

Information for breastfeeding families



Sore Nipples

Tender and sensitive nipples are normal as you begin breastfeeding your new baby. However, very sore, cracked, or bleeding nipples are not. Usually this problem is related to the way your baby latches-on to the breast. It is important that your baby gets a big "mouthful" of the nipple and areola.

Positioning

1. Hold your baby's head behind the ears



2. Align your baby "nose to nipple"



3. Roll baby "belly to belly"



Laid back breastfeeding

Recline with your baby "on top". Use pillows to support you and your baby as needed.



This is an excellent position for feeding and may just be the trick to remedy sore nipples.

Cross-cradle hold

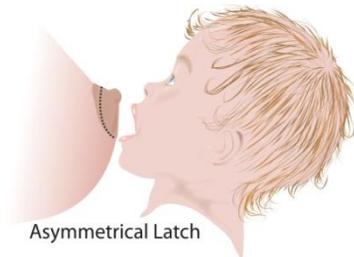


Latch-on

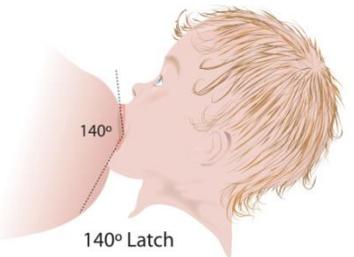
Use a “sandwich hold” to achieve a better latch-on. Gently squeeze the breast to shape it like an oval that fits deeply in your baby’s mouth.



Look for a wide mouth on the breast



Asymmetrical Latch



140° Latch



If breastfeeding hurts, break the suction and try the latch-on again. Do not continue with a feeding if you experience pain.

Treatment

- ✓ Correct position and latch-on
- ✓ Check wide open 140° wide mouth
- ✓ Apply your expressed breastmilk or purified lanolin to nipples after feeds
- ✓ Use breast shells to protect the nipple



- ✓ Look for a wide mouth on the breast
- ✓ Use hydrogel dressings to speed healing



- ✓ Feed for short, frequent feedings
- ✓ Start on the least sore side
- ✓ Rotate the position of your baby at each feeding
- ✓ If your breasts are very full, hand express some milk, use reverse pressure softening (see handout on engorgement) or use a breast pump

These measures may help you resolve uncomplicated problems with sore nipples. There are circumstances where sore nipples indicate a more severe problem. Please seek help if your problem does not resolve quickly.

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