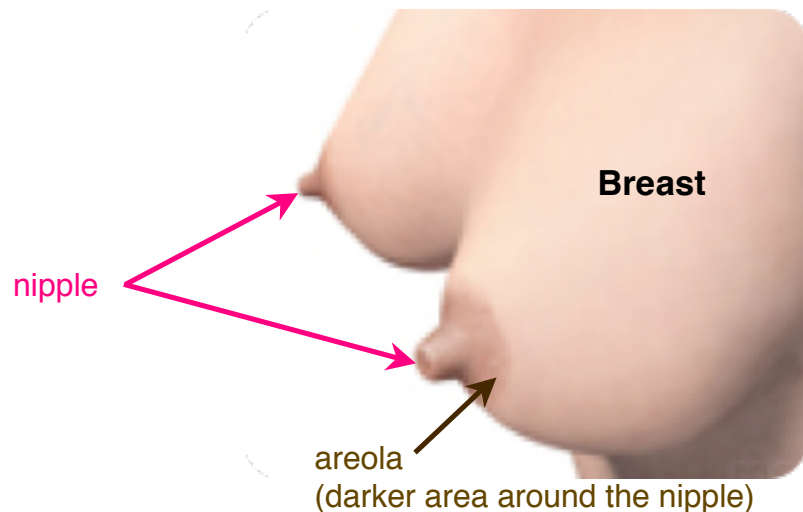


Elements of a Proper Latch

Breastmilk is the best source of nutrition for any baby. The American Academy of Pediatrics recommends babies to be breastfed exclusively for the first six months. Breastfeeding is a learned behavior for both the mother and the baby. These instructions will help guide you to a great start with breastfeeding. When the baby latches on appropriately, not only does the baby benefit with a good transfer of mother's milk, but mom has a painless breastfeeding experience. There are three major elements to a good latch: mom's positioning, baby's positioning, supporting the breast. A successful latch is successfully putting all the elements together regardless of the size or shape of the breast.

Anatomy



1. Position Mom

- A. Position yourself so that your back is straight from your hips to your shoulders.
 - Use pillows to support your back if need be. If you are sitting in a chair and your feet are not touching the ground, use a stool to rest your feet on.

2. Position The Baby

A. Hold your baby by supporting his back, shoulders, and head.

- Do not rest baby on a pillow. Pillows are meant to support your arm, not the baby. Placing the baby on a pillow will cause the baby to slide down to the tip of the nipple causing a shallow painful latch.



B. Place the baby so that the mother's nipple is in alignment with the baby's nose and mouth area without having to move the breast to the baby's mouth.

- If you have to move the breast to be in alignment with the baby, the baby is not in proper placement.
- The baby should be where the breast is naturally without breast manipulation. Having to move the breast will guarantee the baby to slip to the lower portion of the breast.
- Always position the baby to meet the breast.



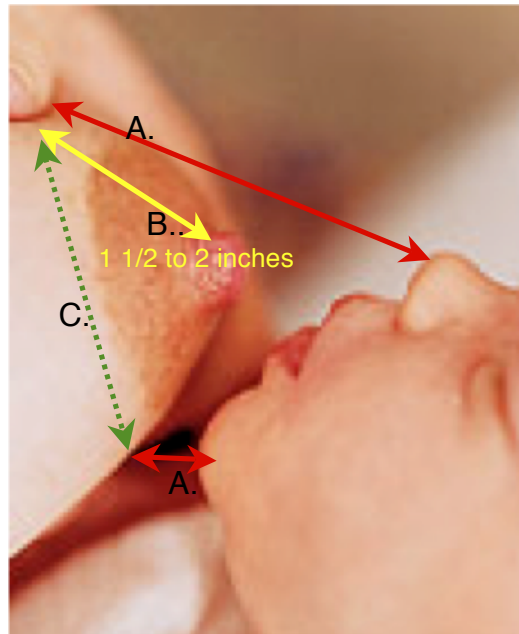
C. Position the baby's entire body facing the breast. His head, body and feet face the same direction.

- His ears, shoulder, hips and ankles should be in alignment.
- He should have full body contact with mom.
- The baby's chin should not rest on the baby's chest. There should be space for the jaw to move up and down while breastfeeding.
- The baby should not have to turn his head or any part of his body to face the breast.



3. Support the Breast

The breasts are very swollen from extra fluid in the body after delivering a baby. This may make it difficult for a baby to latch on. Supporting the breast the first few days after delivery will make it easier for baby to latch on and will ensure the baby obtains a deep latch without causing pain.



- B. You should use your hand to cup your breast so that your thumb is directly across (parallel) from the baby's nose and your index finger is directly across (parallel) from the baby's chin.
 - If the baby is sitting up to breastfeed, the breast will be supported top and bottom.
 - If the baby is laying on his side to breastfeed, the breast is supported side to side.
- B. Place your fingers 1 ½ inches to 2 inches behind the tip of the nipple.
 - The baby's lips need to meet your fingers.
 - If you hold your breast too low, your baby will not have a deep latch and thereby cause nipple pain.
- C. Compress your breast using your thumb and index finger.
 - Compress the breast in such a manner as if you were going to touch the pads of your thumb and finger together.
 - Compress the breast until you meet a natural tissue resistance. This should not be painful. You should not be leaving any indentation marks from your fingers. Compressing the breast allows the baby to have a deeper latch.
 - Your fingers should be directly parallel to each other.

Bringing it All Together to Make the Latch

This requires a bit of coordination with both arms. You will be bringing the baby to the breast and placing the breast into the baby's mouth at the same time. It takes time and patience, but you can do it.

The success of a good latch relies on having the patience to wait for baby to open his mouth wide like a yawn. If you attempt to latch the baby to the breast before a wide open mouth, you may end up with a painful shallow latch. Babies will open wide if given the chance, but as soon as they feel something against their lips, they will close their mouth and latch on.

You are ready to attempt to latch the baby once you have placed your baby in good alignment and position and you are supporting and compressing your breast:

A. Position the baby at the breast.

- Do not lean into the baby. Not only is this not good for your back, but it will facilitate a shallow latch.



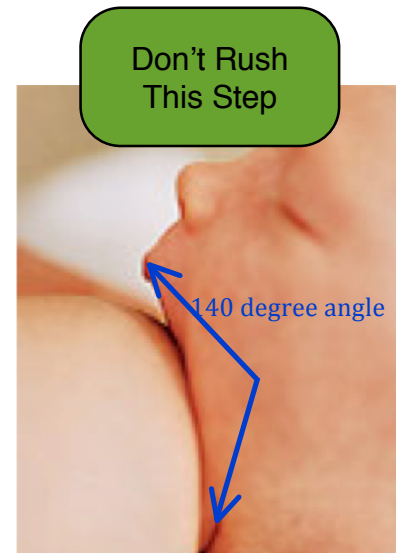
B. While compressing the breast, angle the nipple upwards to tickle the area above the baby's upper lip and just below his nose.

- This will cause the baby to open his mouth wide like a yawn.



C. When the baby opens his mouth wide, move the breast downward from the nose to the tongue while you bring the baby onto the breast.

- Wait for the baby to open his mouth wide. Your baby's mouth will be open at least 140 degree angle.
- Stop the feeding if you feel pain.
- Break the poor latch by inserting your finger into the side of your baby's mouth.
- Attempt the latch again.



D. Maintain the compression while the baby nurses.

- Do not let go of the breast. Letting go of the breast compression while feeding the baby may cause the baby to slide to the tip of the nipple causing a painful latch.
- Your baby needs all the help possible while learning to breastfeed.



Signs of a Good Latch

- Mom is comfortable through the feeding
- Both upper and lower lips are flanged out
- Baby has a deep latch where his lips are at least 1 1/2 to 2 inches beyond the nipple
- Breasts are softer after feedings

Signs of a Poor Latch

- Mom is having nipple pain through the feeding
- Baby falls asleep at the breast
- Baby feeds for extended periods of time
- Breasts are not softer after feedings

Contact me via phone or text if you have any questions or need additional help.
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