



A small breastfeeding guide

Simple breastfeeding –
tips for an enjoyable start

www.afs-stillen.de



AFS

Arbeitsgemeinschaft Freier Stillgruppen
Bundesverband e. V.

Simple Breastfeeding

Dear mother, dear parents! We would like to provide you with the most important information about breastfeeding in the first days after birth. Our aim is to make the beginning easier for you and lay the foundation for a good breastfeeding relationship.

Even during pregnancy, the breast prepares to nourish a baby. After birth, milk is immediately available in the form of colostrum (first milk/pre-milk). It is thick, yellow to orange in color, and very filling. Despite appearing in small quantities, it is sufficient to satisfy the newborn. A newborn's stomach is about the size of a cherry, holding only the amount of milk produced by the breast after birth.



CRADLE HOLD

For the cradle hold, position your baby across your abdomen so they comfortably reach the breast. Maintaining an upright sitting position is important to prevent backaches.

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In the first days, the existing breast milk is sufficient to nourish the baby. Therefore, pumping or supplementing with a bottle is generally not necessary!



THE SIDE-LYING POSITION

Breastfeeding in the side-lying position is particularly advantageous because the mother can rest or sleep in this position.

Once the milk “comes in” around three to six days after birth, the baby’s stomach expands to handle larger milk volumes.

Breastfeeding takes practice—from both mother and child! Despite the baby’s natural sucking instinct, they must learn to feed from their mother’s breast. Similarly, the breast must adapt to its new role in nourishing the baby, anticipating the milk letdown soon.

It’s crucial now to breastfeed on demand—whenever the baby shows early hunger cues or begins to seek the breast. This might mean frequent, shorter intervals between feeds.

Here are some tips for breastfeeding on demand:

- **Nurse frequently** (every 1 to 2 hours)
- **Offer both breasts** (start with the breast that was given second last time)
- Only nurse as long as **the baby is sucking well** to prevent sore nipples.
- Ensure **correct positioning** with the baby taking the entire nipple and a large part of the areola into their mouth (your midwife or lactation consultant can assist with this).
- **Wake sleepy babies if necessary** (your midwife or lactation consultant can provide tips and tricks).
- **Avoid supplementing** with a bottle without medical need and refrain from using pacifiers, as both can lead to nipple confusion.

THE RUGBY HOLD/ CLUTCH HOLD:

During cradle hold, your baby lies sideways next to you. Support their body with your arm and hold their head with your hand. Their nose should be at about the level of your nipple.



Please don't hesitate to contact your lactation consultant or midwife for questions, uncertainties, pain, or any other issues. They are there to help you.

You can find a lactation consultant near you at www.afs-stillen.de

Baby's breastfeeding cues

Breastfeeding is mostly about nutrition but of course also about calming or comforting baby, reducing stress, processing new sensations... breastfeeding is much easier for mum and baby when you are able to identify and react to baby's early cues.

⚠️ Early cues



small movements



opens mouth



turning their head, searching

⚠️ Now would be a good time...



stretching



increased movement



hand in mouth

⚠️ Late cues



crying



strong movement



head turning red

Time to calm your baby down

Calm your crying baby before breastfeeding by caressing, cuddling, skin-to-skin contact or talking to them.

Breastfeeding naturally

This is what you will encounter at the breastfeeding cafés and breastfeeding meetings organized by the AFS. You will get the chance to meet other breastfeeding mums and get support with all those new experiences with your child. It would be a good idea to get in touch before giving birth.

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AFS is an honorary non-profit organisation promoting breastfeeding. Please consider supporting our detailed lactation consultation with a donation. Preferably with a donation receipt.

Bank account for donations:

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