

Winning the Baby back to the Breast

QUESTION: I did not manage to put my baby to the breast much while I was in hospital, and I was discharged 3 days before him. I expressed about 4 times a day for him. Now he's 10 days old and back home. I have great difficulty breastfeeding him - he cries so pitifully after about 5 minutes of suckling and sometimes won't even take the breast. I have resorted to pumping out my milk for him, but I don't seem to be able to collect much. I am so disappointed as I hoped to breastfeed him for at least 6 months since I resigned to look after him myself. Will I have to express all the way for him?

>ANSWER: I can understand your frustration. There are several factors that have contributed to your difficulty. First, your baby hasn't had a good chance to really suckle at the breast, and he seems to have become more accustomed to the bottle. Secondly, before he came home, you expressed your milk about four times a day for him - this is actually under-expressing. Newborns feed very frequently, at about two-hourly intervals. Mom would thus need to express her milk at about that frequency to approximate baby's demand and to generate sufficient milk supply. Now that he's home, when you put him to the breast, he is expecting the fast flow he used to get from the bottle, so he is frustrated at the slow trickle of milk coming from your breast.

There are two areas you need to work on. The first is to increase your milk supply, and the second is to help your baby get back to suckling at the breast - an effort well worth your while since you plan to breastfeed for many more months.

One approach is to demand-feed him constantly at the breast for the next two weeks. As your supply is low at the moment, expect that he will want to feed at very short intervals - sometimes even half-hourly. Lie with him and let him suckle lying down if such frequent feeding tires you. The advantage of this approach is that it is direct. The milk can come back quite quickly. The disadvantage is that it may be unnerving - baby may cry quite a lot because he gets his feeds in small amounts at a time.

In the second approach, baby has to be gradually won back to the breast. If he is not willing to suckle directly because of the initial slow flow, offer him some expressed breastmilk (ebm) first (or supplement if you have not collected much ebm) to take the edge off his hunger. Offer less than he needs to send him to sleep, because you will want to put him on the breast for the last part for him to comfort-suck to sleep. This is to keep him in touch with suckling. With this approach, baby is not stimulating you enough with direct suckling, so you will need to express two-hourly for fifteen to twenty minutes each time. A pump is helpful if you are expressing so frequently. Collect whatever you have in that time, and even if the milk is not dripping any more, continue pumping the full period to stimulate the breast. Bear in mind that your body takes at least two days to respond to a change in demand, so the first few days of regular expressing may not have much to show for it, but persevere on, and you will reap the rewards eventually. As your supply increases, decrease the amount offered to baby, and put him on the breast longer for him to do his own suckling. As he suckles more directly, you will also be expressing fewer times, to allow him to do his own work. This approach will probably take longer to get him back fully on the breast, and you will need to juggle the direct and supplementary feedings.

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