

## PACED BOTTLE FEEDING

- Breast milk is digested quickly and easily. Thus breastfed babies usually eat more frequently than formula fed babies. Timing of feedings may range between 1-1/2 to 3 hours. Feed breastfed babies when their cues indicate hunger, not on a time schedule. Early hunger cues include mouth movements, rooting, sucking on hands, and restlessness. Note crying is a late hunger cue.
- Feed the baby in a way that mimics breastfeeding. Hold the baby in an upright position, and never put a baby to bed with a bottle. Switch holding the baby from your right arm to your left arm midway through a feeding. This provides equal eye stimulation and facial muscle development, helps pace feedings, and keeps the baby from developing a preference for one side.
- Let the baby control the start of the feeding. Stroke the baby's lips with the nipple to illicit a rooting response and a wide-open mouth. Allow the infant to gape widely for the bottle nipple (rather than pushing it in). Allow the baby to "accept" or draw in the nipple.
- Feed slowly. Liquid flows out faster out of bottling equipment. Sucking on a bottle may need to be paced. Pause frequently during feedings to burp, switch sides, or talk to baby, and avoid holding the bottle in a vertical position. Rapid feedings can lead to overfeeding, which puts the mother's milk supply at risk and can cause discomfort in the baby. Infants need time to recognize that they are full.
- Stop feeding when the baby is ready. Do not force a baby to finish "just the last bit" of a bottle. If the baby is drowsing off and releasing the bottle nipple before the bottle is empty, the baby is done. Don't reawaken the baby to take more. If bottles are often left unfinished, ask the mother to send milk in smaller amounts.

