



BREASTFEEDING: POSITIONS AND LATCHING

naître
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POSITIONS

To ensure your baby is comfortable enough to nurse, their body needs to be supported and pressed up against yours. This will make them feel safe.



1 THE LAID-BACK POSITION

Also known as the *biological* position. You are relaxed and lying down, with your baby lying on their belly, ideally with skin-to-skin contact.



2 THE CRADLE HOLD

Baby's head rests on your forearm, on the same side as the breast you intend to use. Your baby is lying on their side with their belly against your abdomen.



3 THE CROSS-CRADLE HOLD

This position is identical to the cradle hold, but uses the other arm. If you intend to feed using your left breast, you should support your baby's neck with your right hand, and vice versa.



4 THE FOOTBALL HOLD

Baby is tucked against your side, under your arm. Use your forearm to support your baby's upper body and let their head tilt back slightly.



5 SIDE-LYING POSITION

You and your baby both lie on your sides, tummy to tummy. This position is ideal for night feedings or following a caesarean delivery.

SHOULD YOU VARY POSITIONS?

Not necessarily. If the position you're using is comfortable for you and you don't feel any pain when your baby latches or during feeding, you can maintain the same position.

SHOULD YOUR BABY FEED FROM BOTH BREASTS?

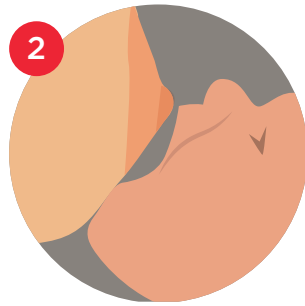
Let your baby feed from the first breast for as long as they want. Offer the other breast if they're still hungry, but don't insist if they don't want it.

FOLLOWING ↓

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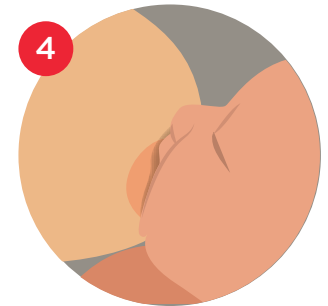
1
If you're supporting your breast, make sure your fingers aren't touching the areola.



2
Press your baby's chin against your breast. This will cause their mouth to open.



3
When your baby opens wide, quickly bring them to your breast by pushing between their shoulder blades with the palm of your hand. Your baby's sucking reflex will be triggered when the nipple touches the roof of their mouth.



4
Once your baby has latched, their chin will press into your breast. Their mouth will be wide open and their nose should be uncovered.

ADVICE FOR PAINLESS FEEDING

To ensure your comfort and an adequate transfer of milk, your nipple needs to go deep into your baby's mouth, reaching the area where the roof of their mouth starts to feel soft. You can feel this area in your own mouth by running your tongue along the roof of your mouth, towards your throat.

SIGNS THAT THE FEEDING IS GOING WELL

1

Your baby is able to suck, swallow, and breathe without any issues.

You can see and hear your baby swallowing. When they swallow, you can also see and hear them pause their breathing.

2

You can see their jaw movements.

At the start of the feeding, they're light and fast. However, when the milk starts to flow, they become slower and deeper.

3

The nipple is always round after feeding.

If it's deformed, that means it's not going far enough into your baby's mouth.

FEEDING SHOULD BE PAINLESS



You may feel some discomfort over the first few days, because your nipples will be more sensitive. Typically, the pain will subside after a few seconds and occurs only during the first week.



If the pain is significant, it could be because you aren't holding your baby in the right position near your breast. You can try gently breaking the latch (by inserting your finger in the corner of your baby's mouth to make them open it) and repositioning them.

If the pain persists, don't hesitate to seek help from a breastfeeding support group, your CLSC, or a lactation consultant.