gets closer to you, she will begin to smell your milk and may move toward your breast. Position your baby in a “cross-cradle” side-lying position and allow her to explore the breast. If she opens her mouth, bring her to your breast and allow her to suck. We will have you pump first to empty your breasts so baby can start learning without getting overwhelmed by milk.

If your baby seems ready to start learning to breastfeed or you need guidance, ask a nurse to make an appointment with a lactation consultant to visit you during a feeding.

Nutritive Breastfeeding

When babies are learning to breastfeed, it can be difficult to tell the difference between when they are tired and when they are full. While feeding, look for signs that your baby is drinking or “transferring” milk. As your baby becomes stronger, it will be easier to tell if he is tired or full. Don’t worry too much about how much milk your baby drinks. Transferring milk from the breast is more complicated than sucking and it will improve in time. Right now, it’s important to practice and help your baby have a positive experience at the breast.

What are signs that my baby is transferring milk?

- You have a good, comfortable latch.
- You can see and hear your baby swallowing while feeding.
- You can see your baby’s jaw moving.
- Milk is visible in your baby’s mouth or in the nipple shield.
- Your baby refuses a bottle after breastfeeding.
- Your baby is calm and relaxed after the feeding.
- Your baby sleeps for an hour or more after the feeding.
- Your breasts feel softer after the feeding.
- You pump less milk than usual after the feeding.
- Your baby’s weight is higher after the feeding. Weighing a baby before and



Improving premature infant nutrition is one of the main goals of the SPIN Program. Helping mothers to start pumping and make enough milk for their babies is a great start, but we also aim to help mothers learn to breastfeed their babies. The benefits to baby continue after NICU discharge; decreasing the rates of infection, crib death, allergy and hospitalization.

after a feeding and then subtracting the difference between those weights gives you an idea of how many grams of milk your baby drank.

How can a nipple shield help my baby transfer milk?

- Nipple shields encourage a wider open-mouth position and help keep the nipple in your baby's mouth, even without much suction.
- They help maintain suction, which helps draw milk out of the breast.
- Nipple shields prevent babies from pushing the nipple out of their mouths with their tongues.
- They help babies attach to a flat or inverted nipple, and help frantic babies realize the nipple is in their mouth.

How many times a day should I breastfeed my baby?

For most premature babies, once or twice a day is best when they are learning. Bigger or full-term babies in the NICU may be able to nurse more.

- Limit the feeding time to 20 minutes if your baby does not seem interested in breastfeeding and then finish the feeding by bottle or nasogastric (NG) tube.
- If your baby is feeding well at the breast and not tiring, you can gradually increase the feeding time.

As you continue to practice each day, you will see that your baby will start to help you by getting into position more easily. There will be days when your baby is interested in breastfeeding and days when your baby is not. This will improve in time.

Can I breastfeed my baby when I visit the hospital?

Call every morning before you come to the hospital and let us know that you plan to breastfeed when you come in. This way, you can coordinate your visit with your baby's feeding time.

The more often you can visit and care for your baby before she goes home, the easier the transition to breastfeeding will be. Most preemies are breastfeeding a few times a day by the time they are ready to go home, but every baby is different.

Should I keep pumping once my baby is breastfeeding?

When your baby is learning to breastfeed, she will probably not be able to empty the breast right away. Until she can, continue to pump in order to maintain your milk supply. Your baby will find breastfeeding easier if you have a good milk supply and the milk comes easily. After you go home, you will be able to gradually taper off your pumping.

Your Milk Supply

How can I increase my milk supply?

If your milk supply is not as high as you would like it to be, here are things you can try to help increase it:

- Make sure you are getting enough to eat. Your body needs an additional 500 to 600 calories per day to produce milk.
- Drink plenty of fluids – six to eight glasses per day is ideal. Drinking water is fine; you do not need to drink milk in order to make milk.
- Consider drinking Mother's Milk tea.
- Massage (gently) or compress your breasts during pumping to help your milk flow.

- Visit newborns.stanford.edu/Breastfeeding/HandExpression.html to learn more about hand massage to improve pumping.
- Try pumping every three hours during the day and once at night (seven to eight times a day).
- Consider increasing your pumping time by five minutes.
- Press the “drops” button to cycle back to the faster stimulation phase one to two times during pumping.
- Try relaxation or meditation when you pump.
- Check to make sure your pump is working well and that the flanges fit you comfortably.
- Speak with a lactation consultant for other recommendations.

What if I’m making a lot of milk?

If you are making more than 1,000 mL of milk, talk to a lactation consultant about simplifying your pumping regimen.

Mothers of twins or triplets will, of course, need more milk and the lactation staff can give guidelines as to how much they should try to produce.

Using the NICU Pumping Log

1. Pump six or more times a day including once between 1 a.m. and 5 a.m.
2. Write in your milk volume every time you pump.
3. Add up your 24-hour total milk volume every day.
4. Write your 24-hour total milk volume on the blue card at your baby’s bedside under MMV (Maternal Milk Volume).
5. Keep close track of your milk production — it helps you protect your milk supply!
6. Make notes if you have questions or concerns.