

Position and Latch for Breastfeeding

Laid-back, cross-cradle, football, and side-lying positions

This handout describes 4 positions for breastfeeding: laid-back, cross-cradle, football hold, and side-lying. Drawings are included to help you see the positions for you and your baby. Your nurses are also ready and happy to help you as needed.

It is best for your baby's first feeding to happen right after birth. That is when babies are usually awake and ready to discover your breast. It is easiest to position your baby at your breast without blankets. Your body will keep your baby warm.

While you are still lying back in the delivery bed, you can gently put your baby on your abdomen with her face near your breast. Many babies will make movements toward your breast and even latch onto your breast without much help.



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If you wish, you can lift your breast toward your baby and let your nipple touch your baby's face. You will probably notice that your nipple stands out a bit. Your breast is getting ready for the feeding.

Wait for your baby to open his mouth wide before bringing him to your breast. Many babies will then take hold and suck for several minutes.

When your baby is latched onto your breast correctly, you will probably feel a strong pulling. Any discomfort should lessen after the first few sucks. If you still feel strong discomfort after the first 30 seconds, your baby is probably not latched correctly and it is best to stop and relatch your baby. See the next few pages for how to help your baby get a better latch.

Tips for Any Position

- Hold your baby's head in the "sniffing position" so her chin is not pushed down toward her chest.
- Encourage wide rooting: Hold your baby at your breast and express drops of colostrum or milk near her mouth and nose.
- You may need to keep your breast "sandwiched" while your baby is trying to latch and during the whole feeding.
- Your baby's mouth should take in more than just your nipple.
- While your baby is sucking, the tip of her nose should be close to or touching your breast and her chin should press in deep. Her lips should be rolled out.
- Sucking is usually rhythmic, with short pauses followed by more bursts of sucking.
- When your baby is done she will stop sucking and usually take her mouth off your breast.

Common Positions for Breastfeeding

Breastfeeding is natural, but it is not always easy. Sometimes getting your baby into position for breastfeeding takes more effort from you, your baby, and your helper. Sometimes babies need more time to learn to latch to the breast and suck properly. Your nurses are here to help you too!

Here are 4 common positions for successful breastfeeding:

Laid-back Position

The *laid-back* position can help you become comfortable with your baby. It also encourages your baby's natural breastfeeding instincts.

- Find a bed or couch where you can lean back and be well supported. Do not lie flat, but just comfortably leaning back. When you put your baby on your chest, and support him with one or both arms, his body should be nested into yours. Make sure that the whole front of his body is against your front.
- Make sure your head and shoulders well supported.
- Let your baby's cheek rest somewhere near your bare breast. Watch for him to show you he is ready to feed. You may see mouth or tongue movements, his hands may move to his mouth, or his head may bob around as he looks for your nipple.

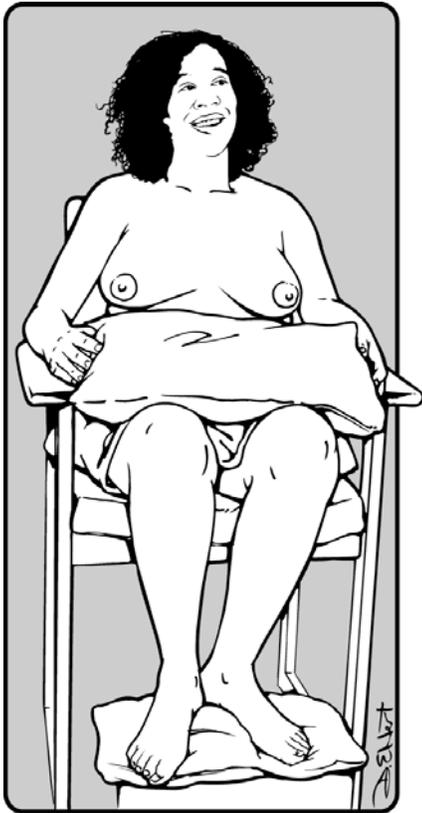


Figure 1: Mother sitting up, getting ready to feed her baby in cross-cradle position.

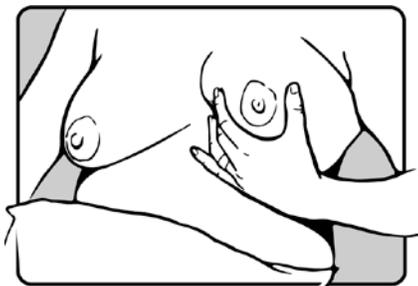


Figure 2: Hand at breast in "U" shape.

- Help your baby as much as you like. Help her do what she's trying to do. You're a team.
- You may need to hold your breast or you may not.
- Relax and enjoy each other.

The next 2 positions are *cross-cradle* and *football*. They can be most helpful if you are having a hard time with latching. It is probably most helpful to read and follow the steps in the order they are written, from start to finish.

Cross-cradle Position

The cross-cradle position allows you to support, prepare, and compress your breast so it will fit better into your baby's mouth. This position also allows you to have control of your baby's head.

Most mothers find that cross-cradle works well for either breast, but for our example we will describe it for your left breast. It is best to have a helper with you to assist with pillows and your baby.

After you are sitting up, place 1 or 2 pillows on your lap. You may need 2 pillows to position your baby high enough so that your baby and your breasts are at the same level.

- It is best to sit up as straight as you can in bed or in a chair (see Figure 1). Take some time to make sure you are as comfortable and relaxed as possible.
- Sit on an extra pillow or use some extra back support if needed.
- Your helper can tend to your baby while you get settled.
- If you are seated in a chair, your feet should touch the floor and your knees should be bent at right angles so you can put a pillow on your lap. Many women find a footstool or a box under their feet helps make this position the most comfortable.
- Scoop up your left breast with your left hand.
- Position your hand under your breast, with your left thumb pointing up along the outer edge of your areola (the dark area around your nipple).
- Curve your index finger around the inner edge of your areola.
- It is important to form this "U" shape with your hand position (see Figure 2). It will help you shape your breast to fit in your baby's mouth.

- With your hand in this position, try to **express drops of milk by pressing your finger and thumb inward toward your chest, then together behind the areola.**
- If you hold that pressure for a moment, you may see some milk. Your baby will smell and taste it. It will help her focus on feeding.
- Next, have your helper stand by your right shoulder.
- Your helper can place your baby (without blankets) on the pillow(s) on your lap. Your baby should be turned on his side with his nose directly across from your left nipple.
- Place your right hand on your baby's upper back with your right thumb and fingers grasping near his ears.
- Do not hold your right arm under your baby. It is your hand that supports his neck (see Figure 3).



Figure 3: Front view, preparing to feed.

- Hold your baby so that his nose is tipped up just a bit. This is sometimes called a “sniffing” position. Your baby’s arms can be free to “hug” your breast, one on either side. Let your baby’s body stretch out on the pillow.
- Your right arm can support your baby from behind so you can pull him in close, skin-to-skin.
- Do not be in a hurry to get your baby to latch on. Hold his head away a little bit so that his mouth is just close enough to tickle his upper lip with your nipple (see Figure 4). This can cause him to open wide to search for your breast.



Figure 4: Sandwiching the breast, waiting for rooting.

- This searching, with tongue down and mouth wide, is called rooting. Your hand stays in the “U” position.
- Compress your breast by moving your finger and thumb together as you did to express the drops of milk. Sometimes this is called “sandwiching” the breast.
- During rooting, when your baby’s mouth is open the widest and her tongue is forward, use your right hand to quickly pull your baby forward. Press on her back, and bring her body toward you (see Figure 5).
- Lead with her chin and keep the baby’s body uncurled in the slight “sniffing” position. She should get a big mouthful of breast.
- Sometimes it takes several tries for your baby to latch on well. If you need to try again, you can break suction by sliding your index finger into the side of your baby’s mouth.
- You will know he is on when you feel a strong rhythmic pulling.
- Make sure that his lips are curled out, the tip of his nose is touching your breast, and more than just your nipple is in his mouth.
- If you are not sure he is latched on well, try letting his head come away from your breast just a little bit. A baby who is latched on well will not let your nipple slip out.

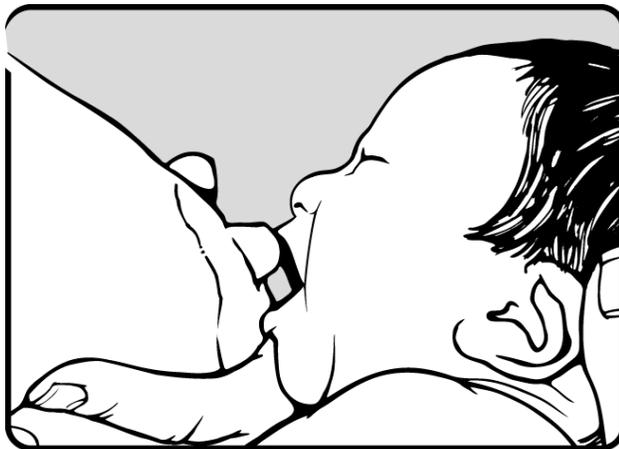


Figure 5: When your baby’s mouth is open the widest, use your hand to bring her body toward you.



Figure 6: A mother’s view of her baby in cross-cradle hold.



Figure 7: Baby in football position.

Football Position

Football position can be helpful if other positions are not working. With the football hold, a helper can easily see what is happening. This position gives you more control of your breast and your baby's body. It can also work well if you are feeding twins.

Football position works best when you are sitting up very straight.

Again, we will explain the position using your **left** breast as an example. It is best for your helper to stand by your left side.

- Sit up as shown in Figure 1 (see page 59). Move the pillow(s) from the center of your lap to the left against your side. Football position is uncomfortable if your baby is too low. It is often helpful to use 2 pillows.
- Scoop up your left breast with your right hand. Your fingers hold your left breast, and your thumb goes on the upper edge of your areola (the dark area surrounding your nipple).
- Make sure that your thumb is across from your baby's nose and your index finger is across from her chin.
- With your hand in this position, try to **express drops of milk by pressing your finger and thumb in toward your chest, then together behind the areola.**
- If you hold that pressure for a moment, you will probably see some colostrum or milk. Your baby will smell and taste that milk and it will help her focus on feeding.
- Have your helper pass you your baby. Place her on the pillow with her feet toward the back of the chair and her head in your left hand.
- Make sure her body is turned toward your breast and supported on the pillow.
- Do not try to hold your baby on your arm. Instead, slide your left hand down to hold the base of her neck, with your thumb and fingers grasping close to her ears (see Figure 7).
- Hold your baby so that her nose is tipped up just a bit. This is sometimes called a "sniffing" position.
- Your baby's arms can be free to "hug" your breast, one on either side.

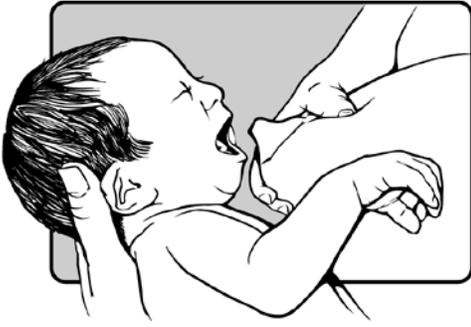


Figure 8: “Sandwiching” the breast in football position while the baby is rooting.



Figure 9: Feeding in football position.

- Do not be in a hurry to get your baby to latch on. Hold his head away a little bit so that his mouth is just close enough to tickle his upper lip with your nipple. This can cause him to open wide to search for your breast.
- This searching, with tongue down and mouth wide, is called rooting.
- Compress your breast by moving your finger and thumb together as you did to express the drops of milk. Sometimes this is called “sandwiching” the breast (see Figure 8).
- During rooting, when your baby’s mouth is open the widest, aim your nipple toward the roof of her mouth.
- Use your left hand to bring your baby’s shoulders and face in close. This will cause her chin to land on the underside of your breast. Quickly finish moving her mouth onto your breast.
- Her top lip should come up beyond your nipple and curl onto your areola.
- Sometimes it takes several tries until your baby gets hold of your breast. You will know she is on when you feel a strong rhythmic pulling.
- Make sure that her chin indents your breast, her lips are curled out, the tip of her nose is close to your breast, and more than just your nipple is in her mouth.
- If you are not sure your baby is latched on well, try letting her head come away from your breast, just a little bit. A baby who is latched on well will not let your nipple slip out.

Side-lying Position

Side-lying position can be helpful for moms who need to lie down for a feeding. You will need a helper for this position at first. Mothers have less control of the baby’s head and less control of their breast. In the hospital, it may be best to have your nurse help you with this position.

This is usually not the best position when latching is a problem. Later, when your baby has learned to latch and breastfeeding is going smoothly, side-lying position is great for night feedings or resting during feedings.

For our example, we will describe the position for your **left** breast. We will use terms you learned earlier in this chapter. You will need a helper and 3 pillows.

- Lie down flat on your left side with a pillow under your head. Turn so far onto your left side that your left breast is on the bed.
- Have your helper place a pillow firmly behind your mid-to-low back.
- Bring your right leg forward a little and bend your knee. Have your helper place a pillow under it.
- Curl your left arm up and place your hand by your face or under the pillow.
- Now your helper should place your unwrapped baby on his right side so that you and your baby are tummy-to-tummy.
- You can place your right hand behind your baby's shoulders, allowing him to be in the "sniffing position." Most women need a helper to "sandwich" the breast while waiting for the baby to latch.
- When your baby is rooting and his mouth is open the widest, quickly guide him forward and onto your breast. He should get a big mouthful of breast. It may take several tries to get a good latch with more than just your nipple in his mouth, lips curled out, and nose touching your breast.
- Once your baby is latched, it is often helpful to place a rolled baby blanket behind him for support.



Figure 10: Feeding in the side-lying position.

Practice Makes It Easier

- Working on the latch in the first week or so is worth the effort. A good latch can prevent nipple damage. And, a baby who is latched properly gets more milk from your breast.
- After some practice sucking in a correct position, your baby will probably need less and less help latching. Soon, you will put your baby close to your breast and he will just do it!

Questions?

Your questions are important. If you have questions about breastfeeding, call UWMC Lactation Services: 206.598.4628

