

Different Methods of Infant Feeding

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DESCRIPTION

Breast milk is a common newborn meal. While the number of mothers who breastfeed is increasing, many lactating mothers supplement their milk with pumping and/or formula. Breastfeeding, often known as chest feeding, provides various advantages for both the nursing mother and the kid. Antibodies found in breast milk can protect infants from sickness. It can also lower the risk of breast and ovarian cancer in lactating mothers. Breastfeeding is a skill that takes time to master, despite the fact that it is a natural action. It gets easier with practice as both the mother and the baby figure out which breastfeeding strategies work best for them. The optimal breastfeeding positions allow a baby to latch on to the breast easily and pleasantly, limit the danger of nipple injuries and pain, and do not strain the muscles. As a baby grows and a woman gains confidence, the optimum breastfeeding position may alter. There isn't a particular stance that works for everyone.

Cradle hold

When most people think about nursing, they envision themselves in this posture. In a tummy-to-mummy position, we sit upright with our infant on their side, head and neck resting on our forearm and body against our stomach. It's a common posture, but it's not always comfortable with a newborn because it doesn't provide as much support as other positions. A pillow or cushion behind us, as well as a breastfeeding pillow over your lap, propping up your infant or arms, may provide greater support and reduce back and shoulder discomfort. If we use a breastfeeding cushion, make sure it doesn't raise our baby too high-our breasts should be at their natural position. To avoid painful nipples and a strained latch, raise the resting height.

Dangle feeding

Our baby should be resting on their back while we crouch over them on all fours and dangle our nipple in their mouth in this breastfeeding posture. Some mothers report that doing this for brief periods of time helps if they have mastitis and don't want their breasts squished or handled; others suggest that gravity helps open plugged milk ducts, despite the lack of scientific

evidence. We can dangle feed while sitting, kneeling over our kid on a bed or sofa, or almost lying down with our arms propped up. To avoid straining our backs or shoulders, we may need to support ourselves using cushions and pillows. We don't recommend dangle feeding as a breastfeeding posture. It may not be something we want to do on a regular basis, but it may be useful if we need to change things up.

Nursing in a sling

Breastfeeding our infant in a sling might be useful whether we are out and about, looking after older children, or even doing light housework. It may require some skill. It's also useful if our kid doesn't enjoy being set down or needs to be fed regularly. When we are out, we should tie a sarong around our neck and drape it over the carrier to act as a cover. They would nurse like this until they passed out. This strategy works best if our kid is a seasoned breast feeder who can hold his or her head up on his or her own. Breastfeeding can be done in a variety of slings, such as stretchy wraps, ring slings, and front carriers. Whatever option we choose, make sure we can view our infant at all times. Their face is not forced against their chest, and their chin is not pressed against their chest.

Dancer hand nursing position

Try this hold to support both our baby's head and our breast if they struggle to stay latched on or have low muscle tone-perhaps because they were born prematurely, have a condition like Down's syndrome, or have a sickness or disability. Begin by placing our hand beneath our breast, fingers on one side and thumb on the other. Then, directly in front of the breast, move our hand forward so that our thumb and index finger create a 'U' shape. The breast underneath should be supported by our three remaining fingers. As they feed, rest our baby's jaw on our thumb and index finger, with their chin at the bottom of the 'U,' our thumb gently holding one of their cheeks, and our index finger gently holding the other. This grip provides sufficient support for our kid while also giving us control over their position and a clear view of their latch.

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