

Having challenges with breastfeeding?

Strategies to assist and identifying difficulties when breast feeding

There is a lot to learn when baby first arrives, and it may take some time before you feel confident with breastfeeding. It is common to have a few challenges when learning to breastfeed however these will generally improve in time. It is important to get good quality advice and guidance if problems arise or persist.

Possible reasons for challenges with breastfeeding

There can be several possible reasons for feeding challenges, and these might include:

- Position of mother and baby that does not allow for a deep, comfortable latch at the breast
- Long labour, very quick labour, forceps or vacuum assisted birth, caesarean birth
- Some medications used in labour
- Mother's breast or nipple features
- Milk flow (low or over supply)
- Medical conditions of mother or baby
- Baby's condition at birth
- Baby is preterm, late preterm or early term
- Features of baby's mouth

A shallow latch at the breast is the most likely reason for painful and ineffective breastfeeding, and if not corrected it can also lead to low breast milk supply.

When to get more help

Breastfeeding discomfort may be improved through adjustments in feeding position to allow for a deep latch. However, if you are having challenges with feeding baby and feeding continues to be uncomfortable/painful, seek advice and support **early**.

Having a qualified health professional (such as an experienced midwife or lactation consultant) observe you and baby feeding *together* is the best way to identify and address possible breastfeeding issues. Most of the time, with this support, these issues can be resolved.

What to do to keep breastfeeding "on track"

If you are experiencing challenges with breastfeeding and you are waiting to see a lactation consultant/ midwife/ child health nurse, here are a few tips to protect breastfeeding:

- Keep feeding baby at the breast if it is comfortable to do so
- If you are unable to continue feeding at the breast, protect your milk supply by expressing your breast milk, at least as often as baby needs to feed (usually 8 or more times in 24 hours)
- Expressing your milk by hand or pumping after feeds will also help to increase your breast milk supply



Consumers contributed
to this information.

Could it be a tongue-tie?

Has someone told you that your baby has a tongue-tie? Or perhaps you think baby has a tongue-tie?

Ankyloglossia, also known as a “tongue-tie”, is a condition where the frenulum (an important structure between the tongue and the floor of the mouth) restricts the movement and function of the tongue.

Assessing any infant feeding issue, including possible tongue-tie, can only be done if you have a breastfeed assessed by a skilled health professional, preferably a lactation consultant. They will review your birth history, watch a breastfeed, check baby’s growth, assess baby’s tongue movement and support you to access further assistance and treatment if necessary.

It is important to know that a tongue tie cannot be diagnosed by how it looks e.g. by photo or appearance of the baby’s mouth. Only qualified health professionals can make a thorough assessment by observing a breastfeed and tongue function, and they will suggest further steps if required.

Where can I get further help and information?

If you are breastfeeding and you feel that feeding is not progressing well, it is recommended that you seek advice and support from a lactation consultant **as soon as possible**.

Other support services include:

- Lactation Services and midwives at your baby’s birth hospital
- Your baby’s GP
- 13 HEALTH and local Community Child Health Clinics
- Australian Breastfeeding Association – 1800 MUM 2 MUM/1800 686 2 686 or www.breastfeeding.asn.au

For more information about tongue-tie:

- Australian Breastfeeding Association – Tongue-tie and breastfeeding (includes a video) <https://www.breastfeeding.asn.au/bf-info/tongue-tie>
- Australian Dental Association – *Ankyloglossia and Oral Frena Consensus Statement* <https://ada.org.au/policy-statement-2-13-ankyloglossia-and-oral-frena>
- Cochrane Database of Systematic Reviews – *Frenotomy for tongue-tie in newborn infants* <https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD011065.pub2/full>