



Gaining, Gulping, Grimacing?

Is your baby thriving . . . but nursing is a struggle? Do these sound familiar?

1. My baby chokes and gulps and splutters when she nurses.
2. My baby “wrestles” with my breast, pulling off, crying, tugging, arching.
3. My baby has lots of wet and poopy diapers.
4. My baby is colicky, or gassy, or spits up frequently.
5. My baby sometimes—or always—has frothy or greenish stools. Some diapers may have a little blood.
6. My baby is gaining rapidly, or grew fast at first with weight gain dropping as fussiness increased.
7. My baby rarely falls asleep at my breast; nursing is an athletic event.
8. My baby will nurse only for food, not for comfort. My baby grimaces when she nurses.
9. My baby often seems to have uncomfortable intestines.
10. I try to make a point of nursing on both breasts each time.
11. If it’s been less than two hours, I look for some cause for fussiness other than hunger.

Those can mean a baby who’s getting “too much soup, not enough cheesecake.” The milk that builds up in our breasts between feedings tends to be a lower-fat milk, changing gradually from “soup” to “cheesecake” through the feeding. If we have too much milk, she may not get through all the soup at one sitting. If we switch breasts partway through the nursing “to make sure she takes the other side,” or if we try to space our nursings to two hours or more, that can mean the baby plows through a whole lot of soup and never gets much cheesecake. She grows fine. But without the extra fat, milk travels fast through her intestines, doesn’t break down fully, and can ferment in her large intestine, causing gas, discomfort, and frothy green stools.

And then there’s the fire hose effect. All that milk can squirt into your baby’s mouth, making her feel she must swallow or drown. Not much fun. You may find your baby is happier and more settled if you let her “get to the bottom of the barrel,” where the cheesecake is, by doing two things:

- Offer to nurse whenever she shows interest, even after just a few minutes. Shorter intervals mean the higher fat milk is still there.
- If she’s happy on one side, leave her there. If that side isn’t nice and soft afterward, use it again next time. Using one side for a couple hours may be all it takes. Some need to spend four to six hours on one side before using the other. Use your instinct more than the clock. The over fullness on the other side cuts back production, which is what you want. If you’re too overfull, nurse or express just enough for comfort, then go back to the side you’re trying to soften.

These sound like rules, but they’re just temporary reminders to help you get past two ideas that may have started the problem—making a point of switching sides, and delaying feedings.

As your supply settles down, you may worry that you’ve “lost your milk.” No more heavy, leaking breasts or choking. If your baby is still getting lots of wet and poopy diapers, and looks relaxed and comfortable during and after nursing, these are signs of good milk supply. If she wants to increase it, all she has to do is nurse more often, or start taking both sides sometimes. Trust her, and trust your body.

You should begin to see a happier baby and easier feedings within a few days. If not, check with an LLL Leader or visit lli.org for more ideas.