



FREE GUIDE

The Breastfeeding Guide

What I wish someone had told me before the first latch —
getting started, common challenges, and how to know when it's time to get help.

By Anahely

BYANAHEL.Y.COM



A NOTE FROM ANAHEL

"Natural" doesn't mean "easy."

Every single one of my five babies latched differently, and I needed real, hands-on help more than once. That's normal — not a sign you're doing something wrong.

Most breastfeeding challenges are solvable with the right support at the right time. This guide walks through what's typical in the early days, the common bumps almost everyone hits, and exactly when it's worth calling in help.

— *Anahely*

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01 Getting Started

The first 24–48 hours set the tone, but they aren't a preview of how the rest of feeding will go.

— The first latch

Skin-to-skin right after birth helps, but a “perfect” first latch is rare. Ask for hands-on help from a nurse or lactation consultant before you leave the hospital — it's completely normal to need it more than once.

— Colostrum is enough

Before your milk “comes in” (usually day 2–4), your body makes colostrum in small amounts — teaspoons, not ounces. That's exactly what a newborn's tiny stomach needs.

— Feeding on demand

Newborns typically feed 8–12 times in 24 hours. Watching for hunger cues — rooting, hands to mouth — works better than watching the clock.

QUICK TIP

A good latch shouldn't hurt after the first few seconds. If it does the whole feeding, ask for help repositioning — pain is a signal, not something to push through.

02 Common Challenges

Things that happen to nearly everyone at some point — and what actually helps.

— Engorgement

When milk comes in, breasts can feel rock-hard and painful. Frequent feeding, cold compresses between feeds, and warm compresses right before feeding all help.

— Cracked or sore nipples

Usually a latch issue. A little breastmilk rubbed in and air-drying helps healing; nipple cream can soothe in the meantime. Persistent pain is worth a lactation consult.

— Cluster feeding

Babies often feed almost constantly for a few hours at a time, especially in the evenings — it's exhausting but normal, and usually a growth-spurt signal, not a sign of low supply.

— Clogged ducts

A tender, localized lump. Warm compresses, massage toward the nipple, and continuing to nurse on that side usually clear it within a day or two.

03 Building Your Supply

Supply works on demand — the more consistently milk is removed, the more your body makes.

— Pumping, if you choose to

Whether it's to build a stash, return to work, or share feeding duties, pumping after nursing (not instead of) tends to protect supply best in the early weeks.

— Hydration and food, simply

There's no magic food that boosts supply dramatically, but staying fed and hydrated yourself matters more than any specific “lactation” product.

QUICK TIP

Growth spurts (common around 3 weeks, 6 weeks, and 3 months) often bring a few days of extra-frequent feeding. It can feel like your supply dropped — it usually hasn't. Feeding more is your body's way of adjusting.

WORTH REMEMBERING

“Fed is best, however that feeding happens — the goal was never perfection, just a fed and thriving baby.”

04 When to Get Help

Most challenges are solvable with the right support — these are the signs it's time to call.

Worth a Lactation Consult

- Pain that lasts the whole feeding, every time
- Baby seems unable to latch or stay latched
- You're not sure if baby is getting enough
- Nipples are cracked, bleeding, or not healing

Call Your Doctor

- Fever, chills, or flu-like symptoms (possible mastitis)
- A red, hot, painful area that doesn't improve in a day
- Baby has fewer than 6 wet diapers a day after day 5
- Signs of dehydration or poor weight gain in baby

Ask your hospital or pediatrician for a lactation consultant referral — many also offer virtual consults, which can help sooner than an in-person wait.

Frequently Asked Questions

How do I know if my baby is getting enough milk?

Wet and dirty diaper counts and steady weight gain at checkups are the most reliable signs — your pediatrician tracks this closely in the first weeks.

Is it normal for feeding to hurt at first?

Some initial tenderness is common, but sharp or lasting pain usually signals a latch issue worth addressing.

When should I introduce a bottle if I'm breastfeeding?

Many lactation consultants suggest waiting until breastfeeding is well established, often around 3–4 weeks, though this varies by baby and goals.

Can stress affect my milk supply?

Stress can affect let-down more than actual supply — a calm feeding environment can help in the moment, but occasional stress won't dry up your supply.

How do I find a lactation consultant?

Ask your hospital or pediatrician for a referral — many also offer virtual consults, which can help sooner than an in-person wait.

Breastfeeding Must-Haves

Scan this QR code to view my curated list of essential nursing items on Amazon, including top-rated disposable pads, nursing bras, and comfort postpartum wear.



This guide is for general information only and isn't a substitute for medical advice — talk to your doctor or a lactation consultant about your specific situation.



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