

Tongue Motion and Effective Breastfeeding

Every baby is born with a frenulum under the tongue that holds it in place but allows it to move so the baby can feed well. Some frenulums are tighter than others and can limit the tongue's movement.

Effective breastfeeding requires that your baby's tongue be able to extend over his or her gums, cup and lift up to compress your breast. During the first few days of your baby's life, he or she will practice moving the tongue in the correct motion for breastfeeding. Using proper positioning and latch techniques can help your baby use their tongue well. Breastfeeding abilities should improve by day five to seven, after the milk supply has increased.

Recommended plan for effective breastfeeding:

- Follow Infant Feeding Guidelines
- Refer to the Breastfeeding section in the New Beginnings Resource Guide
- Follow up with a lactation specialist to assess milk transfer:
 - If your milk supply has not increased by day six
 - Your milk supply has increased but you are seeing any of these signs:

Baby

- Unable to stay latched without a nipple shield
- Biting or chewing instead of sucking
- Consistently has long feedings with little satisfaction
- Needs to be supplemented due to poor milk transfer as shown by:
 - Not enough wet and soiled diapers
 - Continued weight loss or poor weight gain

Mother:

- Damage to nipples (redness, bruising, cracks, bleeding) despite using correct positioning and latch technique
 - Nipple pain throughout feeding, possibly needing a nipple shield to maintain a comfortable latch
 - On-going need to pump because baby is unable to take enough milk from the breast
- Discuss breastfeeding with your pediatrician at each visit until breastfeeding is going well