

When breastfeeding is getting off to a slow start: parents' guidance



Introduction

This guidance leaflet is for parents whose baby is getting off to a slow start with breastfeeding. When this happens it is often not what you have expected, and you may find it worrying and frustrating. A slow start to breastfeeding is not uncommon and in most cases you and your baby will soon get the hang of breastfeeding, but it can take a few days or occasionally even a few weeks.

When breastfeeding is getting off to a slow start there are four important things:

- Making sure your baby gets enough milk
- Making sure that mum's breasts get plenty of signals to make milk
- Giving your baby lots of opportunity to get familiar with the breasts and learn to breastfeed, in a calm, unhurried atmosphere
- Keeping calm, positive and finding time to enjoy your baby


The slow start pathway

You and your baby will have been put on to the 'slow start' pathway if your baby has not had a first feed within four hours from birth or had a second feed within six hours of birth. This is not because we are worried about you or your baby but because there are some simple things that you can do now, which will make life easier for you later. It might be that your baby wakes up and feeds well and frequently very soon, in which case you will be off the pathway and following your baby's baby lead (we call this feeding responsively).

Making sure your baby gets enough milk

Healthy babies who are born around the time they were due manage well without feeding for a day or so, they have plenty of stores of sugar and fat and can use these efficiently. Midwifery staff will be keeping an eye on your baby to make sure he or she is well.

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You can help with this too, your baby will be warm, pink, have good tone (not be floppy), and will wake up when you ask her/ him to, such as when you change his or her nappy.

Help for your milk supply

To have the best possible chance to make enough milk for your baby your breasts need to receive lots of signals to make milk. Normally this happens when your baby feeds, if your baby is not feeding you need to give these signals directly to your breast by **hand expressing**, massaging your breasts and gently touching your nipples. This stimulates your body to produce **prolactin** the milk making hormone.

You need to express your milk 10-12 times in 24 hours. It does not need to be at 2 hourly intervals, you can do it every hour for a few hours and then have a longer break if you need some sleep. Your body makes more of the milk producing hormone (prolactin) at night, so make sure you express at least once during the nighttime.

The most efficient way to express your milk in the first 2 days is to **hand express**. Your midwife will teach you this. Make sure that you massage your breasts and twiddle your nipples first. It may be that you do not see any colostrum (that's the name we give to the first breastmilk) or only a few drops, that's not a problem. Your baby is fine without milk and the reason you are doing this is to tell your breast to make milk. Over the next few expressing sessions, you should start to see more colostrum. Hand expressing is a bit of a knack, you need to find the right place to on your breast to compress your milk ducts. Ask staff for help if you need to, but we do not recommend that they do it for you.

If you do not want to hand express or after a few tries do not get on with hand expressing, you could try the breast pump. Make sure you do breast massage and nipple twiddling before you pump to get plenty of breastfeeding hormones flowing.

How much colostrum to give your baby?

Give your baby as much colostrum as you have, it is a very concentrated form of nourishment and full of things that help protect your baby from infection. Give all you have and keep expressing to ask your body to make more. If your baby is still not feeding at the breast on day 2 (when your baby is between 24 and 48 hours old) you should be getting off larger volumes of colostrum than on the first day. The more colostrum you can give to your baby the better, so express as much as you can manage.

How to give the colostrum

When there are small amounts, a few drops up to 5 mls, we will teach you how to do this using a syringe. It is important to give the milk drop by drop into the side of your baby's cheek and not squirt it in, as your baby could choke.

When you have more than 5 mls to give at one time then you can move onto giving your baby colostrum by a cup. If you want to use a cup as staff for help so that you learn to do that safely. If you are giving your baby volumes of more than 20 mls then you have two options:

- Continue cup feed
- Giving your baby your milk by bottle

Some people worry that if their baby gets used to a bottle it may make it difficult to breastfeed later. This might be true, but there does not seem to be any evidence for this. You can decide what suits you and your baby best.

How to tell if your baby is getting enough milk

You can tell that your baby is getting enough milk by looking in his/her nappies and by his /her weight.



Nappies:

- In the first 48 hours, your baby is likely to have only 2 or 3 wet nappies. Wet nappies should then start to become more frequent, with at least 6 every 24 hours from day 5 onwards
- At the beginning, your baby will pass a black tar-like poo (called meconium).
- By day 3, this should be changing to a lighter, loose, greenish poo.
- From day 4 and for the first 4 – 6 weeks, your baby should pass at least 2 yellow poos a day.
- If your baby has not pooped in the last 24-48 hours, speak to your midwife or health visitor as this may mean they aren't getting enough milk.

Weight:

We weigh some babies on day 3 after birth and all babies on day 5 after birth. All babies lose some weight, an average of about 6-7% of their birth weight. If your baby has lost more than this, we will make a feeding plan, which may involve formula milk if you have not got plenty of milk yet.

Learning to breastfeed

Both mums and babies have instincts to help them to breastfeed. To make the most of these mums and babies need lots of time in a relaxed environment in skin contact. Think of your baby in skin contact, all warm and cosy feeling safe and secure between mum's breasts, it might be like being in warm cosy kitchen, smelling what's for dinner.

There are lots of positions for breastfeeding and midwifery staff will show you these and you can work out what you and your baby seem to like best. For babies who are slow to learn to breastfeed, laid-back type positions are good because they stimulate lots of feeding instincts and involve less handling of your baby which can be helpful.



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Really great information on the basics of learning to breastfed is available at:

[Off to the best start leaflet - Baby Friendly Initiative.](#)

This will have been sent to you in your Badger Notes

¹ Thanks to Public Health Wales for permission to use this drawing



When to go home

It is usually not a good idea to go home from hospital before your baby has had at least two or three good breastfeeds; we like to be on hand to help you when your baby starts to show interest in feeding. Once you are ready to go home there will still be help available from your local community midwifery team who will see you the next day.

If your baby is still struggling with feeding, then you will need to continue expressing your breastmilk. If you have had a breast pump in the hospital, then you can take home the attachments as you may buy yourself / or rent a pump that used these parts

If you do not have a breast pump and it is difficult for you to buy one for yourself let us know and we may be able to help you for a short while. You can also hire breast pumps

- Symphony Rental Breast Pump | Hospital Grade | Medela UK
- Rent a Breast Pump

Ongoing support for difficulties that do not resolve

Most babies who have a slow start make up for lost time and quickly become good feeders. If this is not happening and you feel the need for extra support, please ask your midwife to pass your details onto the specialist infant feeding and nurture team who will contact you.

You can always contact maternity services on our central contact number

For all other Maternity enquiries, please call our central contact number:

01225 826454

Helplines

- National Breastfeeding Helpline: 0300 100 0212
- Association of Breastfeeding Mothers: 0300 330 5453
- La Leche League: 0345 120 2918
- National Childbirth Trust (NCT): 0300 330 0700
- The Breastfeeding Network supporter line in Bengali and Sylheti: 0300 456 2421

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If you would like this leaflet in email form, large print, braille or another language, please contact the Patient Support and Complaints team on 01225 825656.

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