



**Oxford Health**  
NHS Foundation Trust



Children and Young People 0-19 Service

# **Helping your breastfed baby get all the milk they need**

# Feeding your baby

Milk supply is established and increased by regular and effective milk removal.

Steps 1-7 are for every mother/parent and baby. Some of steps 8-16 may be advised by your feeding supporter, Health Visitor or Family Nurse

## 1. Be sure your baby is latched on well

Good attachment at the breast is key to good effective milk removal.

Signs of good attachment include:

- ✓ wide gape
- ✓ chin indenting the breast
- ✓ head slightly tipped back.

Feeding is more effective when your baby is positioned facing the breast with its head, neck and body in line and is in close contact with mum and well supported.

Feeding should be comfortable, seek skilled support if discomfort continues.

Be sure that baby is actively swallowing and you should be able to hear or see this.

Look for deep, rhythmical, jaw dropping movements, with pauses, that are sustained for a period of time.

This is more noticeable after your mature milk volume has increased around day 4.



This video demonstrates active feeding and is available in many languages:

<https://youtu.be/LX1fl8NtTuw>

## 2. Feed frequently

Your baby will usually feed 8 – 12 times in twenty-four hours, after the first twenty-four hours.

The more often the breasts are stimulated, and milk removed, the more milk they will make.

Follow baby's feeding cues, which include

- tongue darting
- lip smacking
- hand sucking
- head bobbing

Do not try to schedule feedings, feed responsively – responding to you and your baby's needs.

Crying is a late hunger cue.

### **3. Offer both breasts at each feed**

This will ensure that your baby gets all the milk available and that both breasts are stimulated frequently.

Allow your baby to indicate they are finished on the first breast and then offer the other breast.

### **4. Keep your breast/chest the happy place**

Try to reduce stress levels. If trying to latch becomes stressful, stop and reset!

Have a cuddle, walk and rock your baby or give them to someone else when possible if you need to breathe and relax.

Remember your body needs oxytocin for the milk to flow.

### **5. Sucking needs to be at the breast**

This is where your baby will be getting food and stimulating your breasts to make milk.

Try and avoid using a dummy in the first 6 weeks as it could result in missed feeding cues and feeding opportunities.

## **6. Skin-to-skin is always valuable and helps support breastfeeding**

It stimulates your baby's neonatal feeding reflexes; it increases your oxytocin and is an opportunity for you and your baby to connect. It is your baby's natural habitat.

## **7. Keep your baby close**

Your baby will have easy access to the smell, taste and feel of your body and milk.

This can help you be responsive to your baby's feeding cues so they may feed better.

Some baby carriers, slings or wraps are a great 'hands free' way to keep your baby close. For safety reasons babies shouldn't be fed hands free.

Keeping your baby close and responding to their needs for comfort and closeness helps their brains wire optimally by keeping stress levels low and love hormones high.

# Breast compressions and switch feeding

Some babies are sensitive to milk flow and can lose interest in feeding when the flow slows, but before they have had enough milk.

Breast compression and Switch feeding can help your baby to get more milk at the breast and can increase milk supply.

## 8. Breast compression

This helps to keep your baby interested in nursing and increase fat consumption.

- Squeeze the breast firmly with your thumb on one side and fingers on the other to increase milk flow.
- Hold the pressure and keep squeezing until your baby is no longer actively sucking; then release.
- Rotate fingers around the breast and squeeze again.
- Squeeze firmly but be careful not to cause injury to your breast tissue.

Breast compressions also help when pumping to increase the volume of milk pumped, this is called hands on pumping.

## 9. Switch feeding

This can help your baby actively feed for longer by taking advantage of the first stronger milk ejection.

As your baby's jaw dropping movement slows, and before they go into a deep sleep, switch to the second breast for as long as they actively feed and then return to the first again.

The baby can nurse at each breast several times during one feed. Do this until your baby is fast asleep or at least for 30-40 minutes

## Expressing

Frequent effective milk removal (8 -10 times in 24 hours, never a longer gap of 4-5 hours and making sure you pump at least once between 1-5 am) is key to increasing and maintaining a full milk supply.

If a baby is not able to do this well enough or weight gain has not been at the expected rate, expressing milk can be an effective way to increase milk supply.

It also provides additional milk if you need to supplement.

# Expressing can be done by hand or with a pump

## 10. Hand expressing

Some parents find it helpful to massage their breast/chest before expressing.

You may find it helpful to work from the outside of the breast/chest and massage towards the nipple.

Try to take care not to drag your skin. You can try making circular motions, stroking with your fingers or rolling with your knuckles.

To start expressing:

- i** Make a 'C' shape with your thumb and fingers.
- i** Start at the nipple and gently feel back 2 to 3cm towards the chest wall or until you find a change in breast tissue texture.
- i** Once you find the change in texture, gently compress your breast between your thumb and fingers.
- i** Repeat this in a rhythmic movement. Some people find pressing towards your torso as you compress helps the flow of milk.

- i** You may need to do some trial-and-error to see how far back from your nipple you need to compress. Everyone is different!
- i** Keep the milk flowing for as long as possible.
- i** When the milk flow slows, you can re-position your fingers and thumb (like you're moving them around a clockface).
- i** You can then express a different area of your breast. Try to express all areas of your breast and alternate between breasts.
- i** For a video demonstration and explanation see here:  
<https://youtu.be/axQi5PqRZ0M>



This video is available in multiple languages.

## 11. Expressing with a pump

Always use the highest setting that is comfortable and make sure the flanges are the correct size.



This is a useful Guide developed by Babies in Common

<https://healthinnovationwessex.org.uk/img/projects/The-Flange-FITS-Guide-for-optimal-comfort-efficiency-and-milk-yield.pdf>

Try not to assess each pumping session individually. It takes a while for the supply to build up, so don't expect results straight away.



For more information you can watch this video <https://vimeo.com/1048952527>

## **12. Maintain high levels of oxytocin in the environment**

Have a cuddle before pumping, make sure your body is warm and you feel relaxed and comfortable.

Cover the bottles of the pump with socks to stop you from counting every drop.

Look at the pump as a friend who is allowing you to give your baby your milk.

## **13. Hands on pumping**

Using your hands to massage, compress and release your breast whilst also using breast pump is called hands on pumping.

Research has shown that this can significantly increase how much milk you express.

## **14. Pumping after a feed**

Pump for 10 min after your baby has finished feeding.

The more milk is removed from the breast the more and faster your body will produce milk.

Don't worry if not much milk comes out. Continuing doing this will increase your supply.

You are putting in an order for the next feed.

## **15. Full pump session**

Pump for 20 minutes on each breast or use a double pump.

Follow the indications on point 11 (At least 8 times in 24 hours, never a longer gap of 4-5 hours and making sure you pump at least once between 1-5 am).

Allow at least one hour since baby stopped feeding

## 16. Hand expressing after pumping

The milk at the end of a feed is thick and sticky and may not be removed by the pump.

Some parents find that hand expressing after pumping helps remove more milk and increase their supply.

### Understanding what you might expect

Your baby may lose weight during the first three or four days and from day 5 we expect steady weight gain.

They should regain their birth weight by the time they are 21 days old, but usually it is sooner.

After that, they should gain weight at a consistent rate and follow a curve on the weight chart in their red book.

By day 5 your baby will be feeding 8 -12 times in 24 hours.

You can expect 5 – 6 really wet nappies per day plus a minimum of two bowel movements of at least as big as a £2 coin.

The stool should be runny, yellow and no longer black or green.

Around 6 weeks old they may poo less often and still gain weight well but until then poo is a good way to check how much milk is going through.

Your baby's behaviour will tell you that they are satisfied and full.

They will come off the breast spontaneously and will seem contented.

This applies when the baby is being held, not being able to put the baby down, is not necessarily an indication of feeding issues.

For lots of useful links and videos.

Please visit: <https://www.oxfordhealth.nhs.uk/hv/0-1/feeding/>

Or follow the QR code



Whilst in this leaflet we use the language of 'mother' and 'breastfeeding' we acknowledge that not all birth parents identify as mothers and would sometimes prefer language such as 'chest feeding'.

Please speak with us about your chosen pronouns and language choices and we will use these respectfully throughout your care with us.

This leaflet is intended for families receiving care in Oxfordshire and has gratefully been adapted from content produced by the University Hospitals Sussex NHS Foundation with their permission.

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# Accessibility

An accessible version of this leaflet can be found on our website: [www.oxfordhealth.nhs.uk/leaflets](http://www.oxfordhealth.nhs.uk/leaflets)

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## Feedback

Our Patient Advice and Liaison Service (PALS) provides advice and support to patients, families, and carers, helping to resolve any problems, concerns, or complaints you may have.

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