Breastfeeding is the most natural way to feed your baby. When placed at the breast, a newborn already knows how to suck and swallow. But, for new moms, breastfeeding is a skill that is learned. Breastfeeding can be challenging at times, especially in the first week or two. But, with patience, practice and support, breastfeeding will become a comfortable and enjoyable experience for mom and baby.

Sore Nipples

Tender nipples are common during the first week or two of breastfeeding. Tender nipples most often happen when baby does not latch on correctly, and is sucking on the nipple only. But, once mom and baby learn how to latch on correctly and try out new breastfeeding positions, breastfeeding becomes comfortable and enjoyable. If you are dealing with sore nipples, check your baby’s latch first.

Check the Latch

If baby is sucking on the nipple only, gently break the suction by placing a clean finger in the corner of baby’s mouth between the lips and gums. To get a good, deep latch, tickle baby’s chin so that his mouth is open wide, then bring baby’s chin and lower lip towards the areola.

Hold baby so that his ear, shoulder and hip are in a straight line while feeding. This position helps baby latch on correctly. Once on the breast, look for these signs of a good latch:

- Baby’s mouth looks wide open and both of baby’s lips are rolled out.
- Baby’s nose is touching or nearly touching your breast.
- Most of the areola is in baby’s mouth.
- After breastfeeding, your nipples look the same as they did before the feeding (not flattened).

Engorgement

Engorgement is when the breasts feel and look very full. They may even become hard, hot and painful. This happens when the breasts are not drained often enough. Engorgement needs to be treated right away. When left untreated, engorged breasts can become very painful and even damaged. The best way to prevent engorgement is to make sure baby is breastfeeding well at least 8-12 times every 24 hours. If baby is not feeding well, a hospital-grade breast pump should be used to empty the breasts. Engorged breasts can make breastfeeding a challenge. But, there are things you can do before, during and after a feeding to help.

Before feeding: If breasts are too full for a good latch, hand express some milk before offering the breast to baby. Apply warmth to the breasts either with a warm compress, or warm water in the shower right before feeding to help the milk flow and relieve pressure.

During feeding: Gentle compression or breast massage during feedings will help to empty the breast.

After feeding: If breasts still feel full after a feeding, use hand expression or a hospital-grade breast pump to empty the breast. Apply cold after feeding to reduce swelling in the breasts.

If engorged breasts become painful, or you have any signs of an infection, fever, redness or swelling, contact your doctor or lactation consultant right away.