

Wees and poos – the best clues!

Keeping an eye on your baby's wees and poos is the easiest way to be sure he is getting plenty of milk. **Wees are the best guide to how much milk your baby has had in the last six to 12 hours. Poos (together with wees) are the best guide to how much milk your baby has had in the last 24 hours.** The following grid shows you what to expect.

If your baby is weeing or pooing less than this, or if his poo isn't runny and yellow by day five, contact a midwife.

Wees and poos in the first five days

Day after birth	Wee		Poo	
	Appearance	How many times in 24 hours	Appearance	How many times in 24 hours
1st	Pale yellow. May contain pinkish spots	At least 1	Thick, sticky, greeny-black	At least 1
2nd	Pale yellow	At least 2	Less sticky; more yellowy-green ('changing stool')	At least 2
3rd	Pale yellow	At least 3	Runnier and more yellow	At least 2; probably 3 or more
4th	Pale yellow	At least 4	Runnier and more orangey yellow	At least 2; probably 4 or more
5th	Pale yellow	At least 5	Runny; orangey yellow (like korma sauce or yellow mustard)	At least 2; probably 5 or more
After this	Pale yellow	At least 6	Runny; orangey yellow (like korma sauce or yellow mustard)	At least 2; probably 6 or more (until at least 4 weeks, when they may be less frequent)

For support with breastfeeding or to find your local breastfeeding support group call the National Breastfeeding Helpline on 0300 100 0212 between 9.30am and 9.30pm.

For more information see *Baby-led Breastfeeding: How to make breastfeeding work with your baby's help* by Gill Rapley and Tracey Murkett, published by Vermilion.

By the same authors: *Baby-led Parenting: The easy way to nurture, understand and connect with your baby*, *Baby-led Weaning: Helping your baby to love good food* and *The Baby-led Weaning Cookbook*, also published by Vermilion.

www.baby-led.com

Baby-led Breastfeeding

Follow your baby's instincts to make breastfeeding easy



Breastfeeding is the best way for your baby to feed, providing protection against illness, laying the foundation for a lifetime of good health and helping to build a strong bond between you.

Baby-led breastfeeding is the key to getting a great start because it:

- * allows your baby to use her instincts and innate abilities
- * helps you to understand your baby's needs
- * helps your baby to feel secure and confident
- * ensures you make plenty of milk for your baby
- * helps you avoid many common breastfeeding problems
- * helps breastfeeding to be relaxed and enjoyable

First feeds

When your baby is new, holding him against your bare chest or tummy, with your skin against his skin, is very important. It triggers the hormones and reflexes that tell your breasts to make milk and help you both to start bonding, while keeping your baby warm, and both of you calm. Your baby will instinctively want to find the breast (although he may not feed straight away) and this is likely to be easiest if he is lying on top of you while you lie back, semi-reclining, on a bean bag or propped up on some pillows. That way he can ‘crawl’ (using his arms, legs and head) into a position where he can feed when he is ready.

It’s a good idea to have as much skin-to-skin contact as possible in the first few weeks, so that your baby can feed instinctively, whenever he wants to, helping him to quickly get the hang of breastfeeding as well as making him feel safe and loved.

How breastfeeding works

Baby-led breastfeeding is about responding to your baby. This means letting him feed as soon as he asks, waiting until he lets go of the first breast, and then offering him the other one. Feeding this way ‘tells’ your breasts how much milk they need to make. Trying to keep to a schedule, giving bottle feeds or drinks of water or using a dummy can all mean your baby won’t get enough milk.

Breastfeeding provides babies with comfort, warmth and security as well as food and drink. It’s impossible to overfeed a breastfed baby, so you can’t offer your baby the breast too often. Keeping him close, 24/7, will allow you to spot when he wants to feed before he gets upset.

Essentials for helping your baby to feed

To feed effectively, and to avoid damaging your nipples, your baby needs to attach to your breast with a wide-open mouth. This will be easier for him if he is held CLOSE to you, with:

- * as much of his body in contact with yours as possible (check for gaps – his chest and hips should be touching you; pull his bottom in close)
- * his whole body in line (i.e. with his knees facing the same way as his nose)
- * his body weight supported (neck, shoulders and hips)
- * his head and arms free to move, and
- * his nose lined up with your nipple (‘nose to nipple’, see photo 1).

As long as you keep these principles in mind, your baby can breastfeed in any position that suits you both. For example: with you lying back and him lying on top of you, with you sitting and him lying across your front or on a cushion by your side, or with both of you lying facing each other on a bed. You may even find that breastfeeding is possible with your baby in a sling.

Breastfeeding shouldn’t be painful

Your nipples should be the same shape and colour after your baby has fed as they are normally. If breastfeeding hurts or your nipples seem damaged, get help as soon as possible (see back cover). Pain usually means that your baby isn’t latching on to your breast effectively – the sooner you can help him to change this, the more quickly the problem will be sorted out.



Signs that your baby wants to feed

There are many signs that will tell you your baby wants to feed:

- * Moving her eyes under her eyelids
- * Moving her head and stretching her neck
- * Making gentle wriggling, squirming and waving movements
- * Clenching and unclenching her fists
- * Opening her mouth
- * Making sucking noises or smacking her lips
- * Murmuring, squeaking, whimpering or giving little shouts
- * Sucking her fists/clothes/blanket, or your T-shirt/jumper

If none of these gets your attention, she will cry. Crying will make it harder for her to feed effectively so it’s best to respond to her before that happens.

Baby-led breastfeeding in a nutshell

Here’s what baby-led breastfeeding means:

- * **Frequent:** day and night – expect your baby to feed *at least* eight times every 24 hours in the first two weeks (and probably more, especially if some feeds are very short) and *at least* six times every 24 hours after that.
- * **Effective:** with your baby attached with a big mouthful of breast (see photo 3), so she can get milk easily. She won’t get much milk if she sucks just on the nipple, and it will probably be painful for you, too. (Bottles and dummies are best avoided in the early weeks – they can make it much harder for your baby to learn to breastfeed.)
- * **Exclusive:** with your baby having only your milk – no other drinks or food, not even water. That way your milk production will adjust to meet her needs.
- * **On Demand:** whenever your baby asks (see overleaf) – or sooner, if she’s sleepy or your breasts are becoming uncomfortably full – and for as long as she wants each time. (Try to avoid using a dummy – it may stop you noticing when she wants to feed.)
- * **Skin to skin** as much as possible, in the early weeks.

Just remember: **F–E–E–D–S!**