

Maternity information factsheet

Alternative methods of feeding your baby: syringe, spoon, cup and bottle feeding

Learning to breastfeed can take time. It is common for babies to be reluctant to breastfeed or find it difficult to latch (attach to your breast for a feed) in the first few days.

We have written this factsheet to give you more information about some alternative ways to feed your baby until breastfeeding is established. It explains how to feed your baby milk by syringe, spoon, cup and bottle. It also explains the importance of responsive breastfeeding, skin-to-skin time with your baby and how to hand express your breast milk. We hope it will help to answer some of the questions you may have. If you have any further questions or concerns, please speak to your midwife or our infant feeding team.

Skin-to-skin time

Skin-to-skin time means holding your baby naked or dressed only in a nappy against your skin, usually under your top or under a blanket. Skin-to-skin time with your baby:

- encourages their natural feeding reflexes
- stimulates milk production
- helps you bond with your baby
- soothes your baby if they are unsettled

When you have skin-to-skin time with your baby, make sure:

- your baby is in a safe position with their head up and their nose free to breathe
- you or someone who is with you can always see your baby's face
- your baby is covered and does not get cold

Try to have skin-to-skin time with your baby for as long and as often as possible, as this will encourage your baby to breastfeed.

Responsive breastfeeding

Depending on the reason for the feed, breastfeeds can be long or short and at different times throughout the day. It is important to remember that breastfeeding doesn't just provide your baby with nutrition; it also provides them with love, comfort and reassurance.

You will learn to notice your baby's feeding cues and can offer your breast at these times.

Look out for the following feeding cues:

- rooting (opening mouth and moving head from side to side)
- yawning
- smacking of lips
- wriggling
- sucking of fingers
- rapid eye movement under closed eyelids
- sticking out of the tongue

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Crying is the last sign of hunger, so try to feed your baby before they cry. Feeding your baby when they show signs of being hungry (feeding cues) will allow your baby to enjoy the feed at their own pace and can reduce the likelihood of overfeeding.

As well as responding to your baby's feeding cues, responsive breastfeeding also involves feeding your baby to meet your own needs. For example, you may wish to offer your baby a feed before you have a shower or a nap, or if you want to sit down, rest and have a cuddle with your baby.

During pregnancy and for the first couple of days after birth, your body's hormones are responsible for producing your baby's first milk (this is called colostrum). After this, a 'demand and supply' method of making milk allows your body to produce the right amount of milk for your baby. Your body will begin producing milk (creating a supply) in response to your baby's needs (demands). This means the more you feed your baby and/or express your breast milk, the more milk your breasts will produce. Frequent and responsive breastfeeds will increase your milk supply.

During the first 24 hours after birth

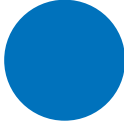
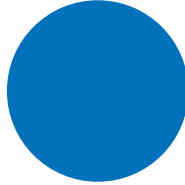
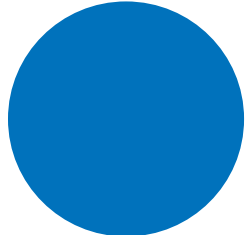
- Your baby's tummy (stomach) is about the size of a marble.
- Your baby may only feed three to four times.
- Your baby will only need small amounts of colostrum at each feed.
- If you are feeding your baby with expressed milk or formula, it is important to feed your baby little and often.

When your baby is three to five days old

- Your baby's tummy is about the size of a walnut.
- Your baby will feed at least eight to 12 times in 24 hours.
- The amount of milk your baby drinks at each feed will gradually increase over the first few days.
- Encourage your baby to feed frequently during the day and night.

When your baby is 10 to 12 days old

- Your baby's tummy is about the size of a golf ball.
- Your baby should now be feeding at least eight times in 24 hours, including at least one night feed (this is important to maintain a good milk supply).

Your baby			
Number of days old	1	3 to 5	10 to 12
Tummy size	 Marble	 Walnut	 Golf ball
Amount of milk needed per feed	5 to 7ml (about one teaspoon)	22 to 27ml (less than an ounce)	60 to 80ml (2 to 3 ounces)

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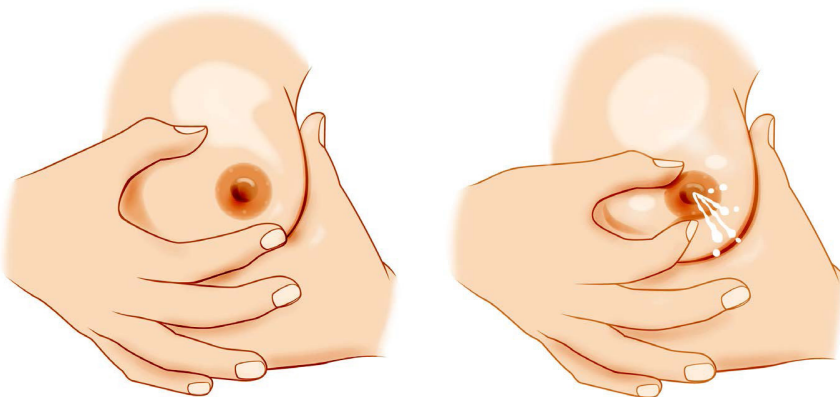
You can record how often your baby feeds in your [breastfeeding diary](#). This is available to download from: www.uhs.nhs.uk/maternity and contains lots of useful tips and information to support you on your breastfeeding journey.

Hand expressing

If your baby is not feeding well, you will need to hand express your colostrum eight to 12 times every 24 hours (including at night) to help stimulate your breasts to make milk. The sooner you do this and the more often you do this after your baby's birth, the more milk you will make. Any colostrum you collect can be given directly to your baby via a syringe or a spoon. Giving your baby colostrum will also encourage them to feed from your breast.

How to hand express your breast milk

1. To collect your expressed breast milk, you will need a clean, sterilised container. If you are expressing colostrum, you will also need a clean, sterilised syringe. Make sure you have these items ready before you start.
2. Make yourself comfortable and try to relax. Warmth will help, so try expressing in the shower or bath first. You can gently massage your breasts with a warm flannel.
3. Use your hand to cup one of your breasts. Your hand should be in a 'C' shape around the nipple, with four fingers under your breast and your thumb at the top. Your thumb and fingers should be about 2 to 3cm away from the areola (the darkened area of skin around your nipple).
4. Use your thumb and index finger to gently squeeze. Release the pressure and then repeat to create a rhythm. This shouldn't hurt. Avoid sliding your fingers over your skin as this may cause discomfort. If the colostrum doesn't flow, try moving your fingers slightly towards the nipple or further away, finding the spot that works best for you. You could also try gently massaging your breast.
5. Collect your colostrum with the sterilised syringe, and if necessary, decant to the larger sterilised container. Colostrum is very concentrated and will come out of your breast drop by drop. At first, only a few drops will come out at each session, but with practise and time, the volume will increase. When the drops slow down, move your fingers round to try a different section of your breast and repeat.
6. Repeat the process for your second breast.



The amount of colostrum you collect when you express can vary from just a few drops to a teaspoonful. As your colostrum increases in volume and starts to change to mature milk, you may wish to use a breast pump. There are many types available. For more information, speak to our infant feeding team.

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After you have expressed your breast milk, you can either give it to your baby straight away or you can store it in the fridge or freezer. For more information about hand expressing your milk and the safe storage of expressed breast milk, please visit: www.unicef.org.uk and download the '[Off to the best start](#)' booklet.

Alternative feeding methods

After you express your breast milk, your midwife or a member of our infant feeding team will show you how to feed your baby.

Feeding your baby with expressed breast milk is ideal, but if your milk supply is not yet established, you can also give formula or donor breast milk to your baby using the following methods. The method you choose will usually depend on the amount of milk you are giving your baby.

General advice for all feeding methods

Here are some general principles which apply to all the feeding methods included in this factsheet:

Before you feed your baby, you should always:

- wash and dry your hands thoroughly
- gather the equipment you will need (for example, a cup, a spoon, a syringe, a bib or muslin, a blanket to wrap your baby in to help make them feel secure, expressed breast milk or formula milk)
- hold your baby close to you in an upright position on your lap (your baby must be awake, calm and alert to avoid choking)
- make sure that you and your baby are both comfortable (make direct eye contact with them, talk to them and gently stroke their lips to encourage their rooting reflexes)

How to tell if your baby has finished feeding

Your baby will know how much milk they need. Pace the feed and stop as soon as your baby shows signs that they have had enough. Every baby will show different signs when they need to pause. For example, your baby may:

- splay their fingers and toes
- spill milk out of their mouth
- stop sucking or lapping
- turn their head away
- push the bottle, cup, spoon or syringe away

What to do if your baby is choking

Never tip milk into your baby's mouth, as this can cause them to choke.

If your baby is coughing and spluttering, make sure your baby is sitting up and gently pat your baby on the back. If you have any concerns about your baby while you are in hospital or at a birth centre, ask your midwife for support.

If you are concerned your baby is choking and you are at home, seek urgent medical assistance.

If your baby is having trouble breathing, call **999** immediately for an ambulance.

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Syringe feeding

Syringe feeding can be used when you need to give your baby small amounts of colostrum or expressed breast milk (less than 5ml at a time). This is usually during the first couple of days after your baby's birth.

How to syringe feed your baby

- Use a small, sterile syringe and place no more than 0.2ml into your baby's mouth at a time. Feed the milk in between their gum and cheek or onto their tongue.
- Allow your baby to swallow the milk before giving them another 0.2ml and continue to do this until the feed has ended.
- Do not allow your baby to suck on the syringe and do not squirt the milk into their mouth.



Important safety information

- **Infant feeding syringes have a free-fastening lid which must be removed before giving expressed colostrum or milk to your baby.**
- **Always keep syringes and lids away from babies and children.**

Spoon feeding

You may wish to sterilise and use a small, plastic spoon rather than a syringe when feeding small amounts of colostrum to your baby. You can express your milk directly onto the spoon and then offer it straight to your baby. Please bring a plastic spoon into hospital with you if you would like to try this method of feeding your baby.

How to spoon feed your baby

- Gently offer the spoon to your baby's lips and wait.
- Your baby will then sniff the milk, push their tongue forward and start to lap or drink the milk. Do not pour the milk into your baby's mouth.

Cup feeding

Cup feeding encourages your baby to use their tongue and lower jaw in a similar way as they would when breastfeeding. It also gives your baby more control over how much they drink and how quickly they drink. Babies are also able to smell and enjoy the milk when using a cup. A feeding cup can be used if you are offering your baby more than 5ml of milk during a feed.

How to cup feed your baby

- If you are at home, sterilise a small feeding cup. In hospital, you will be given a pre-sterilised, once-only cup at each feed. The cup should never be more than two thirds full with milk.
- Direct the lip of the cup towards your baby's upper lip and gums, with it gently touching or resting on their lower lip (make sure you don't apply any pressure to their lower lip). This will gently stimulate your baby's natural rooting reflex.
- Slowly tip the cup so that the milk touches your baby's lip and then wait. Your baby will then sniff the milk, push their tongue forward and start to lap or drink the milk.



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- Gently tip the cup as your baby drinks, so that the milk is always just on the rim of the cup.
- Leave the cup in the correct position during the feed. Do not remove the cup when your baby has occasional pauses. Allow your baby to resume feeding when they are ready and let them set their own pace (follow your baby's cues).
- Continue to offer the cup until your baby shows you that they have had enough milk.

If you decide to cup feed your baby, you may need to give them smaller but more regular feeds to make sure they have enough to drink.

Responsive and paced bottle feeding

We recommend avoiding using a bottle as an alternative to breastfeeding unless all other feeding methods are unsuccessful. This is because sucking on a teat uses a different mouth, jaw and tongue action. Your baby may also become used to the fast, continuous flow from a bottle and find it more difficult to breastfeed after they are used to a teat.

If other methods of feeding your baby (syringe, cup or spoon) are not working for you and your baby, a paced and responsive approach to bottle feeding can be used to support your breastfeeding journey. By choosing a responsive approach to bottle feeding, you can continue to keep your baby close to you and enjoy skin-to-skin contact with them while you are feeding. Hold your baby close in a semi-upright position so you can see their face. Reassure them by looking into their eyes and talking to them during the feed. Try and alternate the side you hold your baby on. By allowing your baby to use both eyes to see you during a feed, you are helping their eyes and brain to develop. If you and your partner give your baby most of their feeds yourselves, this will promote a close bond and loving relationship with your baby, and help them feel safe and secure.

How to bottle feed your baby

- Encourage your baby to open their mouth by softly rubbing the teat against their top lip.
- Gently insert the teat into your baby's mouth.
- Keep the bottle in a horizontal position to prevent the milk from flowing too fast.
- Pace the feed and stop as soon as your baby shows signs that they have had enough.
- Gently remove the teat or bring the bottle downwards to stop the flow of milk. Do not force your baby to finish a feed. This can distress your baby and cause them to feed too much.

Pacing your baby's feeds in this way will also help your baby to transition back to breastfeeding more easily. For more information about paced and responsive bottle feeding, please visit: www.unicef.org.uk/babyfriendly/baby-friendly-resources/bottle-feeding-resources and download the '[Infant formula and responsive bottle feeding](#)' factsheet. You may also find this [video](#) helpful.

For more information about preparing feeds and sterilising feeding equipment, please visit: www.unicef.org.uk/babyfriendly/baby-friendly-resources/bottle-feeding-resources and download the Start4life '[Guide to bottle feeding](#)' leaflet.

If you decide to give your baby formula milk, they will only need first infant formula during their first year. For more information about infant formula, please visit First Steps Nutrition: www.firststepsnutrition.org/parents-carers

Other methods of feeding your baby

Other methods, such as a supplementary nursing system or finger feeding, can also be used with support from a specialist infant feeding advisor (for example, a lactation consultant). If

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you would like more information about either of these methods, speak to your midwife, health visitor or our infant feeding team.

Contact us

If you need feeding support during the first couple of weeks after your baby's birth, please contact us.

Breastfeeding Babes

Telephone: **07786 267584** (Monday to Friday, 10am to 1pm)

Please leave your name, number and a short message via voicemail, and a member of the team will contact you. You may be offered a face-to-face, telephone or video consultation.

Community midwifery co-ordinator

Telephone: **07786 266529** (7.30am to 5.30pm)

Broadlands Birth Centre

Telephone: **023 8120 6012** (out of hours)

New Forest Birth Centre

Telephone: **023 8074 7690** (out of hours)

Useful links

www.uhs.nhs.uk/feedingyourbaby

www.nhs.uk/conditions/baby/breastfeeding-and-bottle-feeding/breastfeeding/the-first-few-days

UNICEF's ['Off to the best start' booklet](#)

This booklet has been produced with the Department of Health and includes some helpful photographs to show you how to ensure your baby is well-attached to your breast. It also contains useful information about hand expressing and milk storage.

Diagrams reproduced with kind permission from Public Health England:

www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/off-to-the-best-start

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For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit www.uhs.nhs.uk/additionalsupport