

Introduction to Maternal Infant Young Children Nutrition
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Lecture - 31
Session - 7

Football Hold & Cradle Hold

Hello, everyone. So, welcome to session number 7. Here we will discuss a few more holds which are also very important and it is important to understand all different kinds of holds which you can guide mother with. So, I will be discussing football hold, cradle hold, sidelying hold, laid back hold. Breast crawl you have already seen, so you can even ask mother if she is kind of having some pain for C section. She can just lay down flat. And then as we have shown in breast crawl, you can just put the baby on mother and baby can beautifully breastfeed.

But that, today I will not discuss about breast crawl position. Today, I will be focusing more on the different other holds. And I would also like to discuss cradle hold, but how to correctly attach the baby. I think cradle hold is also good. And in fact, after 2 months, when the neck control comes, then you do not need to really kind of use cross cradle hold. But the thing is you will get so comfortable, when mother gets so comfortable with cross cradle hold that, like I have seen that even one year old when they are trying to breastfeed, they bring in that cross cradle hold, but then they hold the baby in a cradle hold.

So, after 2 months old, you do not need to kind of push for cross cradle hold at all. Cradle hold is as good. Also, many times what happens is when you go in the field and sometimes you see that two or 3-month-old babies and they are doing beautifully on any hold, cradle hold or football hold, you do not need to change the hold. This cross-cradle hold is only basically when you are teaching a new mother or newborn babies who just under 2 months of age when the neck control is not good. A cross cradle hold also works very well with small babies. So, low birth weight babies we see that because they do not have a good neck control, somehow that cross cradle hold works very beautifully.

But I also kind of always argue that if it works so beautifully on low birth weight babies, it has to work beautifully on average babies who had born healthy 3 kg, 3.5 kg, because the concept is same. You are controlling baby's head, you are causing extension of the neck backward, you have a full body support. So, it is the same concept where the baby is small baby or the baby is big. So, here let us start with our tutorial, first tutorial today. It is going to be in football hold. Now, football hold, you will actually going to enjoy this tutorial, because again we have taught the same concept of how to hold the breast, how to bring the baby, full body support and all that.

But here I want to just explain before you watch the tutorial. So, in football hold, now this hold we recommend mainly for babies who are like twins baby. So, in those condition mother wants to, suppose both babies are crying at the same time and she may want to breastfeed both babies at the same time so what she can do is to bring first baby, attach the baby and then with the help of same mother in law, then she can get another baby and then attach the baby. So, she can breastfeed both the babies at the same time.

Now, remember in football hold, we have given two positions of football hold. One is basically bringing the baby directly on right straight. Another way that mother can bring the baby is from the side. Now, why it is called football hold, because remember it, whenever you watch soccer game or football game, they always hold the ball just under the arm.

So, just like that you are holding the baby underarm and you will be feeding the baby on the same side of the breast. So, that is important to remember that basically in football hold the breast, you hold the baby from the same side as you are going to feed the baby from that breast, the same side, same hand and same breast.

So, in this hold, for example, your baby is coming straight on. Now, remember in this position, same concept, I am holding the baby from back of the ears, baby is in the straight line. I am going to put some kind of pillows over here, so there will be get support in the back and on the legs also and babies coming straight on. Make sure that this nose is not higher up. Nose should be lower than the nipple and do not forget the extension of the neck.

So, here also the extension of neck is as important as it was in the cross-cradle hold. So, here now, nose is not too high up, is below that nare is looking at the nipple, neck is extended. And

here in this position the upper lip is sitting at the 12 o'clock position and the lower lip is sitting at the 6 o'clock position.

So, here in this position, because lips are horizontal, I will be holding the kind of breast in a horizontal position. So, in this one what I would do my thumb will be at 12 o'clock position and the lower finger or the index finger will be at 6 o'clock position. I will press it down and then I will attach the baby. Now, this was one position of football hold. Another position that you can bring is basically you put the baby like this way, not coming this way, directly this way, not this way, but basically sideways.

So, in this position, remember, same breast, same hand-holding, it is called basically football hold, because this baby is under that same arm. And what you are doing, here, look at this position of this baby. In this position, the upper lip is at, and this is a right breast, so the upper lip is at 3 o'clock position and the lower lip is at the 9 o'clock position.

So, again in this position, I will be holding my upper hand or upper, or the thumb at 3 o'clock position and index finger at the 9 o'clock position I am going to make it small and it will be easy for baby. Again, the concept is same. The nipple, the nose or the nare of the nose should not be above the nipple, it should not be too high up, it should be looking a bit lower down, and the neck should be extended backwards. So, it should not be forward, it should be backward just like how we drink milk.

So, those few concepts if you remember, any hold you do, the latch will be good. There is no doubt about it. And do not forget to put pillows underneath because it will be tiring. So, make sure that you have two or three pillows. So, your hand is supported and baby is supported. So, this is your football hold. Same concept to understand all those, I have only focused on the positioning of the baby and not so much on latching, because latching tutorial you have already watch. The latch would be same in all the holds. It is just a different kind of positioning of the, or the hold of the mothers or hold of the baby. So, we are focused more on the holds. Position and the latching would be pretty much same in all the holds. So, that was your football hold.

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Football Hold for Breastfeeding

Spoken Tutorial Project
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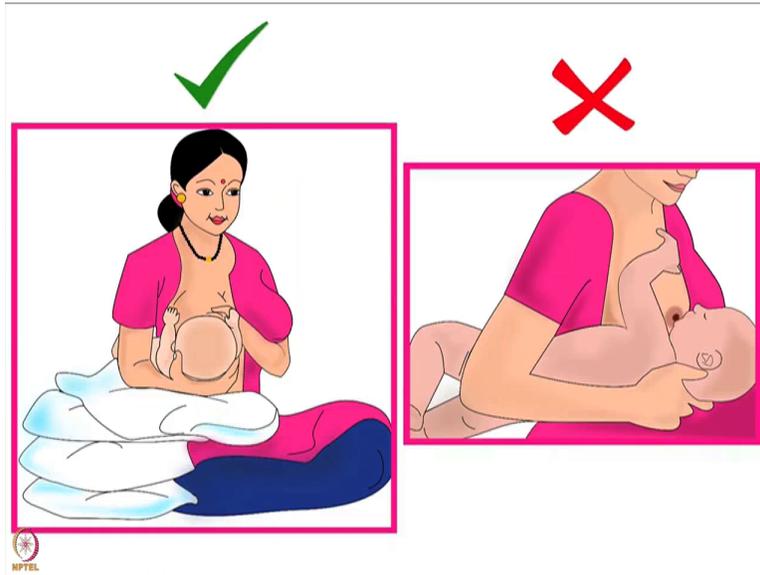
Script and Narration: Tasneem Shaikh
Graphics and Animation: Shital Joshi

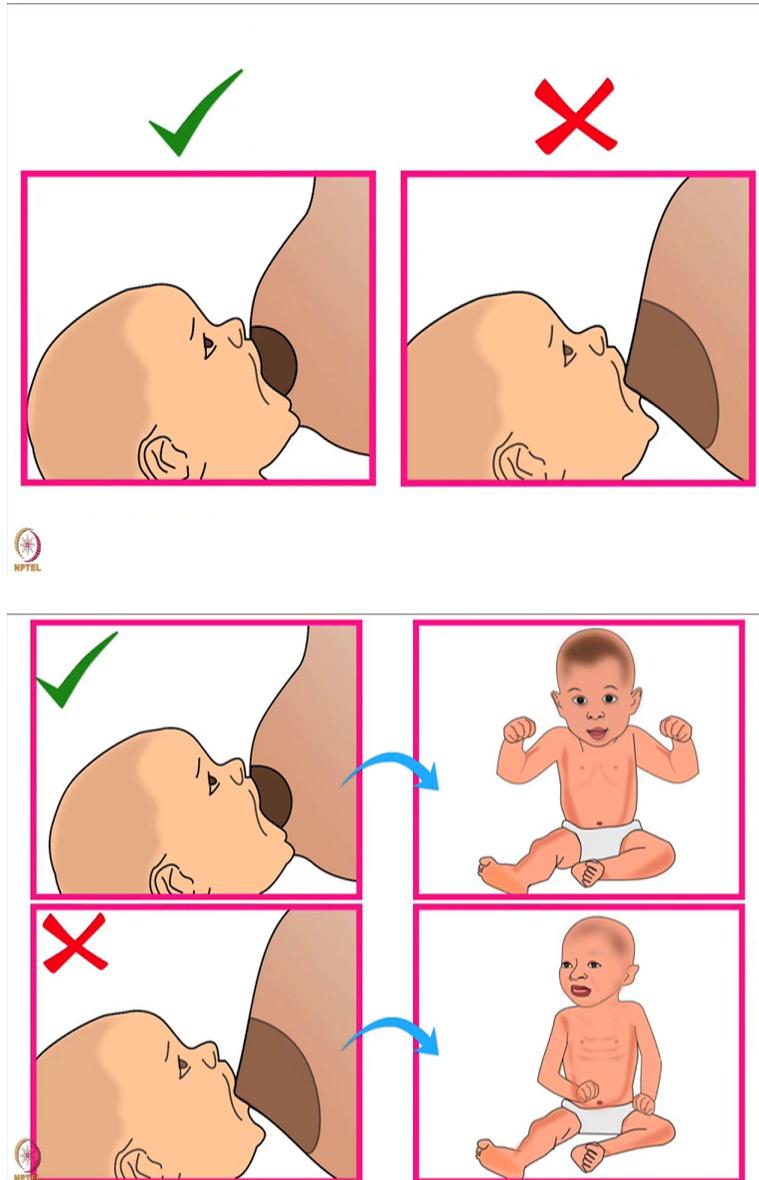
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13 February 2018



NPTEL Tasneem Shaikh Football Hold for Breastfeeding



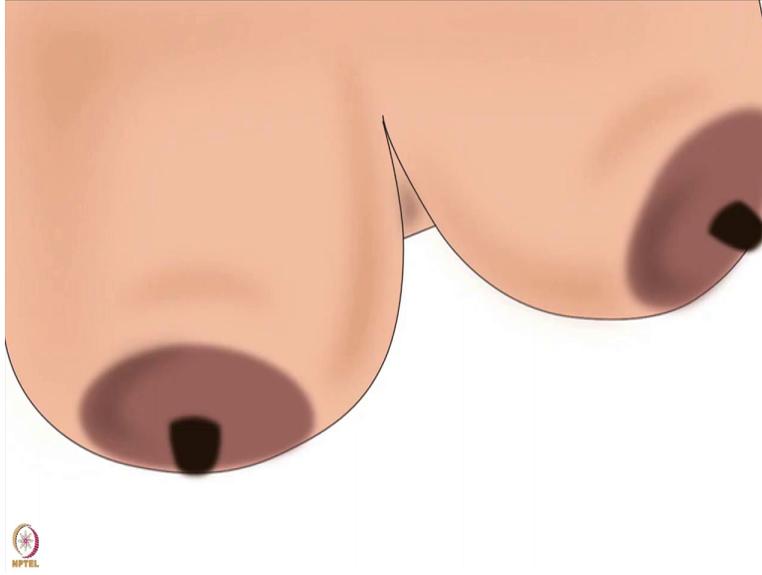




Narrator Tasneem Shaikh: Welcome to the spoken tutorial on football hold for breastfeeding. In this tutorial, we will learn about choosing the correct breastfeeding hold for a mother and her baby, mother's preparation before breastfeeding, and step-by-step procedure for football hold. Let us begin. Across the world, mothers breastfeed their babies using various types of holds. As explained in an earlier tutorial, the best breastfeeding hold for a mother and her baby is the one in which both mother and baby are comfortable for the entire duration of breastfeeding. The baby is able to attach deeply to the mother's breast and get sufficient milk.

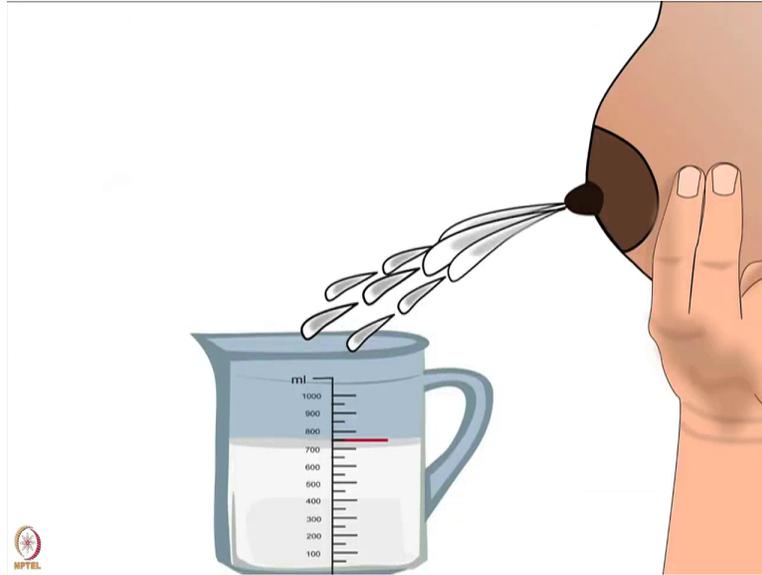
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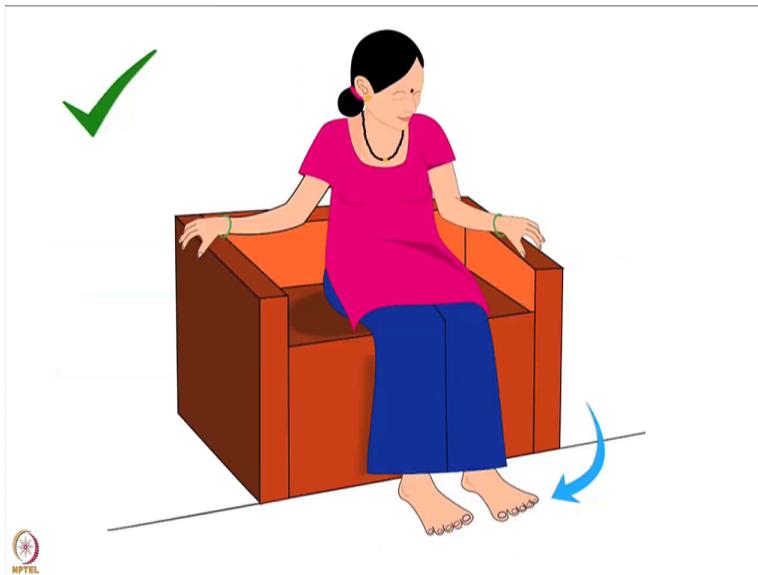
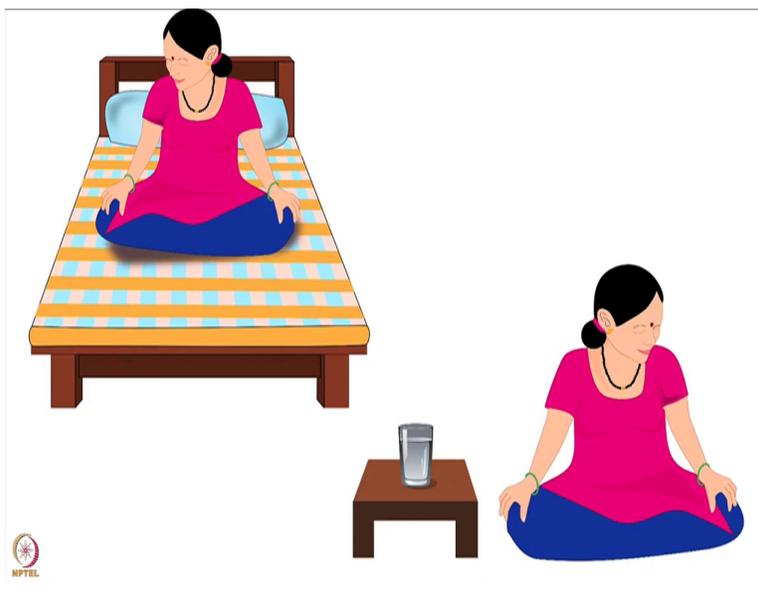


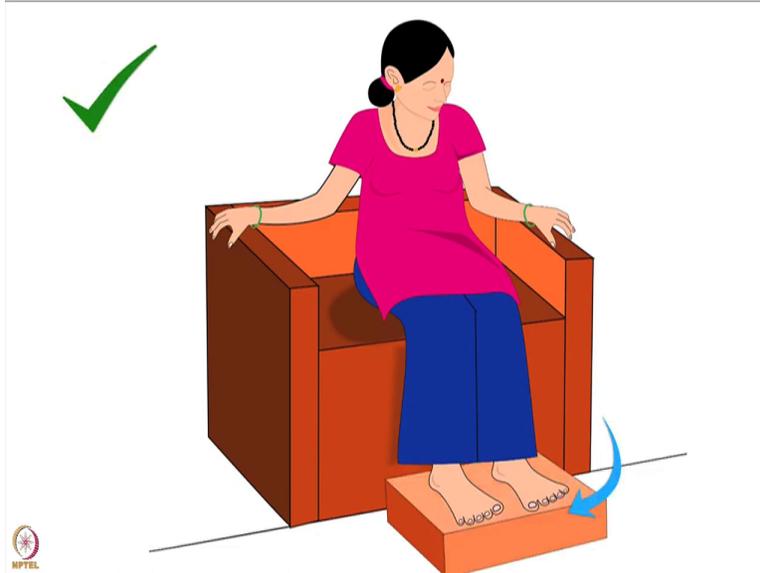
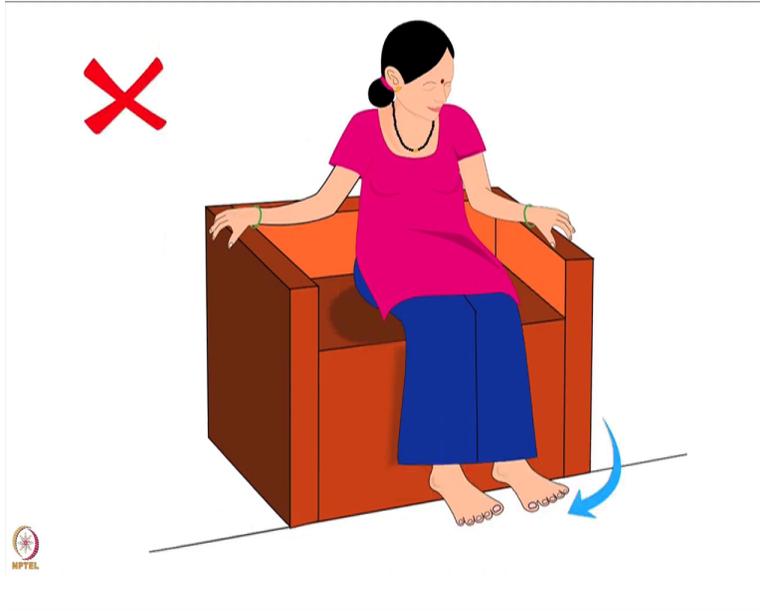


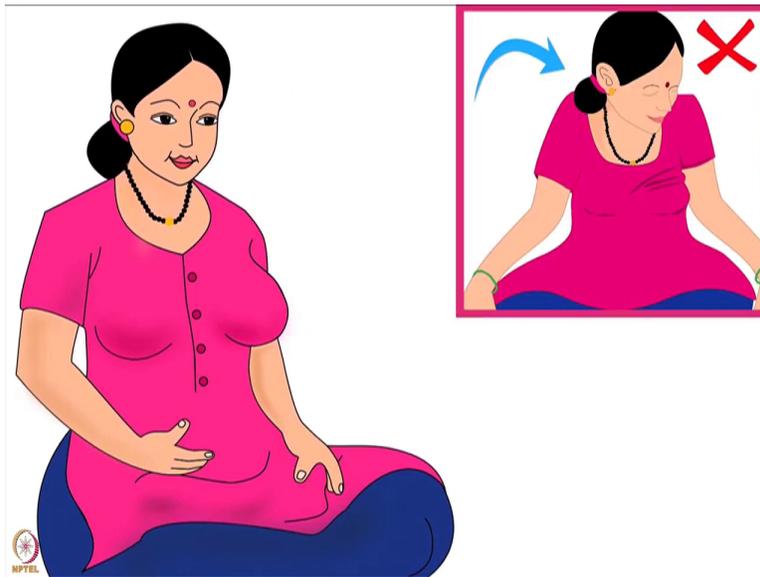
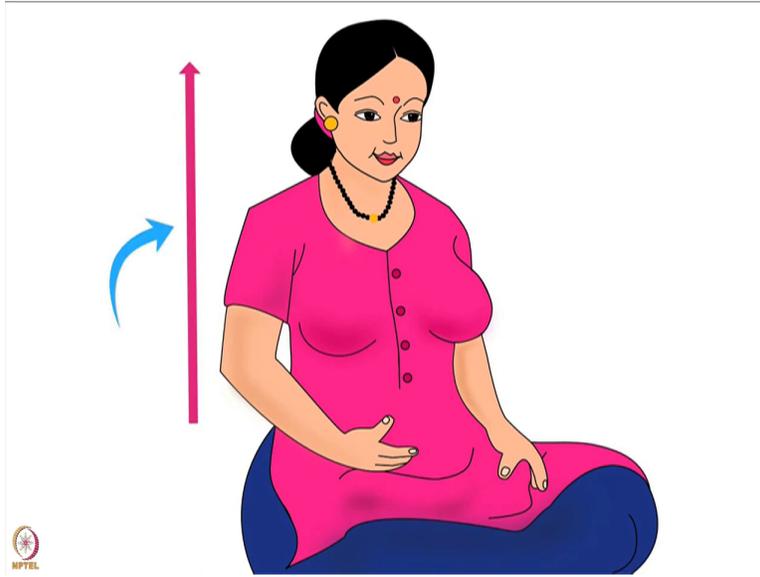


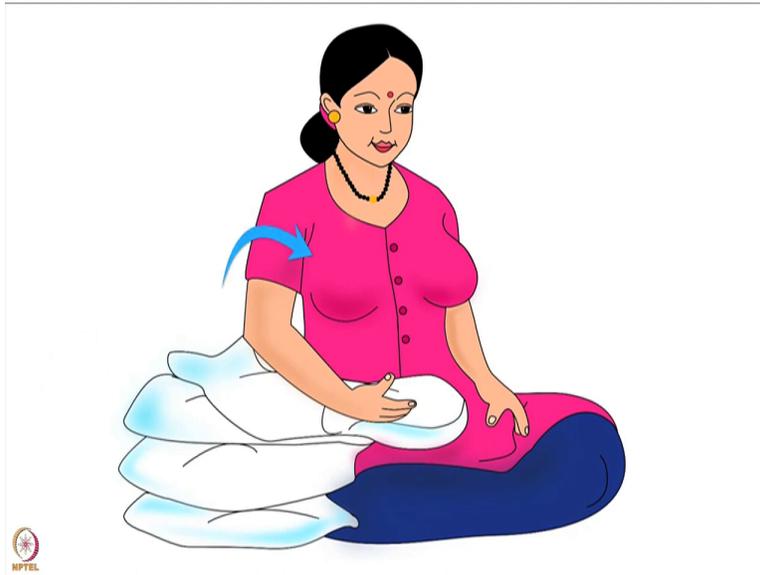
Let us learn about one of the holds called football hold. Football hold is especially useful if the mother has had a C section delivery, has large breast, has a small or premature baby or has twin babies. Always remember, before feeding her baby a mother should wash and dry her hands properly. Then she should drink a glass of boiled and cooled water. Lactating mothers produce 750 to 850 milliliters of milk per day on an average. Therefore, they need to increase their daily water intake.

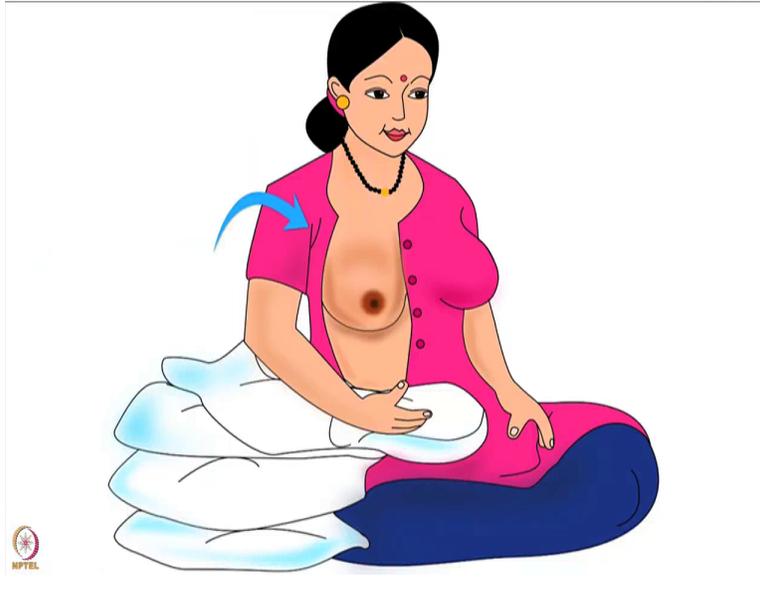
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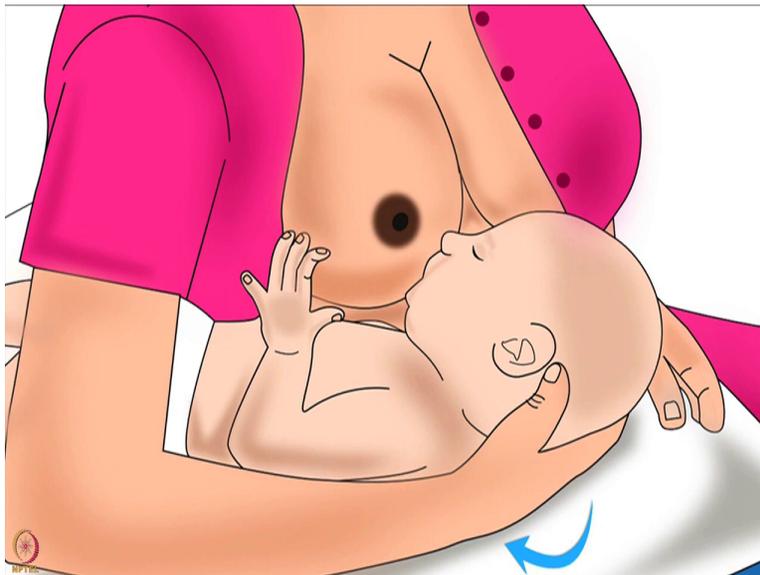


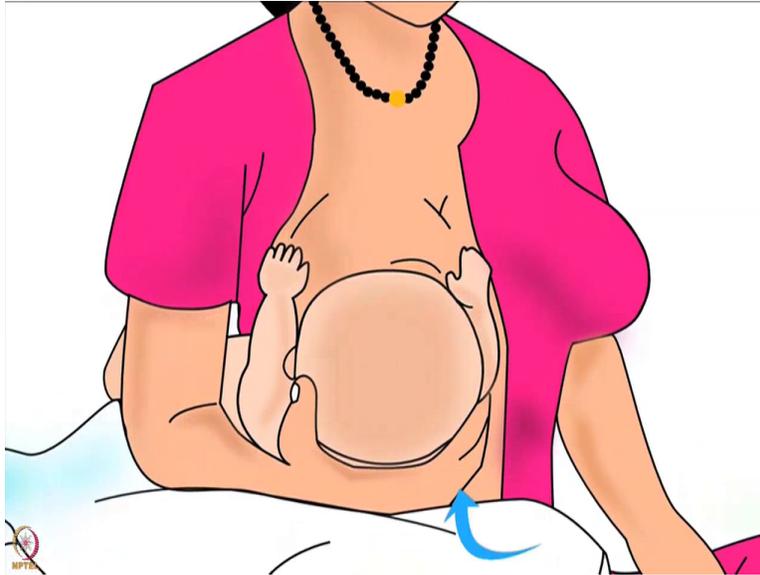












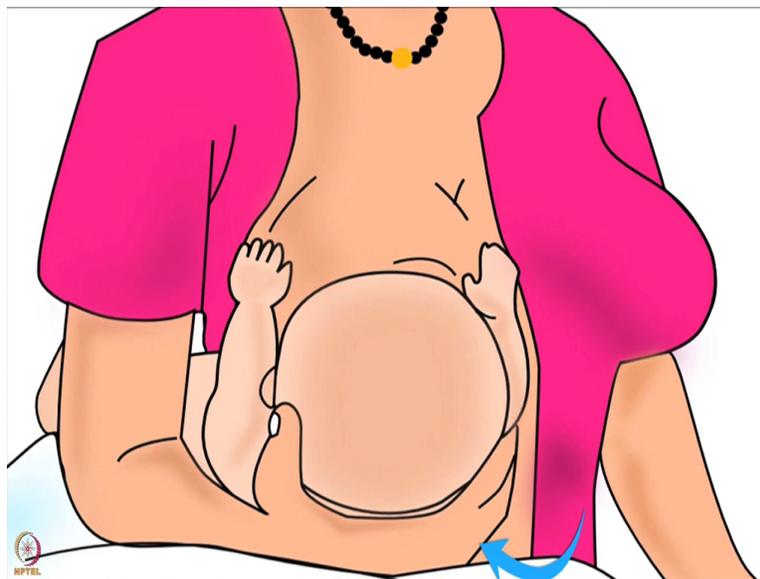
Next, let us discuss the position of the mother. Mother should sit on the floor or on the bed in cross legged position or on a chair with her feet flat on the ground. If the chair is too high, and her feet do not reach the floor, then she can rest her feet flat on a small stool or pillows kept on the floor. While sitting she should ensure that her back is straight so as to avoid back pain. Her shoulders are relaxed and not elevated or curved. And this relaxed position is maintained throughout the feeding session.

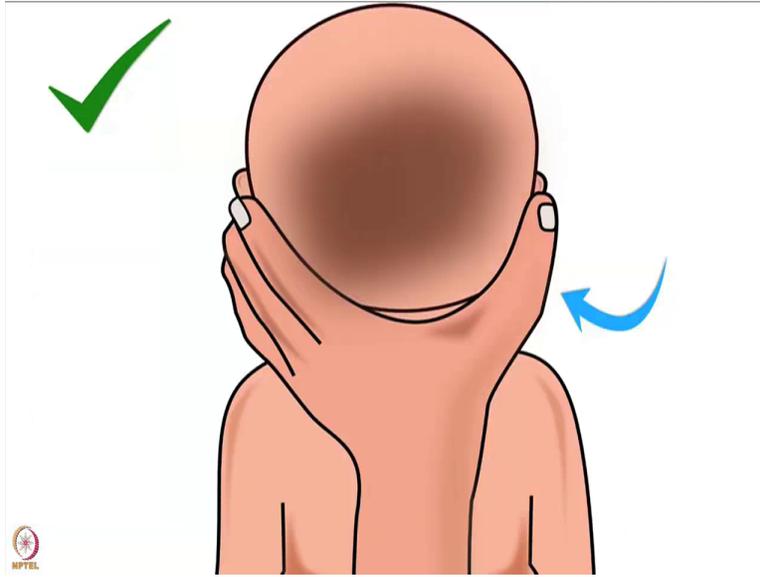
The mother should keep three to four pillows on the side of the breast which she will breastfeed from. The topmost pillow should be placed diagonally over the other pillows and the mother's

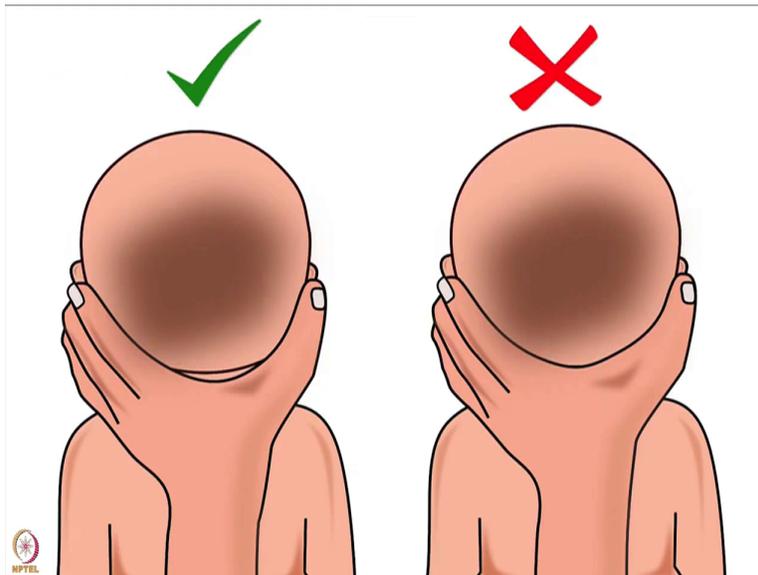
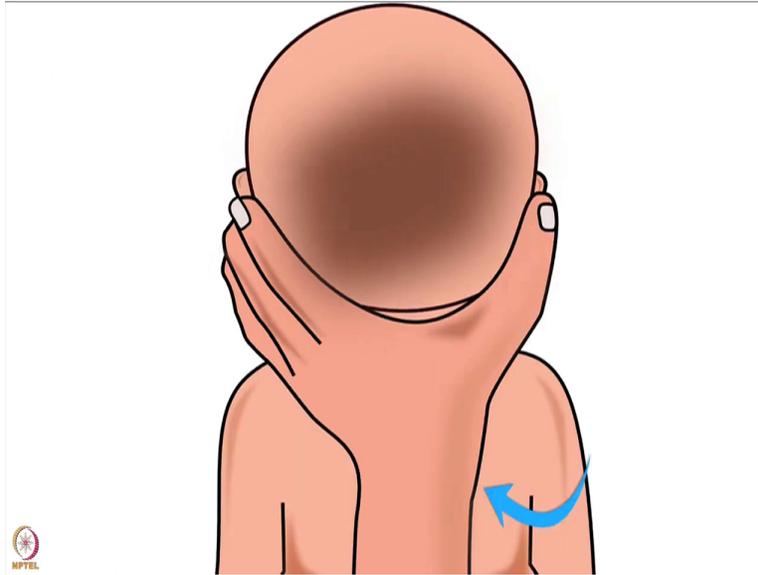
thigh. Then, mother should uncover the breast from which she wants to feed the baby. She should ensure not to put pressure of her bra or blouse on the breast. After sitting comfortably bring the baby to the mother. The mother should place her baby's back on the pillows. She should hold her baby's head using the hand on the same side of the breast that she will breastfeed from. The baby's legs should pass through the mother's armpit of the same hand onto the pillow.

The mother should rest this hand and her baby's legs on the pillows. The mother in this picture will be feeding her baby from her right breast. Therefore, the baby's legs pass through the mother's right armpit. She is using the thumb and fingers of her right hand to hold the lower part of her baby's head. Remember, the mother should never bring the breast to the baby by bending her back. This will make her uncomfortable and cause back pain. She should always keep her back straight and lift the baby to reach her breast.

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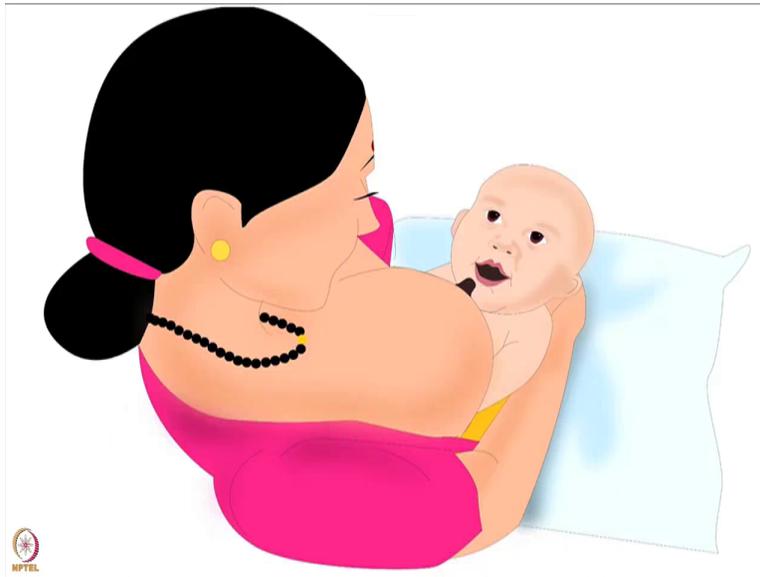


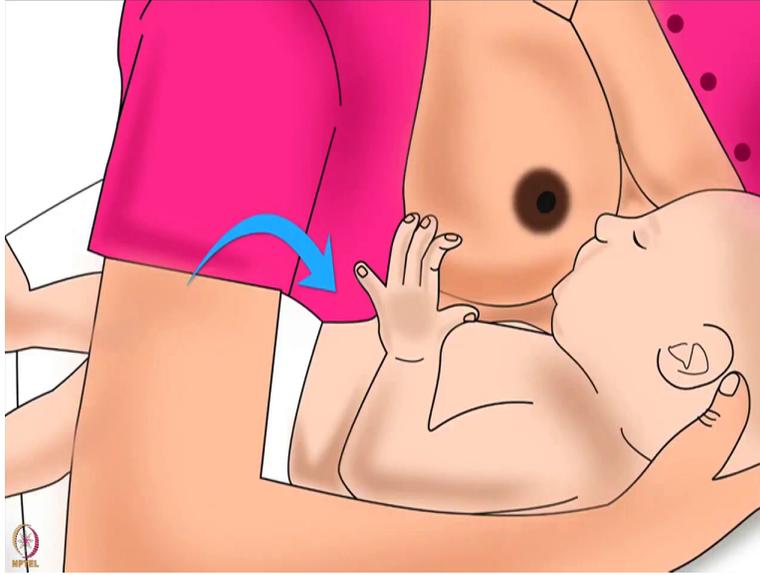


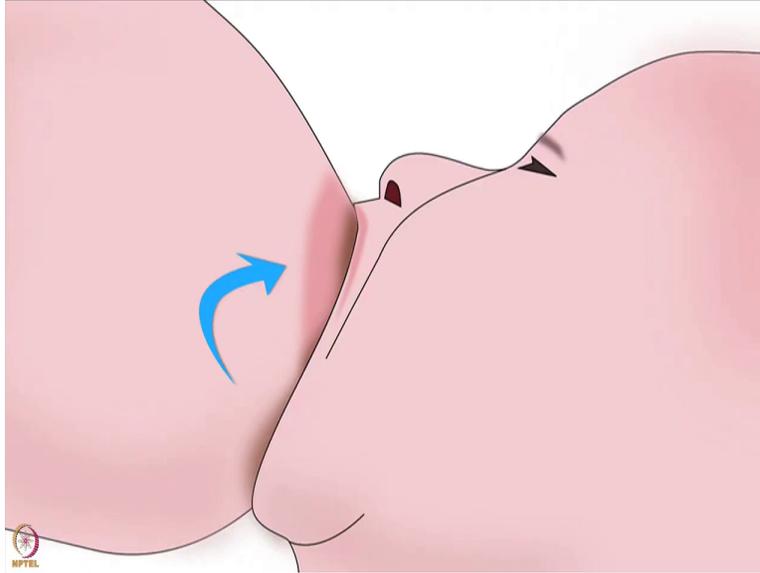


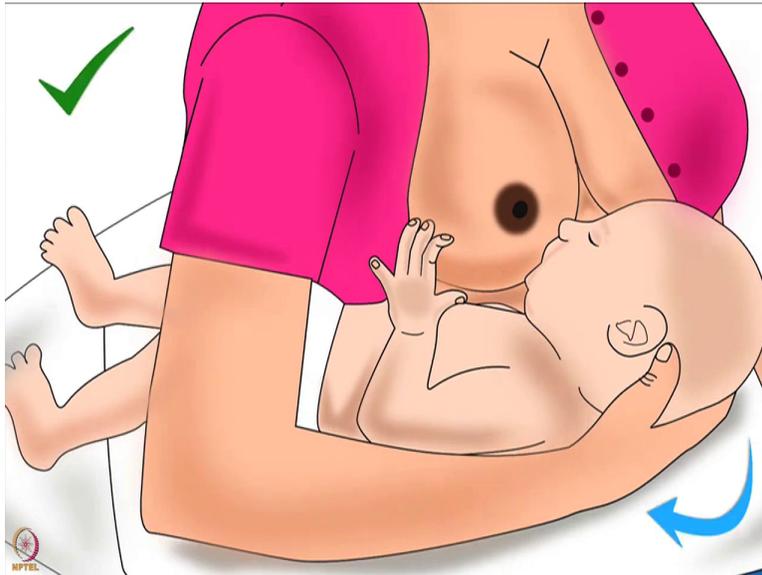
Next, let us see the correct position of mother's thumb and fingers for holding the baby's head. Mother's thumb should be behind one ear and rest of the fingers behind the other ear of the baby. She should not move her fingers or thumb from behind the ear to the baby's neck. Her wrist should rest between the baby's shoulder blades. She should not apply pressure on the back of the baby's head with her hand. This will keep the baby comfortable while feeding.

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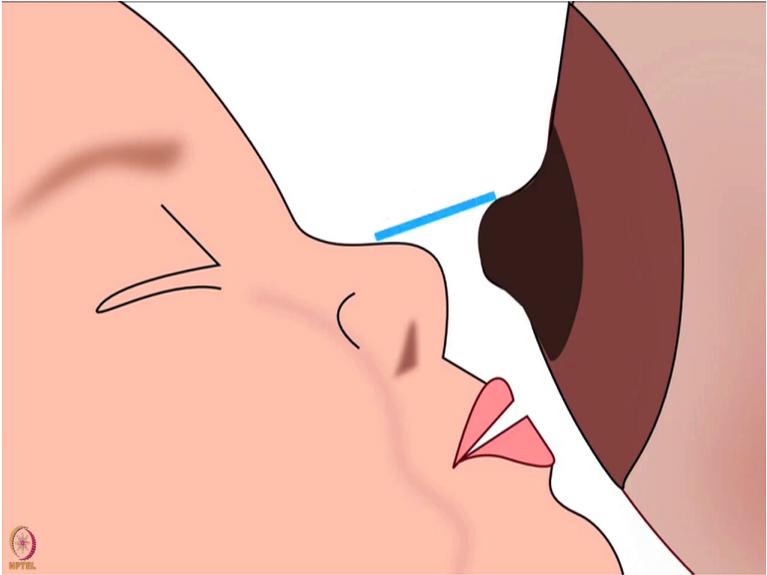
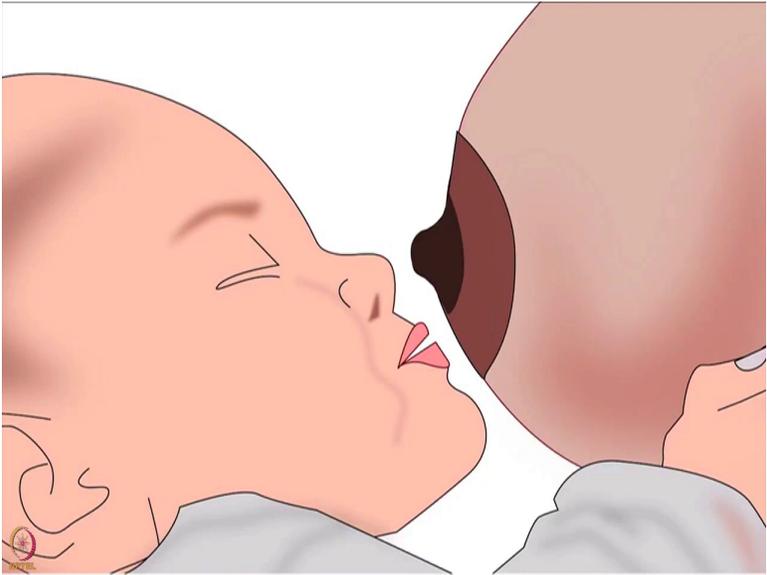


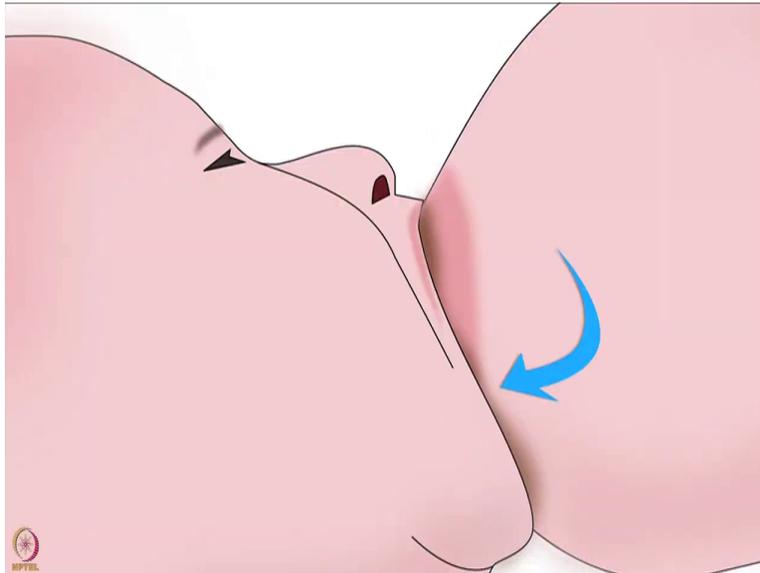
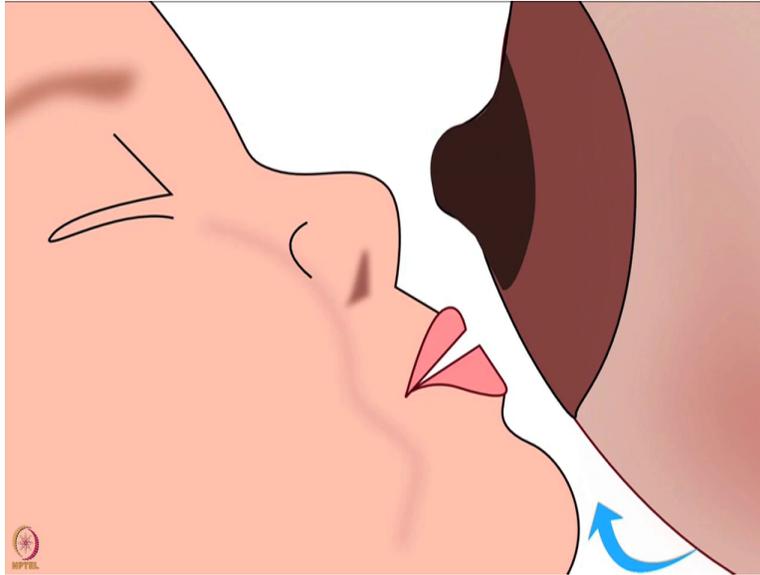


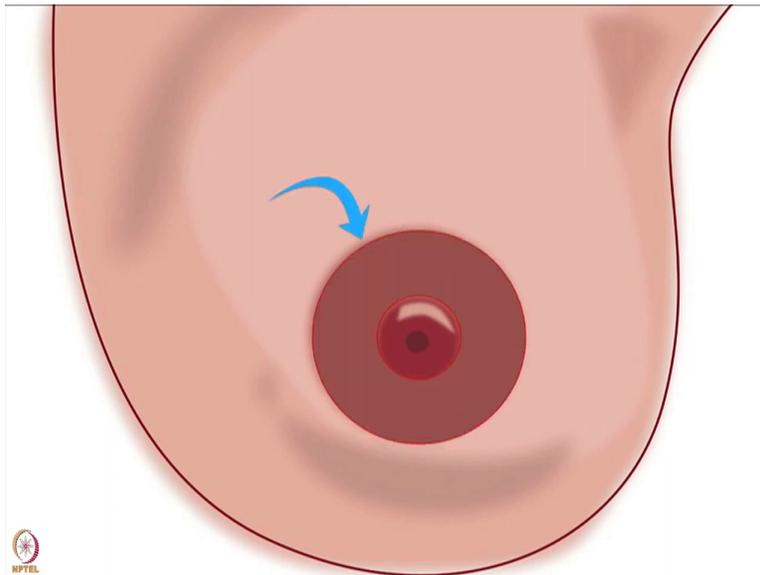
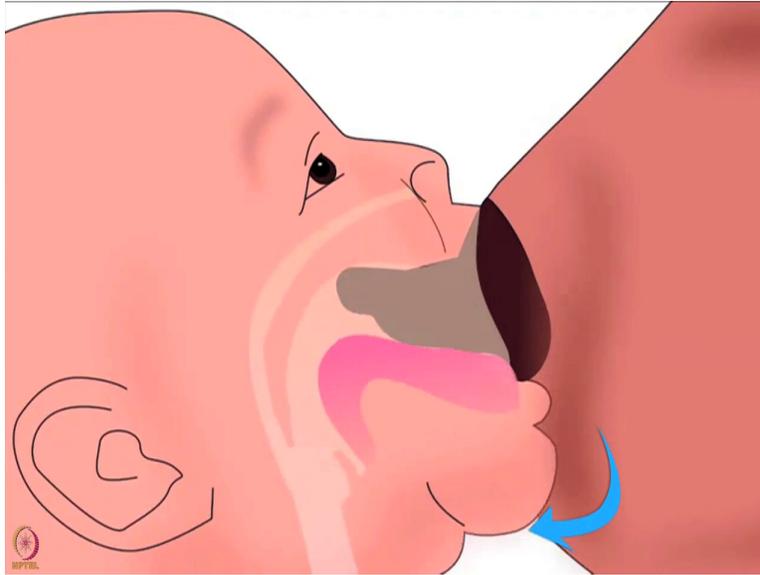
Next, let us learn how to position baby's body correctly. The baby's face should be facing the mother. Baby's body should gently press against the mother's body. Lesser distance between their bodies will reduce the baby's effort to reach the breast and it will become easier for the baby to attach deeply. The second point in positioning is the baby's body alignment.

When we eat food, our head, neck and body are always in the same direction. Similarly, baby's head, neck and body should always be in the same direction while breastfeeding. This will make swallowing milk easier for the baby. Now, we come to the third point in positioning the baby's body. The mother should support the full body of her baby. Otherwise, the baby will have to take a lot of effort to attach deeply to the breast.

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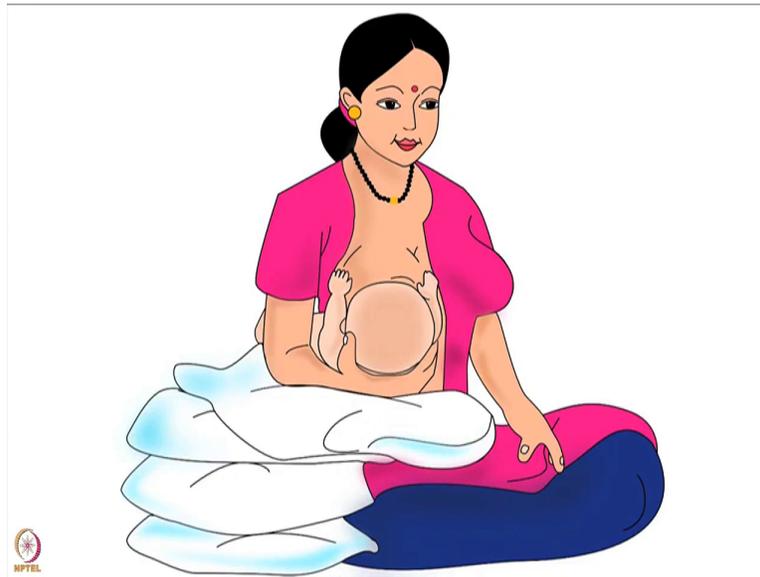


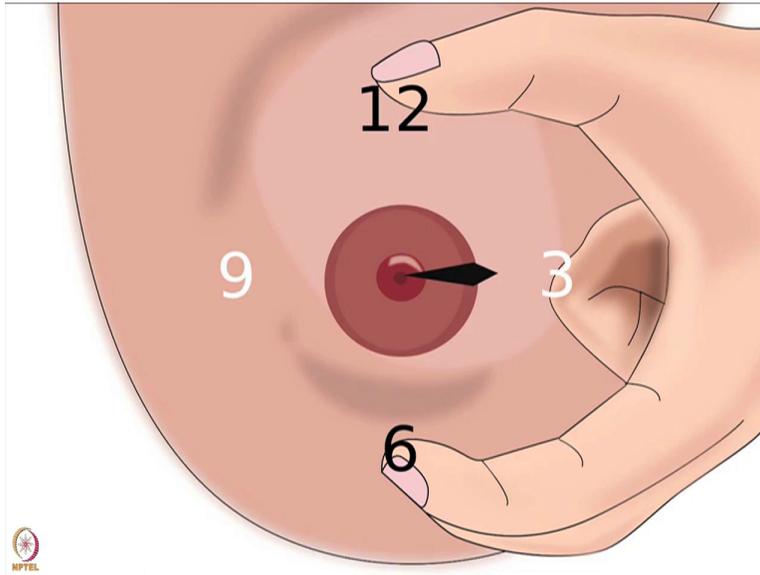
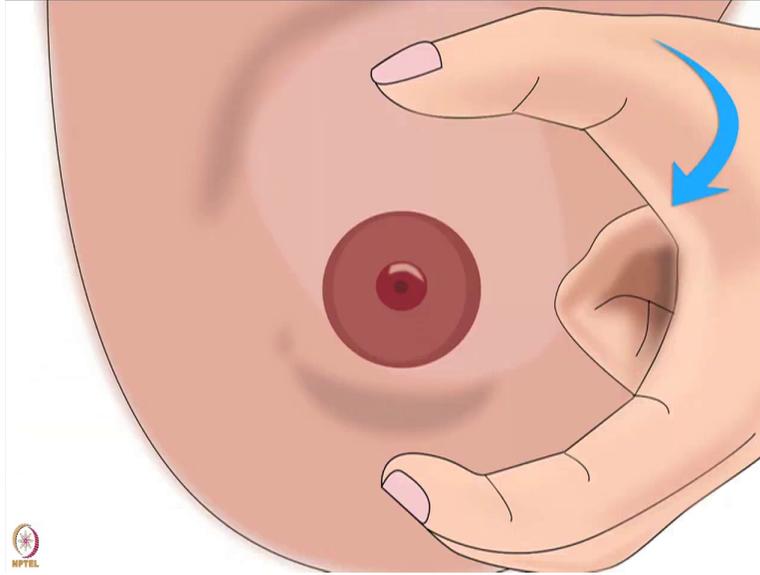


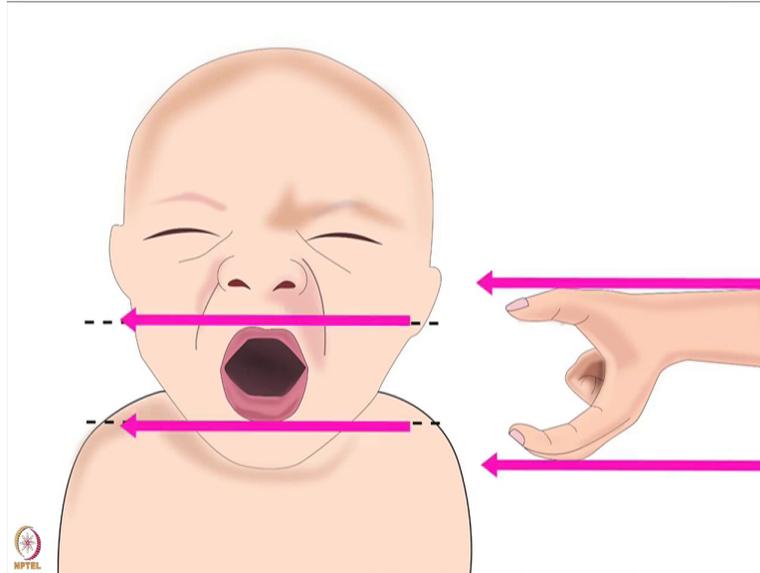


Next, let us look at the position of the baby's nose and chin. Baby's nose should always be in line with the nipple and her chin should be forward and very close to the breast. This will ensure that the baby takes in more of the lower part of the areola while latching and therefore will use the lower jaw to drink more milk efficiently. Please note areola is the dark area around the nipple.

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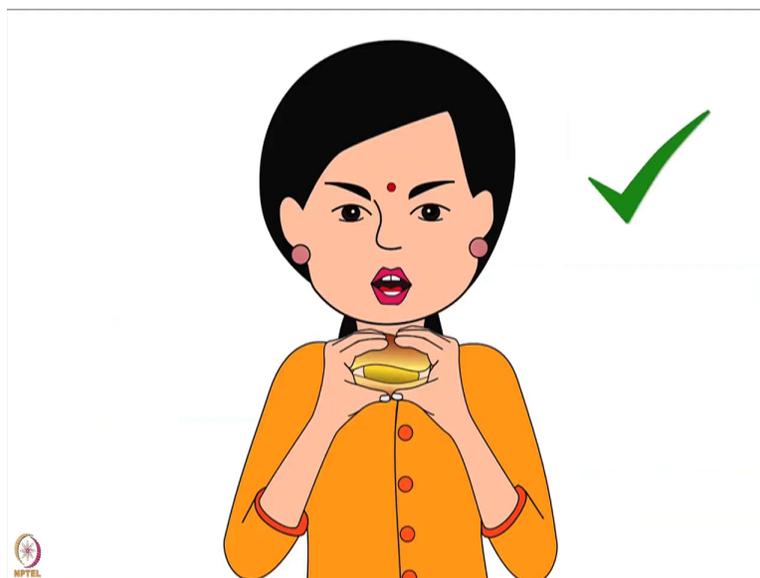


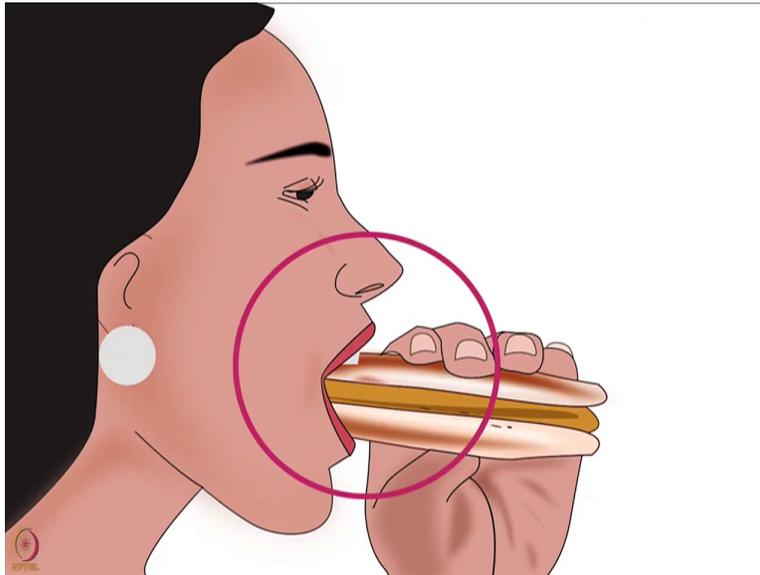
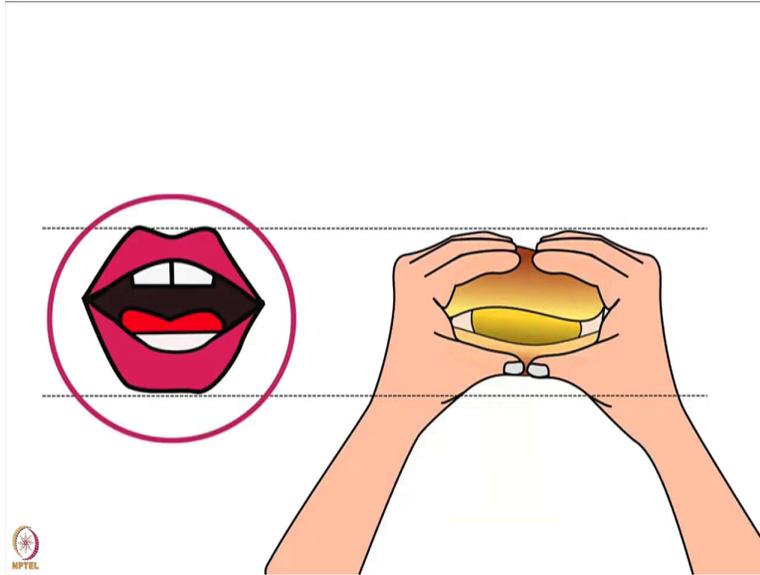


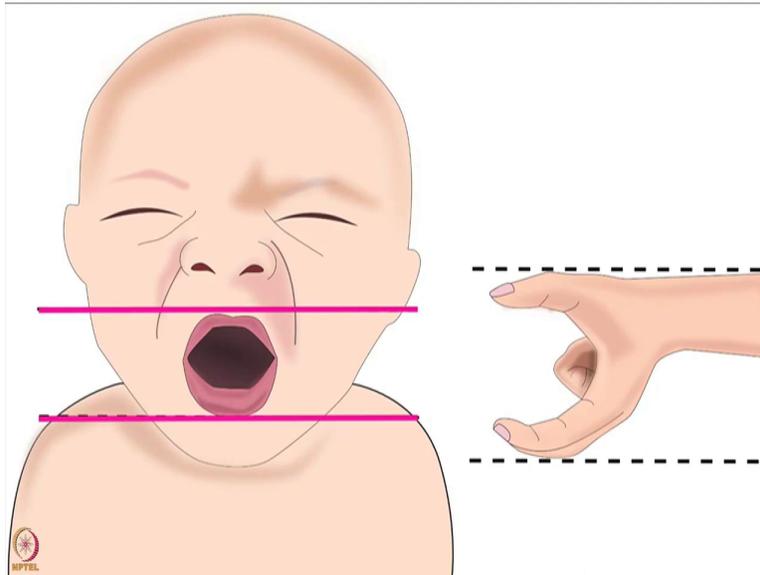
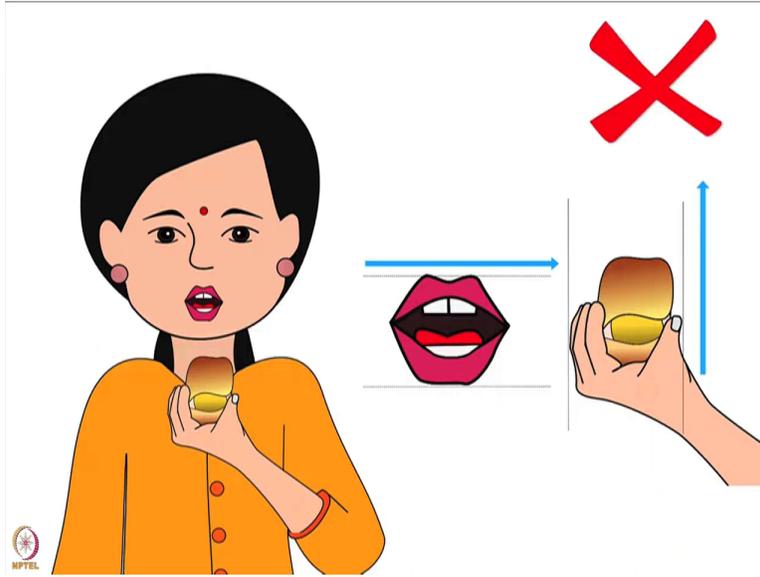


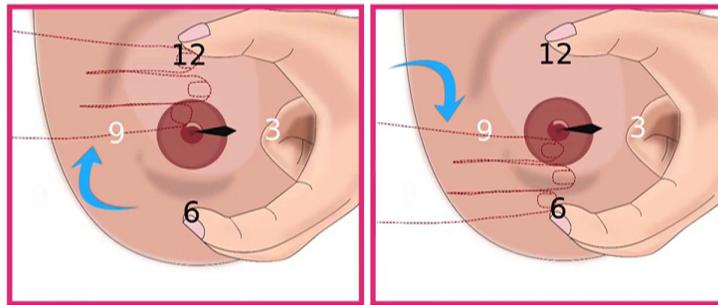
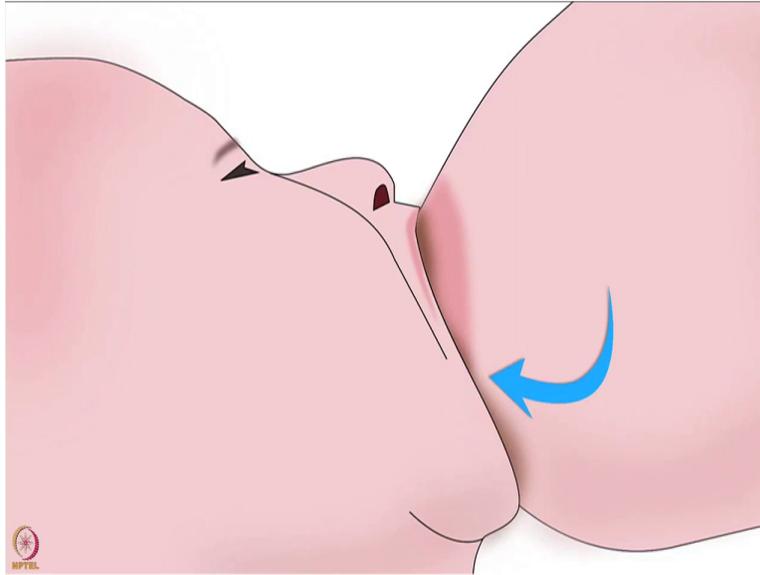
Now, that the baby is positioned correctly, let us learn how to hold the breast. Using the fingers of her other hand, the mother should cup her breast from the side in a C shape hold. The mother in this picture will use her left hand to hold her right breast. To understand the correct position of thumb and fingers, imagine the nipple to be the center of a clock on the right breast. She should place her left thumb at 12 o'clock position on this clock, while her left index finger and middle finger should be placed at 6 o'clock position. The fingers should always be in the direction of the baby's lips.

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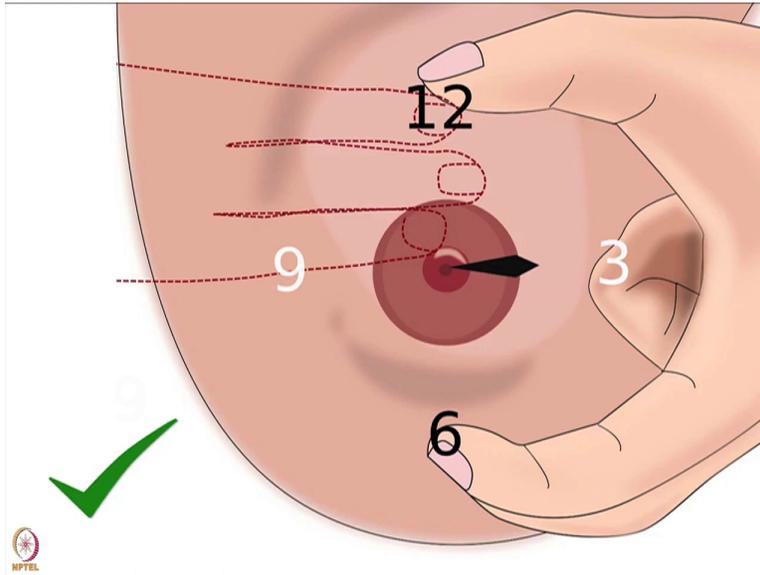
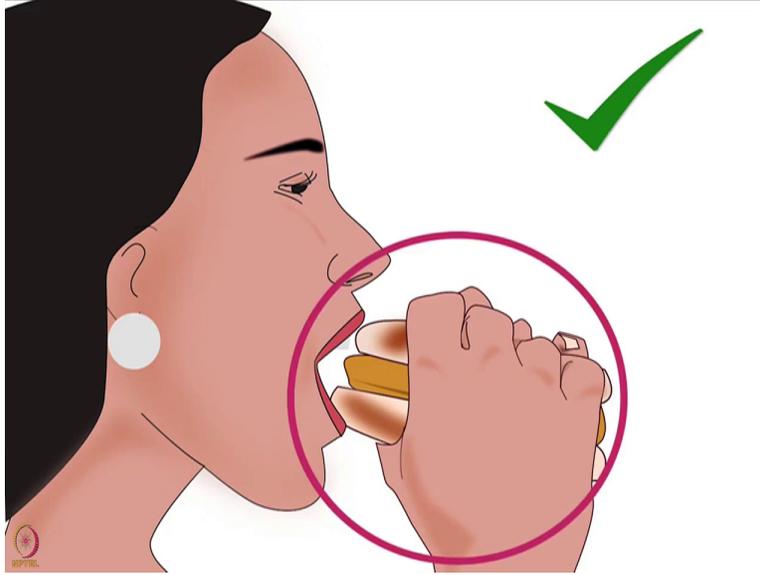


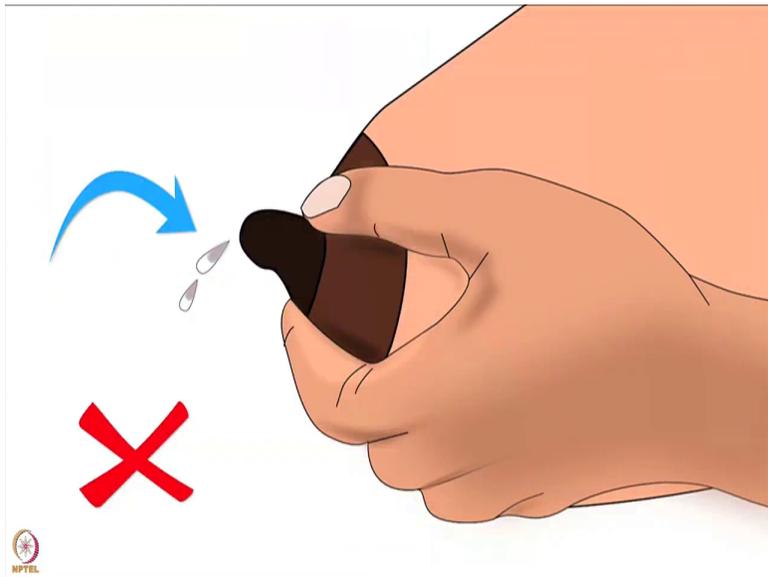
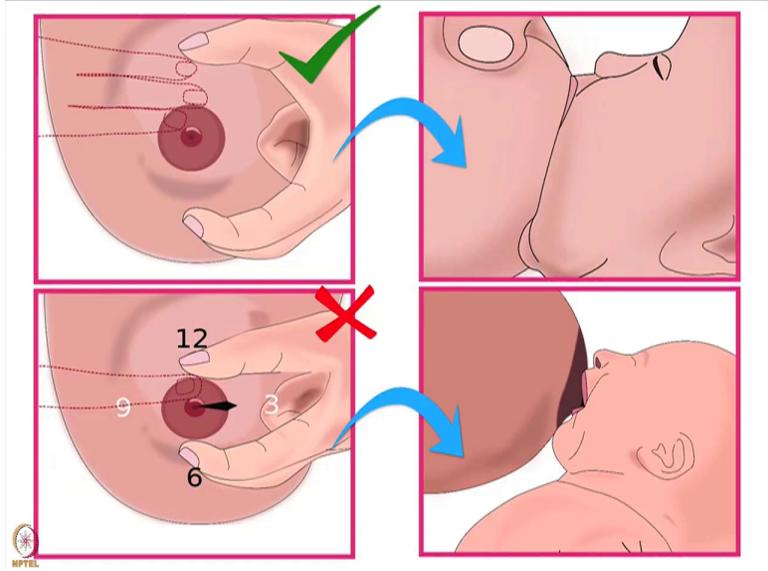


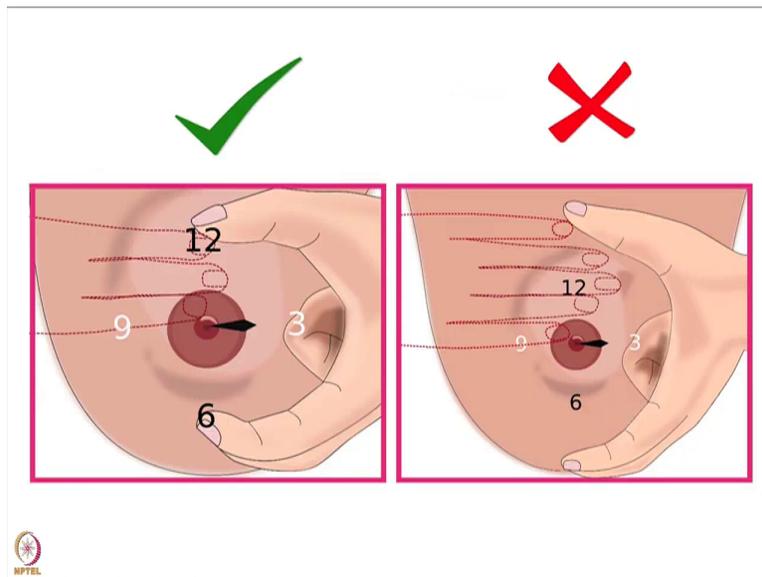
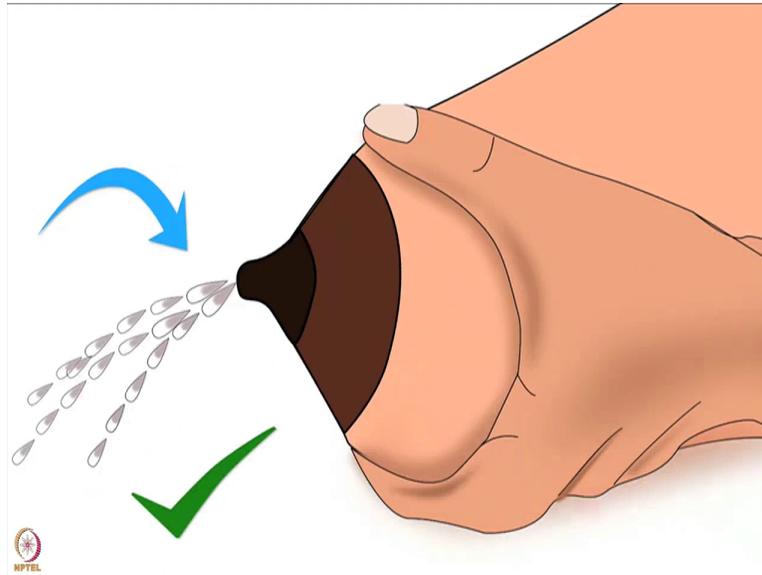












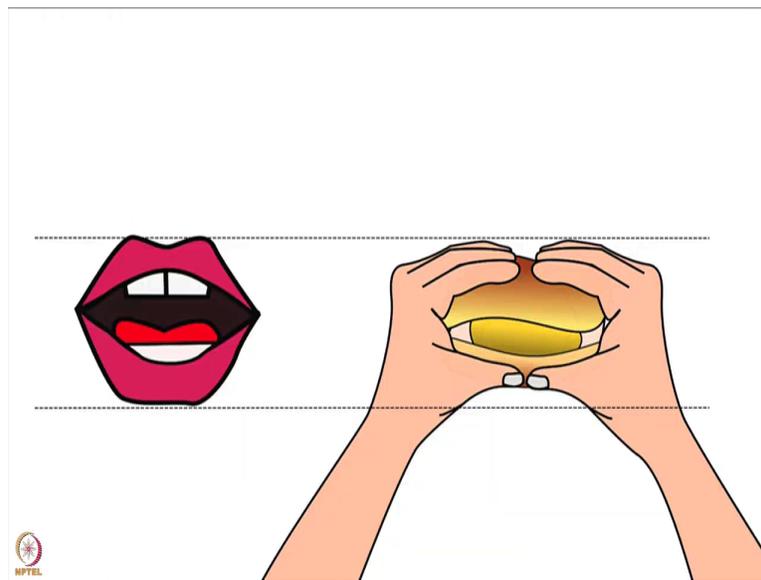
Why? Let us understand this using a simple example. When we eat a vada pav or burger, our lips open horizontally. We hold the vada pav or burger horizontally to take a big bite. Here the thumb and fingers are placed in the direction of the lips. If we hold the vada pav or burger vertically, we would not be able to take a big bite. Similarly, observe the direction of the baby's lips. The lips are horizontal here. Therefore, the fingers and thumb should also be positioned horizontally on the breast. This will help the baby to take a big part of the lower areola in her mouth.

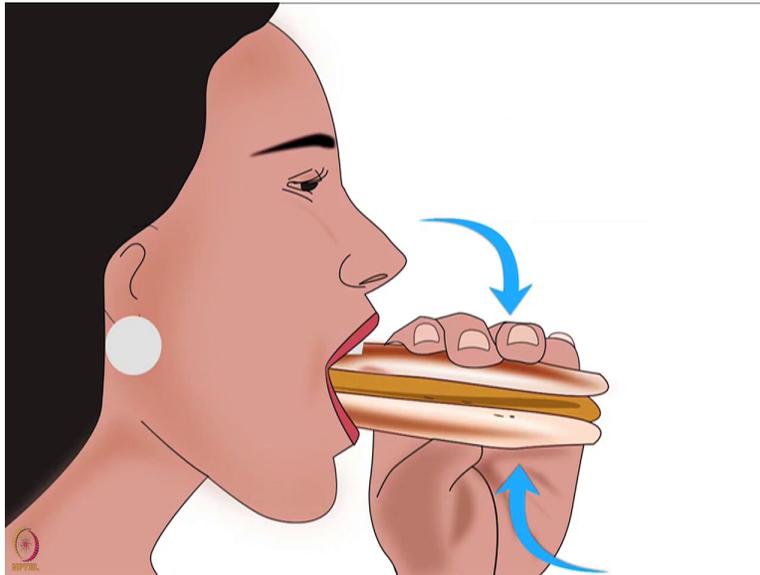
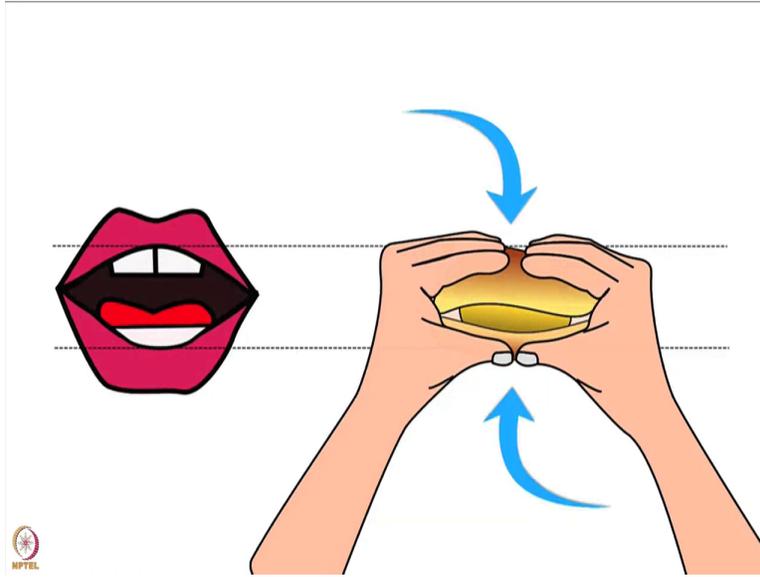
Apart from being in the direction of the baby's lips, the mother's thumb and fingers should always be at a distance of three fingers from the nipple. Again, while eating a vada pav or burger,

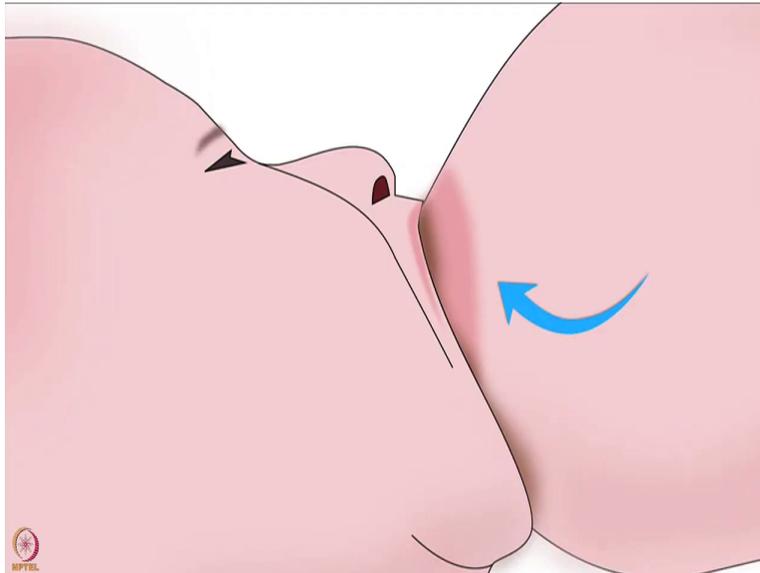
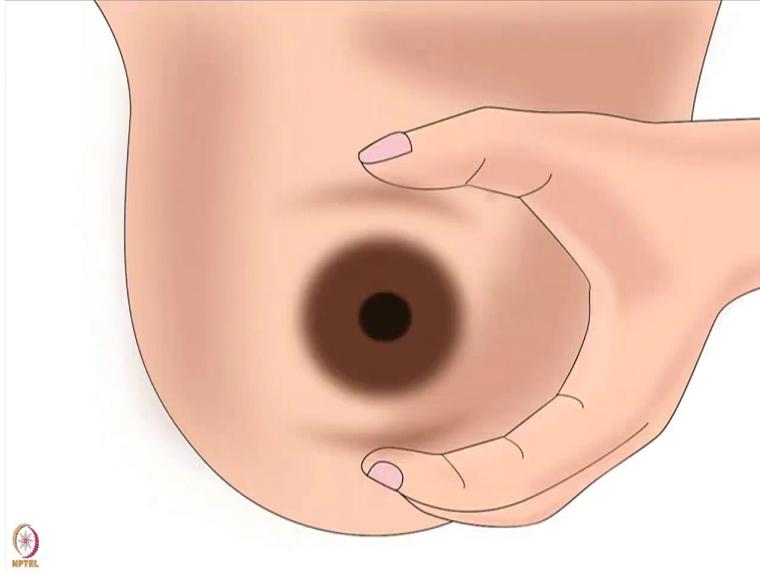
if we hold it too close, our fingers will block our mouth from taking a big bite. If we hold it too far away, it will not be shaped correctly to fit in our mouth. Therefore, we hold it at the right distance to take a big bite. Similarly, for the baby, the right distance is of three fingers from the nipple as shown in this picture.

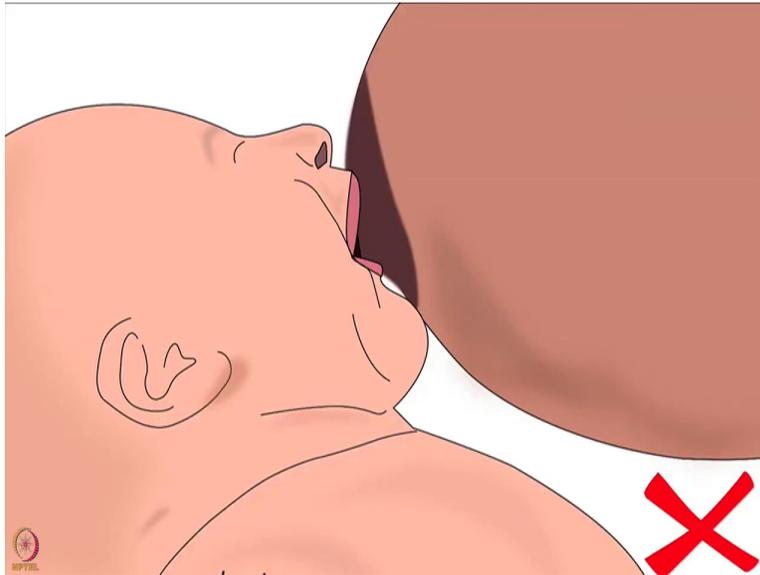
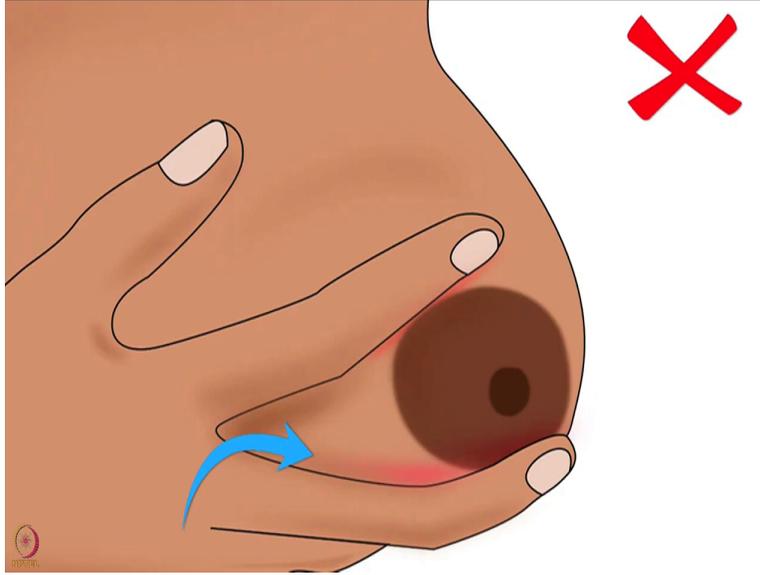
This distance will ensure that mother's fingers do not block the baby from taking the lower areola in her mouth. Mother does not compress only the nipple, which will give very little milk. Mother compresses the larger milk ducts beneath the areola to express more milk out and the breast is shaped correctly to help the baby attach deeply. Remember, mother's thumb should be on the upper side of the breast and her two fingers should be on the lower side of the breast as shown in this picture.

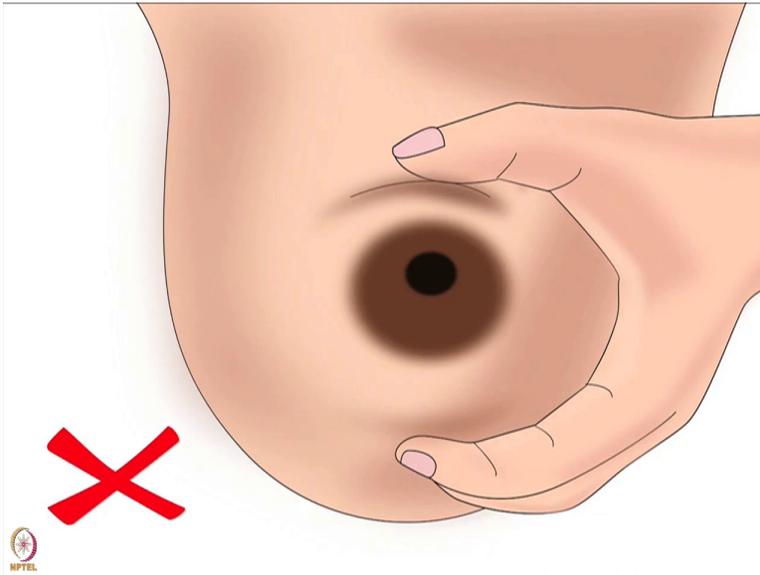
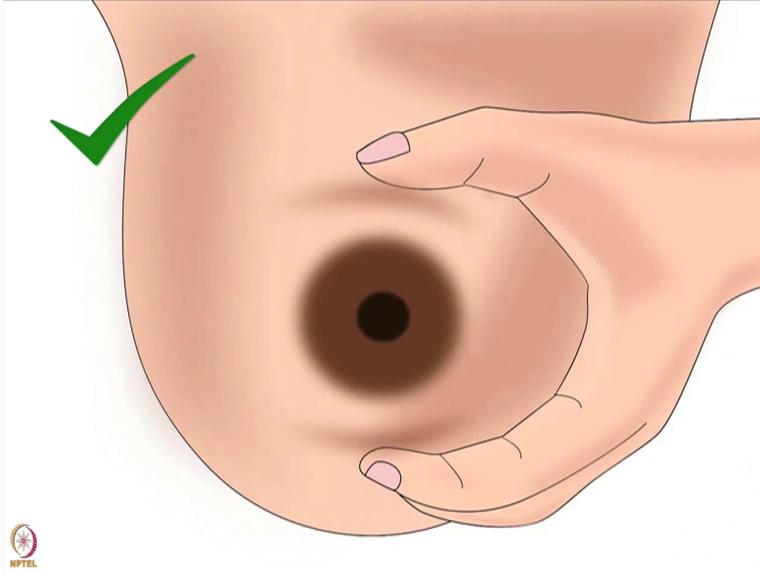
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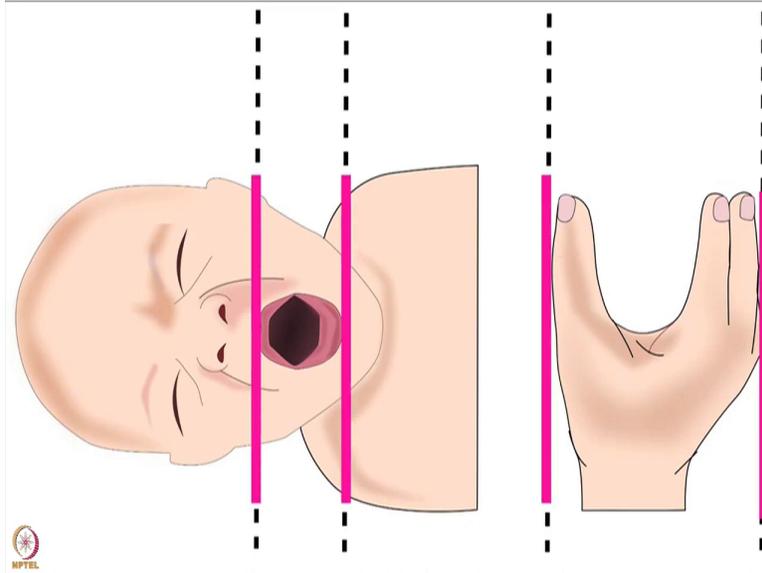


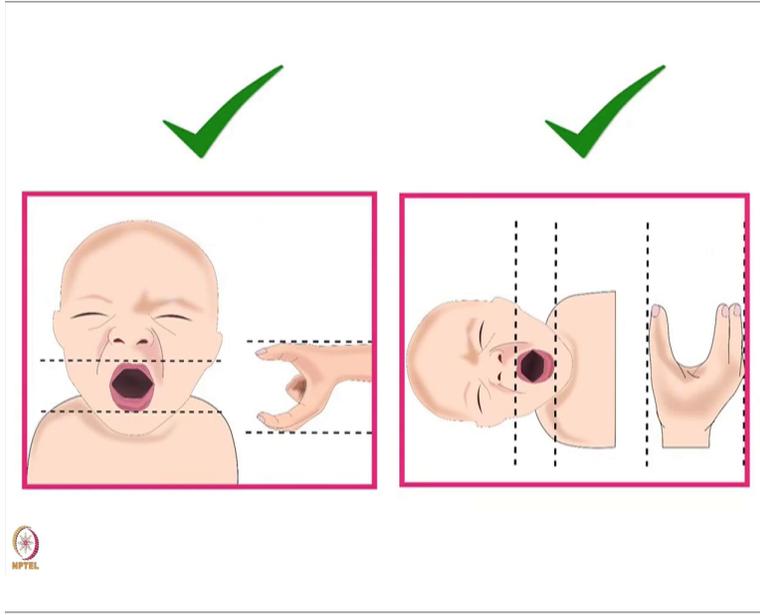


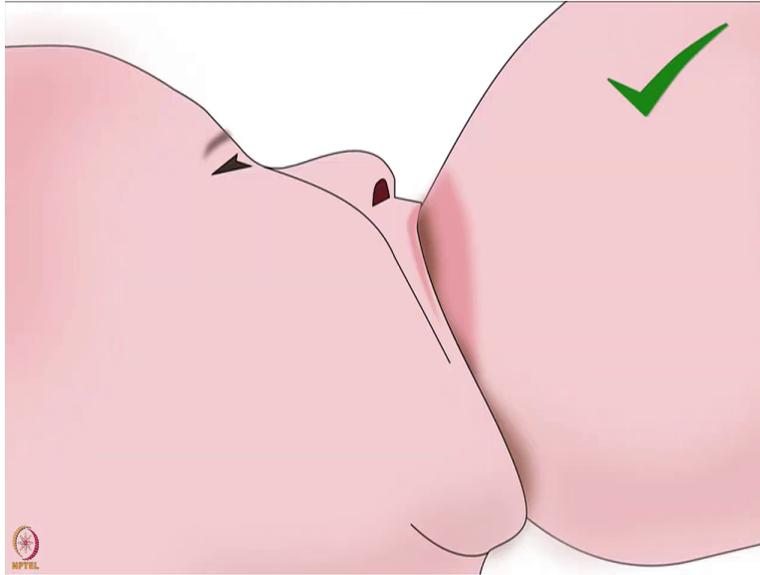












Spoken Tutorial Project, IIT Bombay

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Domain Review:

Dr. Rupal Dalal, MD Pediatrics, IBCLC



Tasneem Shaikh

Football Hold for Breastfeeding

DISCLAIMER

The information shared in this Spoken Tutorial is provided by domain experts and professionals. However, it is not a substitute for a qualified medical opinion.

In case of a doubt or further query, please consult a doctor or a nutritionist or a dietitian or a lactation consultant trained in Maternal, Infant and Young Child Nutrition.



Let us go back to the example of vada pav or burger. After holding the vada pav or burger correctly, we always compress it to take a big bite. Similarly, the mother should lightly compress her breast in a C shaped hold from the side. This will help the baby to take a big part of the breast in her mouth. But remember mother should not compress her breast in a scissor shape hold. scissor shape compression will pinch the breast and cause nipple feeding. Also make sure that there is equal compression of the breast with the thumb and the fingers. Otherwise, the nipple will shift either in the upward or downward direction and lead to poor attachment.

Sometimes, the mother might prefer to hold her baby in a different position. In this picture, the baby is not facing the mother. Baby's head is brought towards the breast from the side of the breast and not from below. Baby's lips are vertical here. Therefore, the mother should position her fingers vertically on the breast in a U-shape hold. Remember, for any breastfeeding position, mother's fingers and thumb holding the breast should always be in the direction of the baby's lips. Now, the baby is in football hold and ready to latch on for breastfeeding. The correct latching technique is explained in another tutorial in the same series.

Once the baby is latched on correctly and if the breast is not too big and heavy then the mother can release the breast from her hand and keep that hand free. This brings us to the end of this tutorial. Thank you for joining.

Professor Rupal Dalal: Hi. So, now we are going to discuss about the cradle hold. Cradle hold is a traditional hold. There are few changes that we have done. Do remember those changes. Of course, when the baby is small, I do prefer cross cradle hold because you have a good neck control and extension is possible with the cross-cradle hold.

But if you have bigger babies and you want to now kind of teach mother's cradle hold, so in cradle hold what I do recommend is to again the same concept, you try to bring the baby more kind of lower down here. It becomes difficult to have a full body support. But what you can do is to probably put a pillow or something.

One thing I want to tell you that I do not recommend pillows while mother is latching the baby. Because while mother is latching the baby, especially in cross cradle hold, sometime the pillow is too high up, sometime the pillow is too low up. I want mothers to learn the latching without the pillows. Once the latch is done then she can immediately put the pillow.

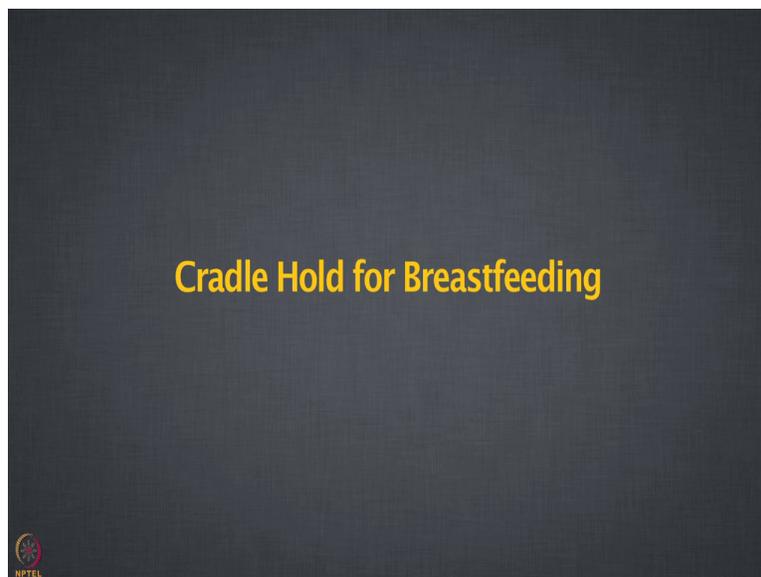
But one point which I want to definitely mention is do not put the pillow while mother is learning to latch. So, here in this position, you try to basically ask the mother to kind of bring the hand little bit more kind of towards the body own body, so baby is, baby comes, baby's nose is lower than the nipple.

And then this position again here you will have to hold a baby kind of breast from the top because here the upper lip is at 3 o'clock position, this is my right side, so the upper lip is at the 3

o'clock position and the lower lip is at the 9 o'clock position. So, my fingers would be right where the upper lips are. So, I will be holding the hand from top. And in this position it would be difficult to see whether baby has opened 120 degree mouth or not.

And that is why again this cradle hold becomes difficult. Yes, after baby is 2 months, 3 months she already, baby knows how to open the big mouth and mother knows everything. But while mother is learning all this over the hindrance. This was the problem that I was facing in the field. So, this is your cradle hold. Do watch it. If a mother is kind of, mother wants to do cradle hold, absolutely okay. Tell her to watch it and make her understand the concept.

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Cradle Hold for Breastfeeding

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Script and Narration: Tasneem Shaikh

Graphics and Animation: Shital Joshi



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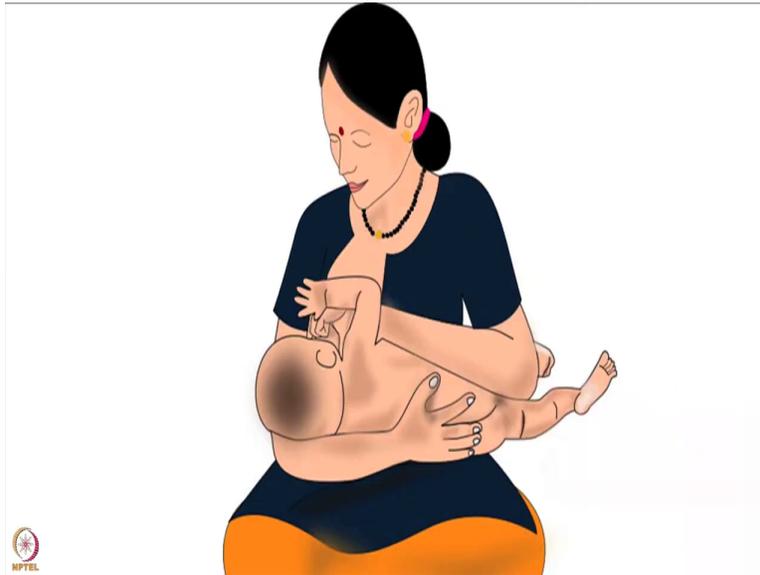
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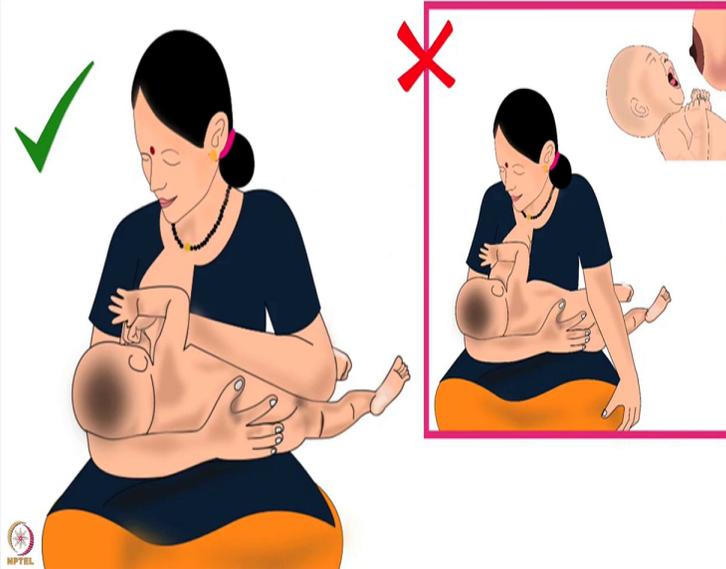


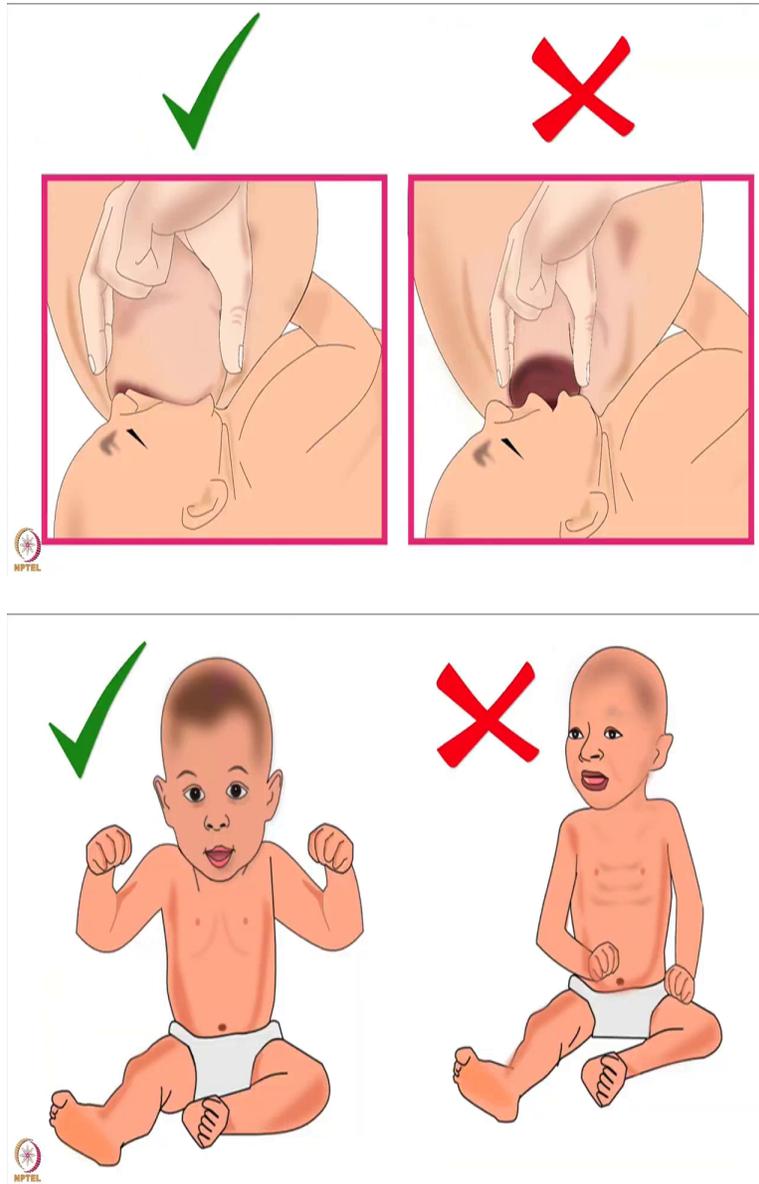
Tasneem Shaikh

Cradle Hold for Breastfeeding









Narrator Tasneem Shaikh: Welcome to the spoken tutorial on cradle hold for breastfeeding. In this tutorial, we will learn about choosing the correct breastfeeding hold for a mother and her baby, mother's preparation before breastfeeding, and how to do the cradle hold. Let us begin. Across the world, mothers breastfeed their babies using various types of holds. As discussed in an earlier tutorial, the best breastfeeding hold for a mother and her baby is the one in which both mother and baby are comfortable for the entire duration of breastfeeding, the baby is able to attach deeply to the mother's breast and get sufficient milk.

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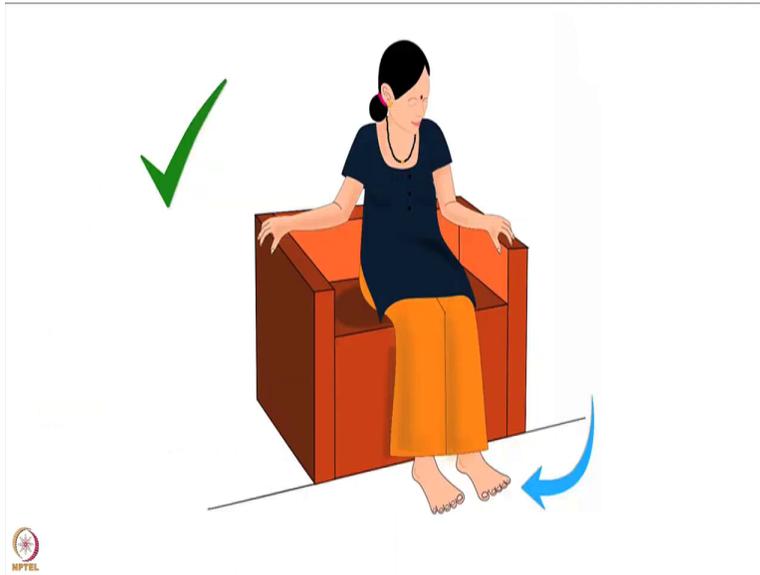
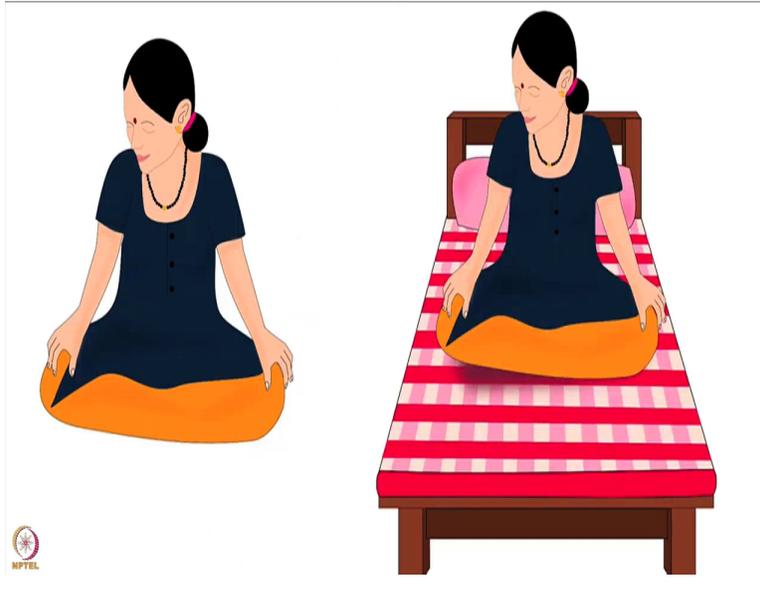


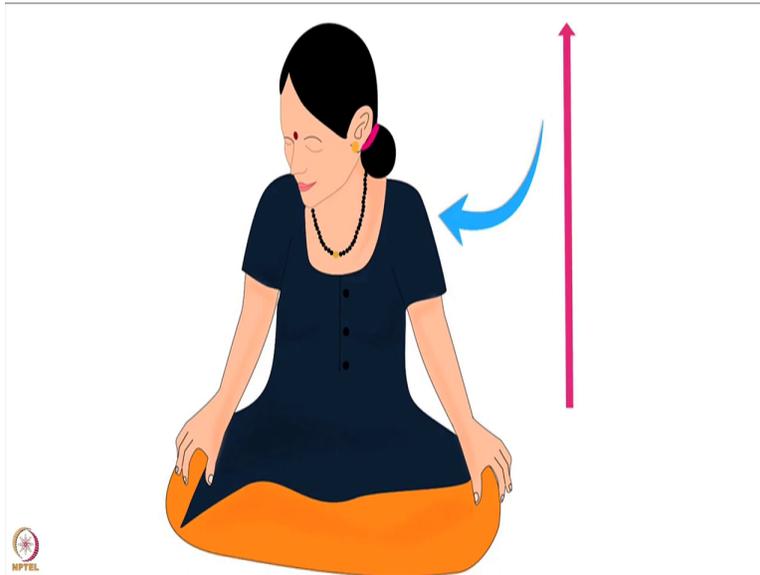
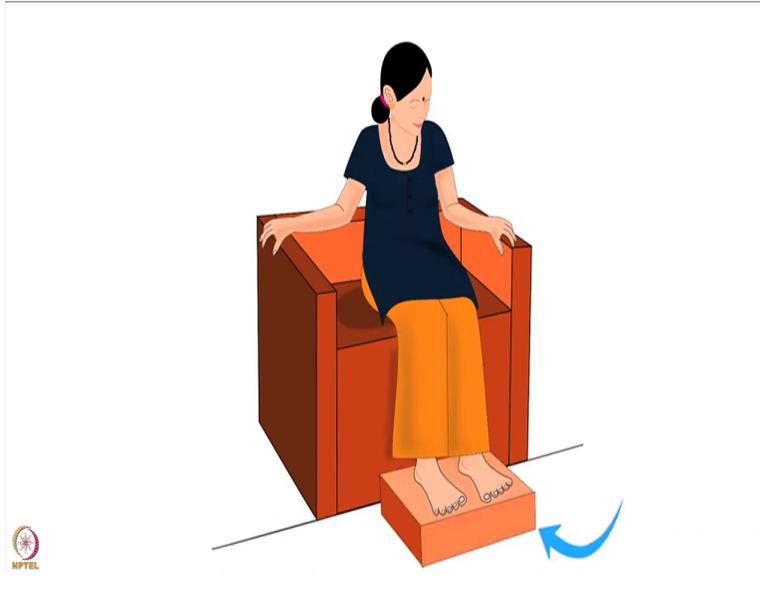


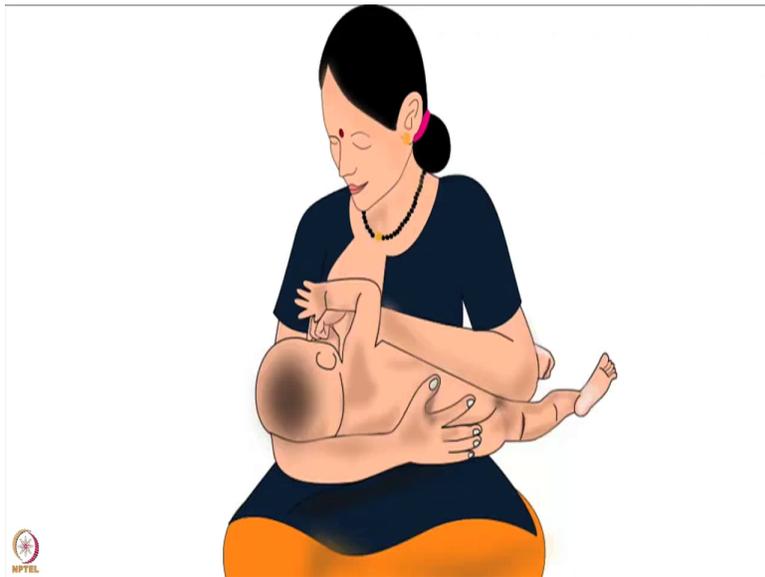
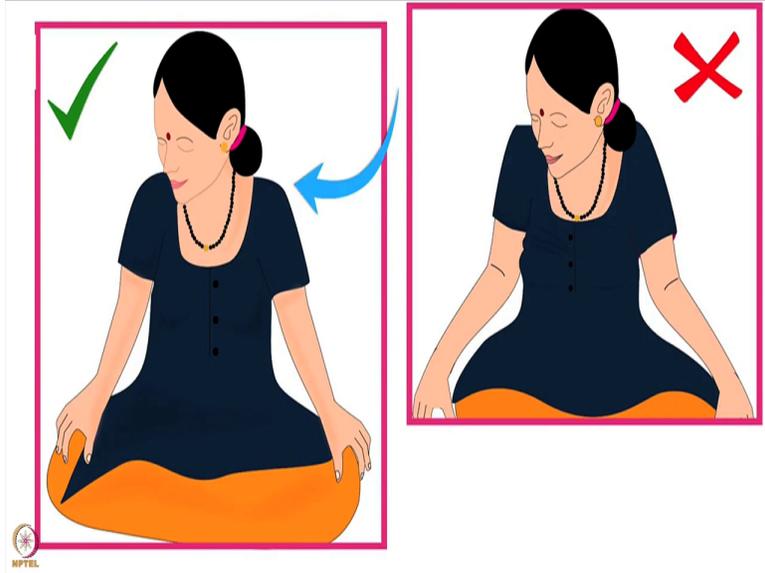


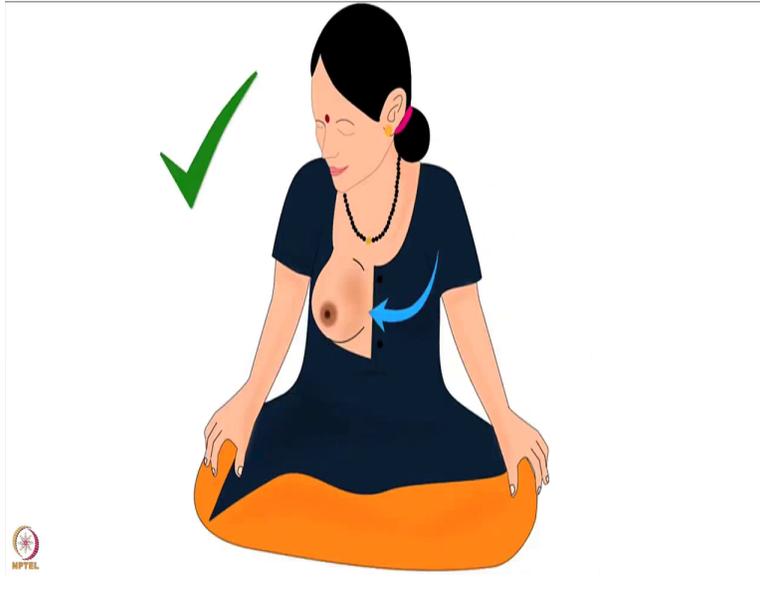
Let us learn about one of the holds called cradle hold. Before feeding her baby, the mother must wash her hands with soap and water and dry her hands properly. Then she should drink a glass of boiled and cooled water. Lactating mothers produce 750 to 850 milliliters of milk per day on an average. Therefore, they need to increase their daily water intake.

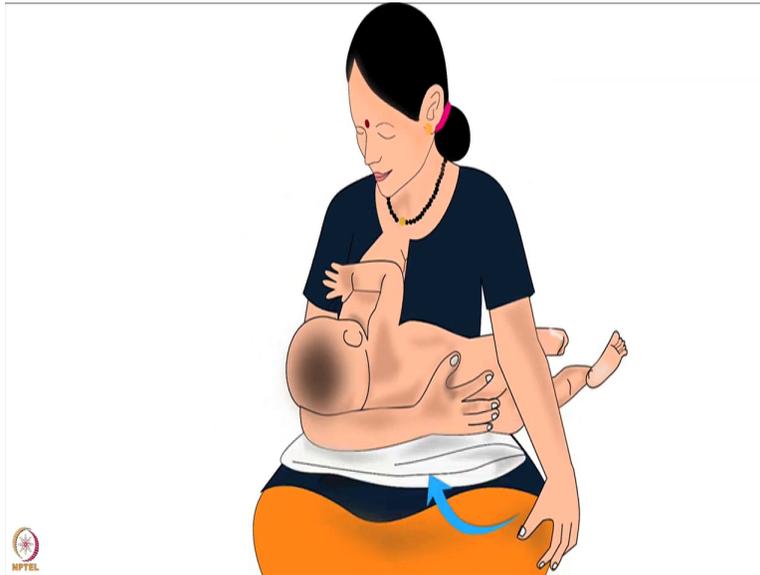
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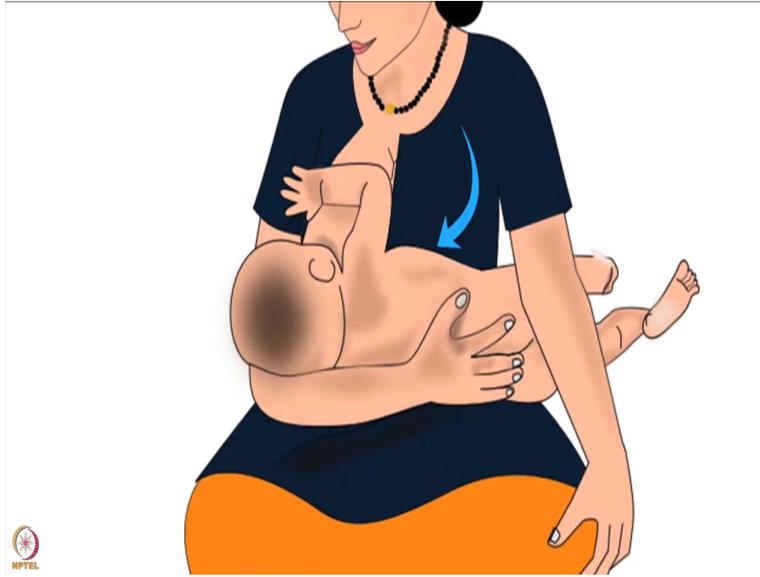


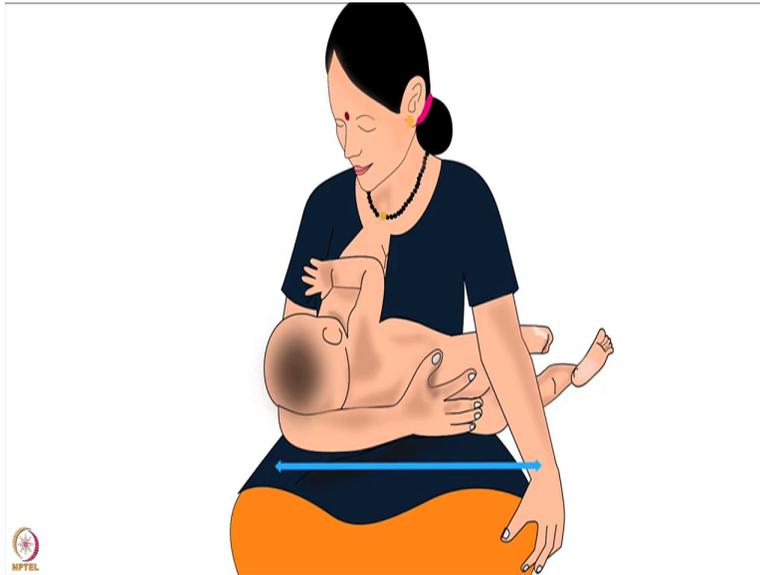
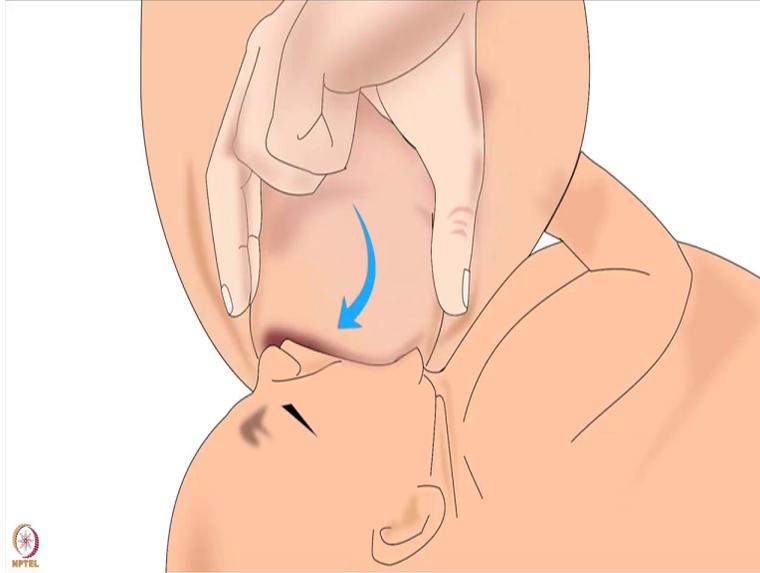
Next, let us discuss the position of the mother. Mother should sit on the floor or on the bed in cross legged position or on a chair with her feet flat on the ground. If the chair is too high and her feet do not reach the floor, then she can rest her feet flat on a small stool or pillows kept on the floor. While sitting she should ensure that her back is straight so as to avoid back pain. Her shoulders are relaxed and not elevated or curved, and this relaxed position is maintained throughout the breast-feeding session.

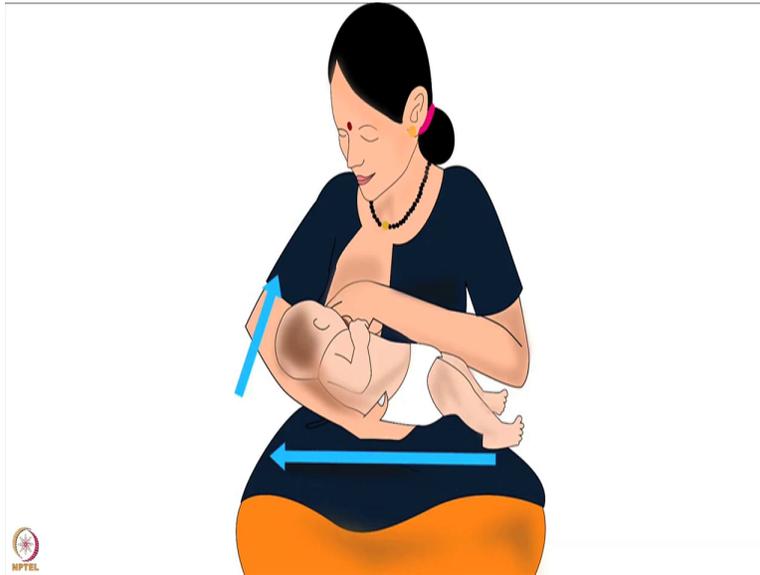
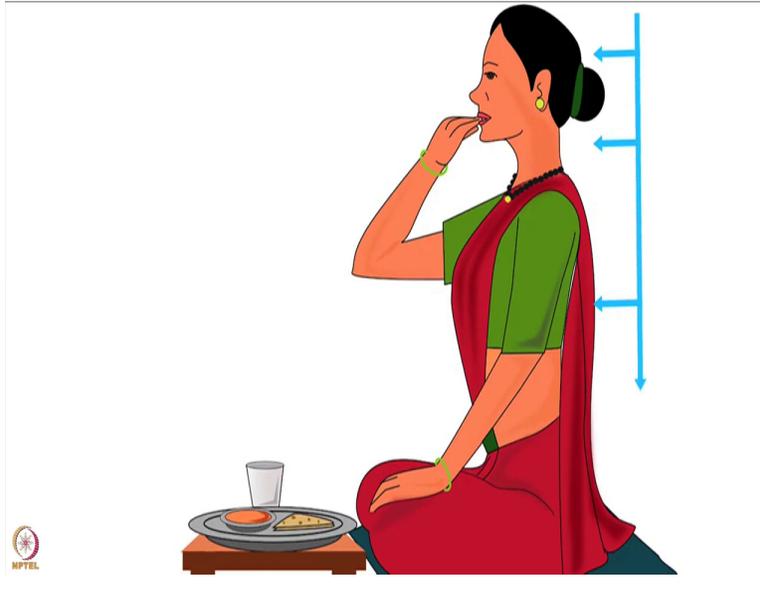
Now, the mother should uncover the breast from which she wants to feed the baby. She should ensure not to put pressure of her bra or blouse on the breast. After sitting comfortably, bring the baby to the mother. Mother should hold her baby with the arm on the same side of the breast that she will feed from. Baby's head should rest comfortably in the inner bend of the elbow of that arm. With the same arm mother should support the head, neck and torso of her baby. The mother in this picture will feed the baby from her right breast. Therefore, she is using her right arm to support the baby's head, neck and torso, and the baby's head is resting in the inner bend of her right elbow.

If the mother wants additional support to lift the baby, she can keep a pillow under the baby on her lap. Remember, the mother should never bring the breast to the baby by bending her back. This will make her uncomfortable and cause back pain. She should always keep her back straight and lift the baby to reach her breast.

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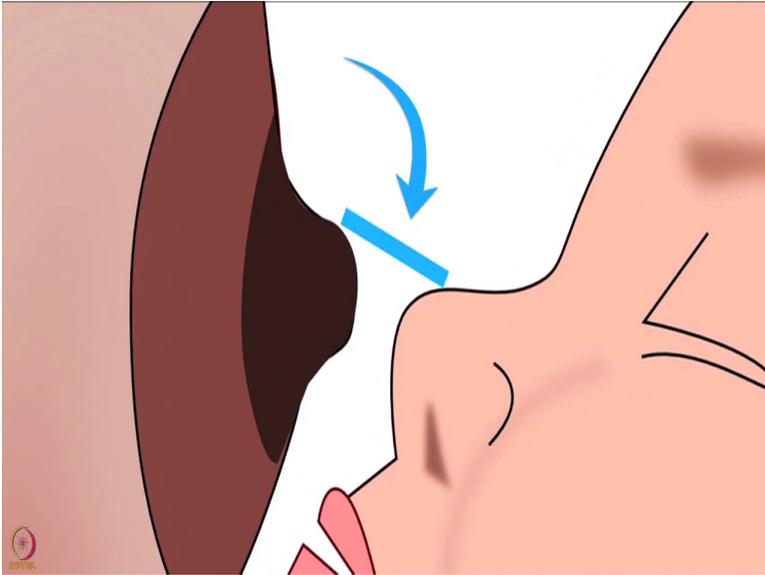
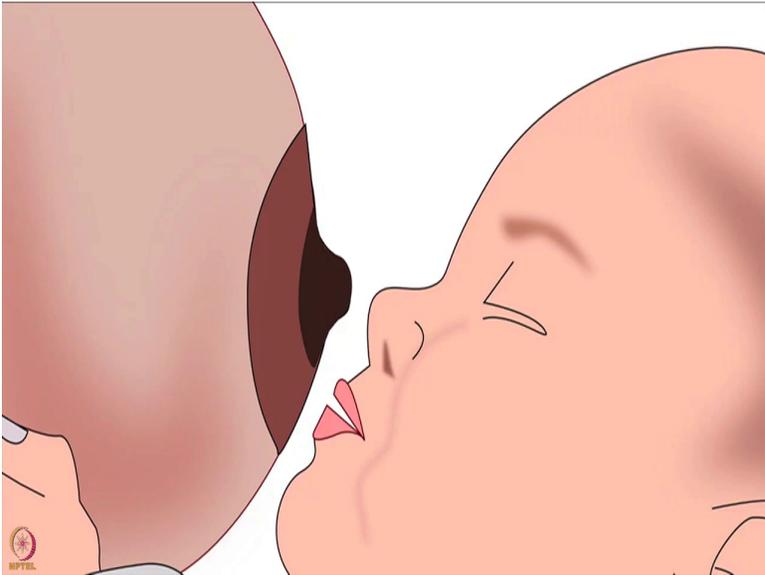


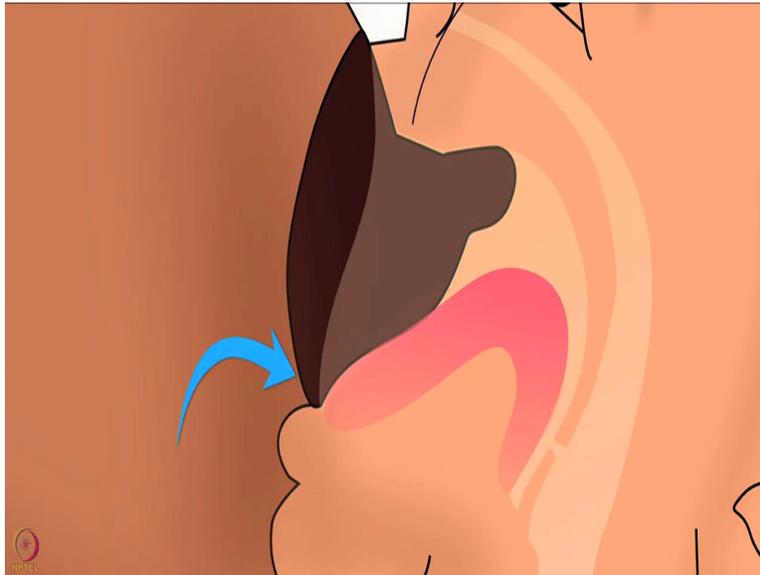
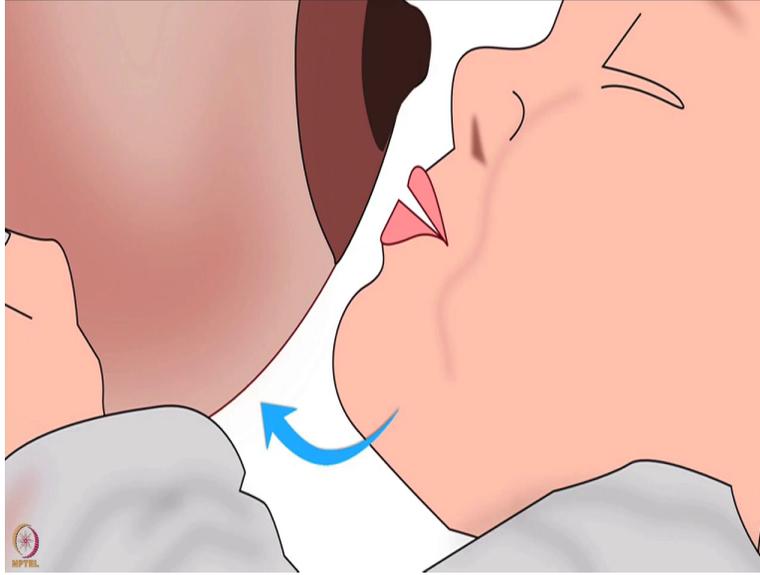
Next, let us learn how to position baby's body correctly. The baby's stomach should be gently pressed by the mother's body. Lesser distance between their bodies will reduce the baby's effort to reach the breast and it will become easier for the baby to attach deeply. Then the second important point is the direction in which the baby's entire body is held.

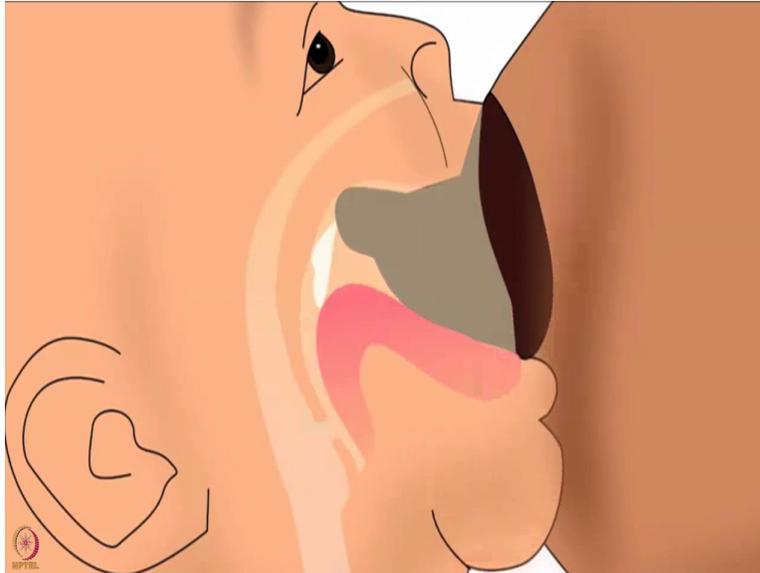
You may have noticed that when we eat food, our head, neck and body are always in the same direction, but while breastfeeding the baby's head is often turned sideways by many mothers. This will make feeling uncomfortable for the baby. Baby's head, neck and body should always be in the same direction while breastfeeding. This will make swallowing milk easier for the baby.

Now, we come to the third point in positioning the baby's body. The mother should support the head, neck and torso of her baby. Otherwise, the baby will have to take a lot of effort to attach deeply to the breast.

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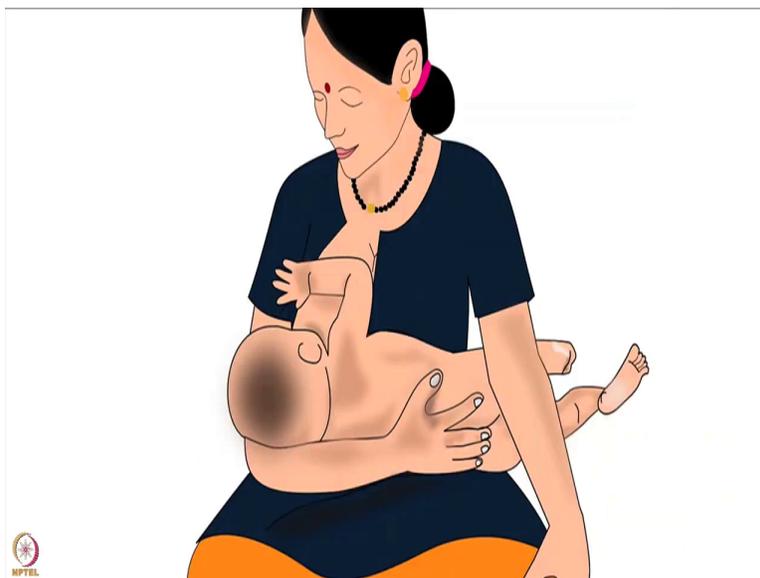


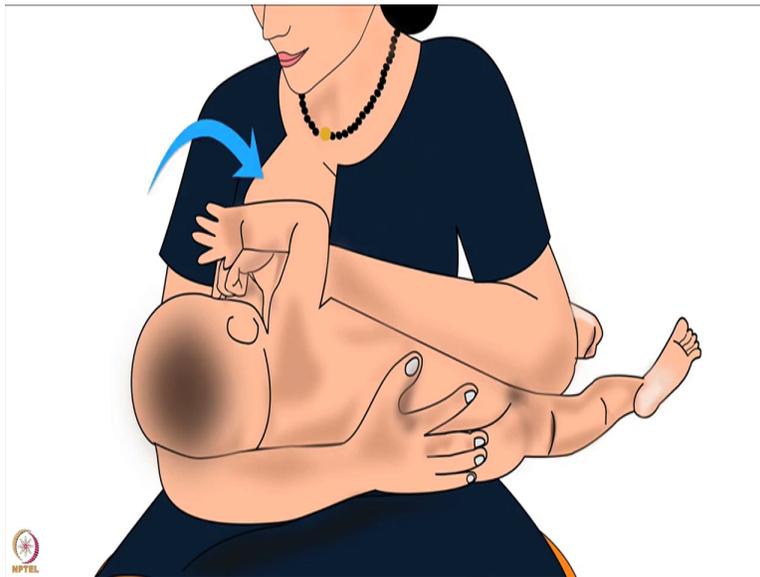
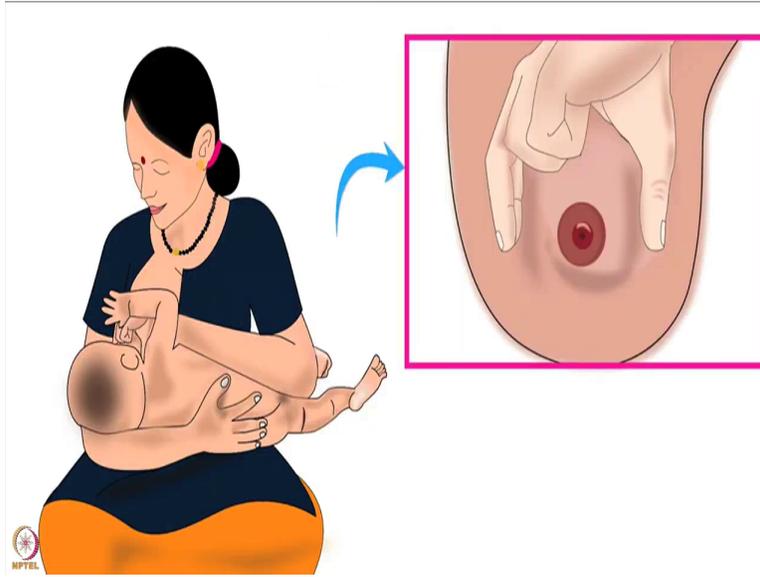


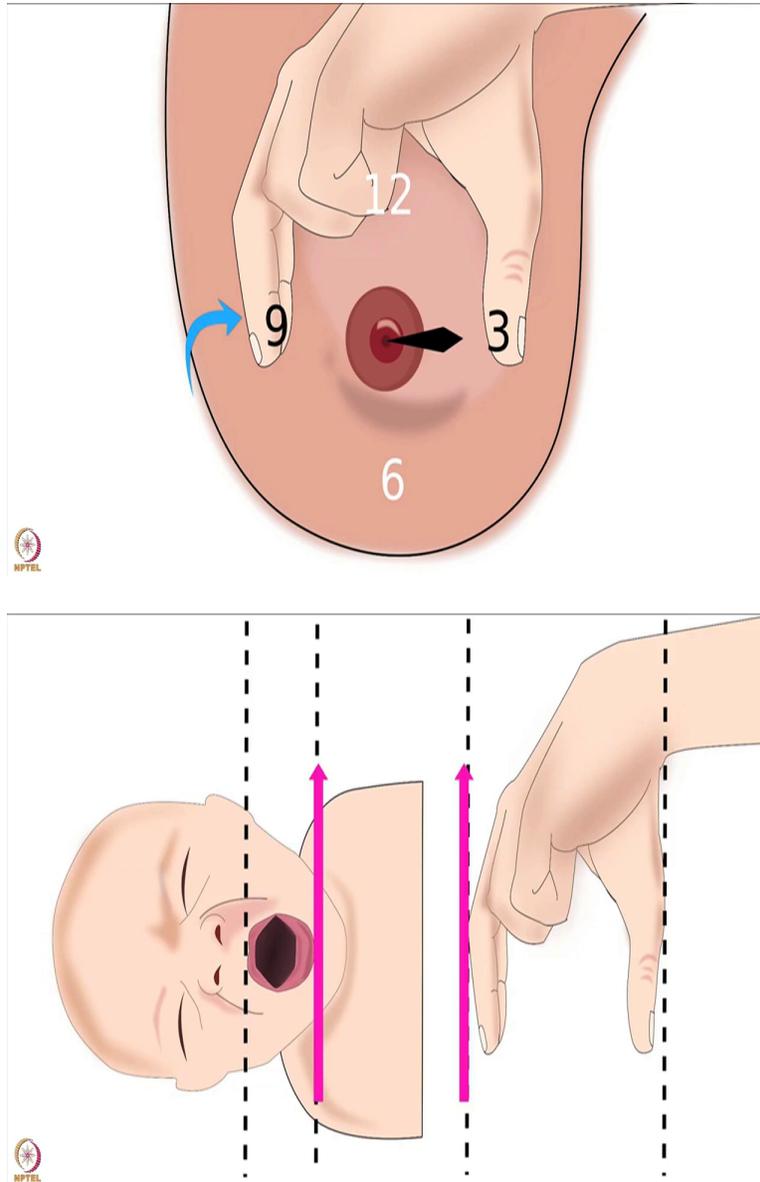


Next, let us look at the position of the baby's nose and chin. Baby's nose should be in line with the nipple and her chin should be forward and very close to the breast. This will ensure that the baby takes in more of the lower part of the areola while latching, and therefore, will use the lower jaw to drink more milk efficiently. Please note, areola is the dark area around the nipple.

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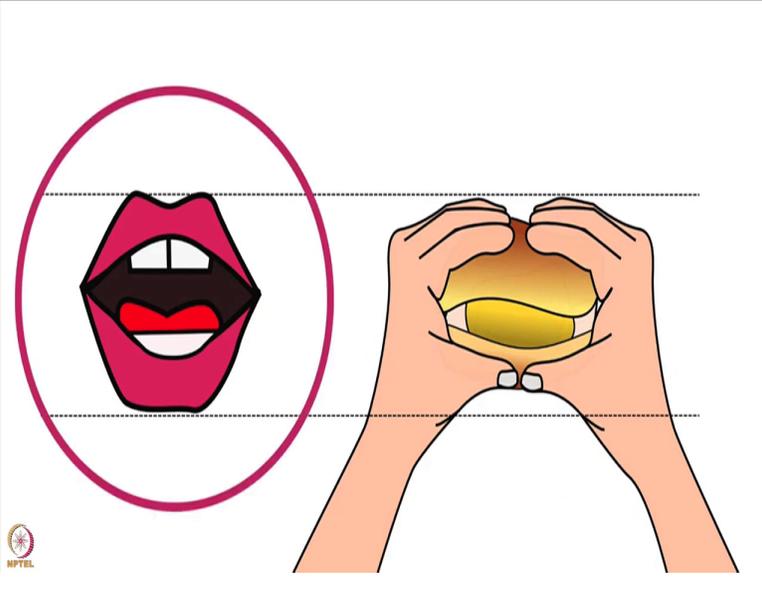
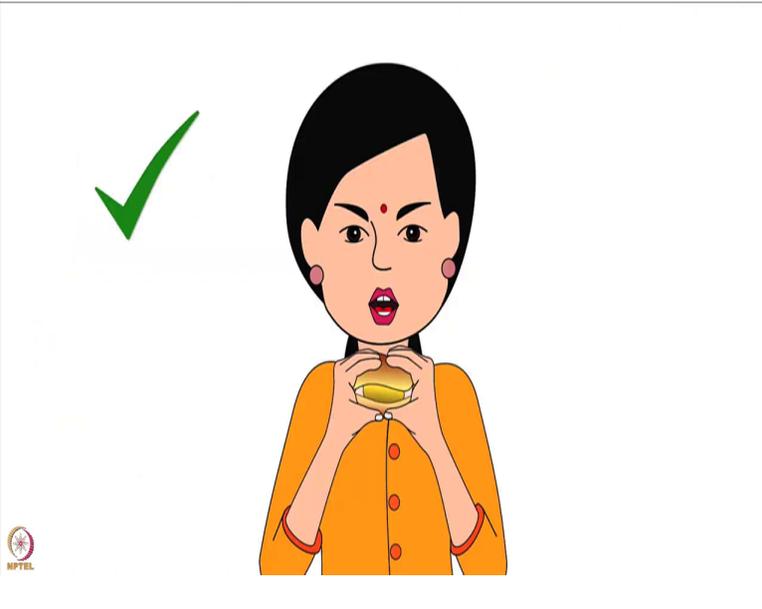


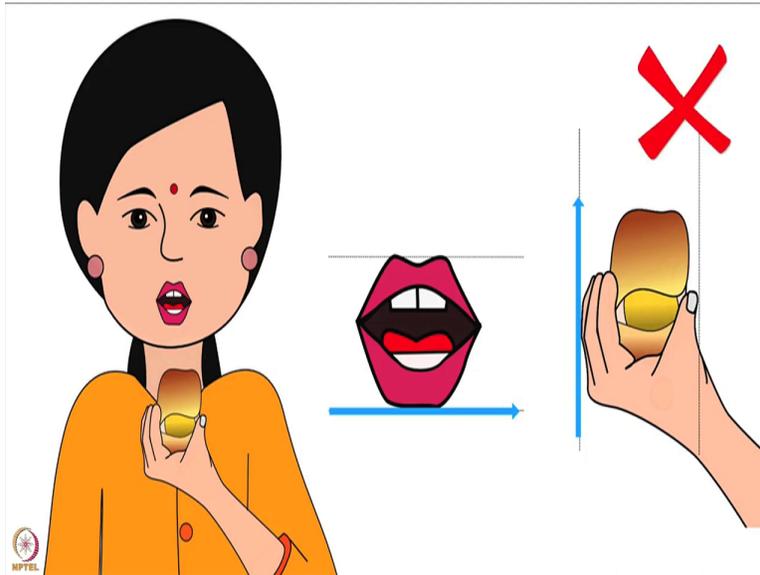


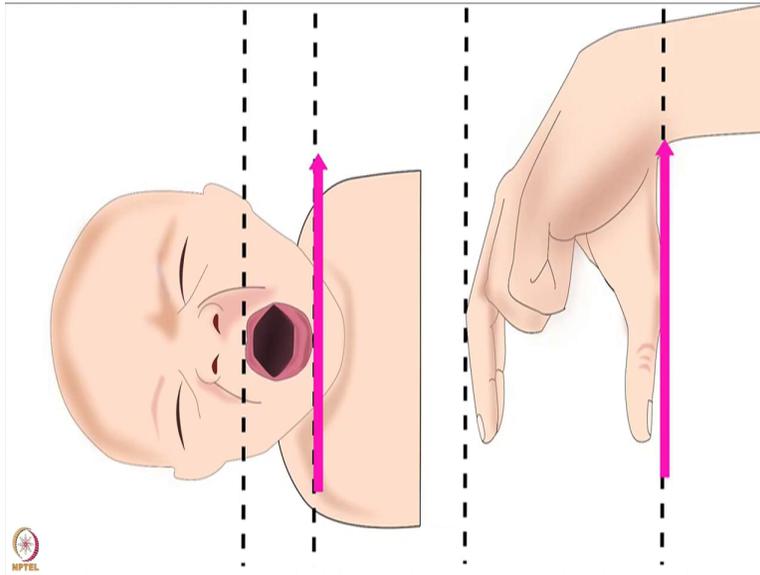
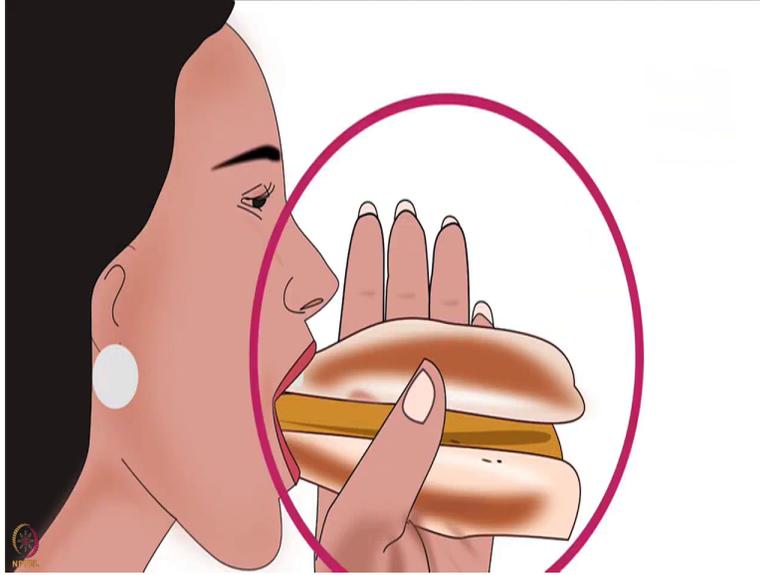


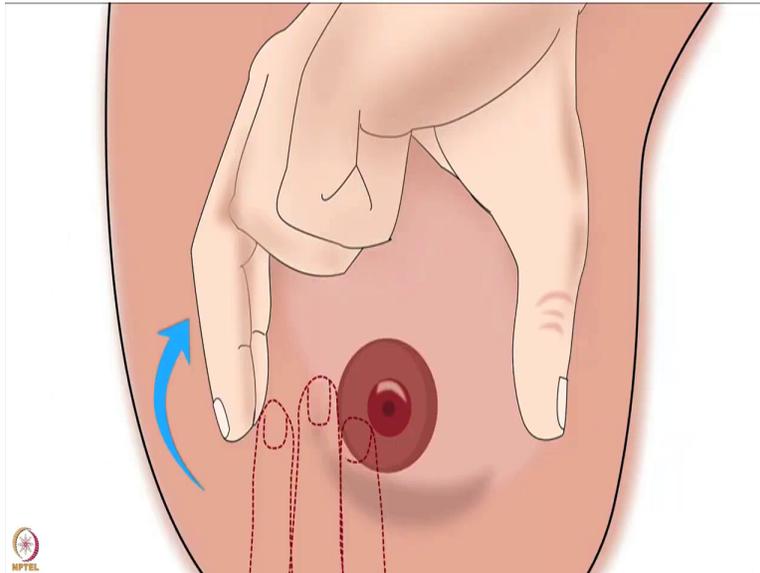
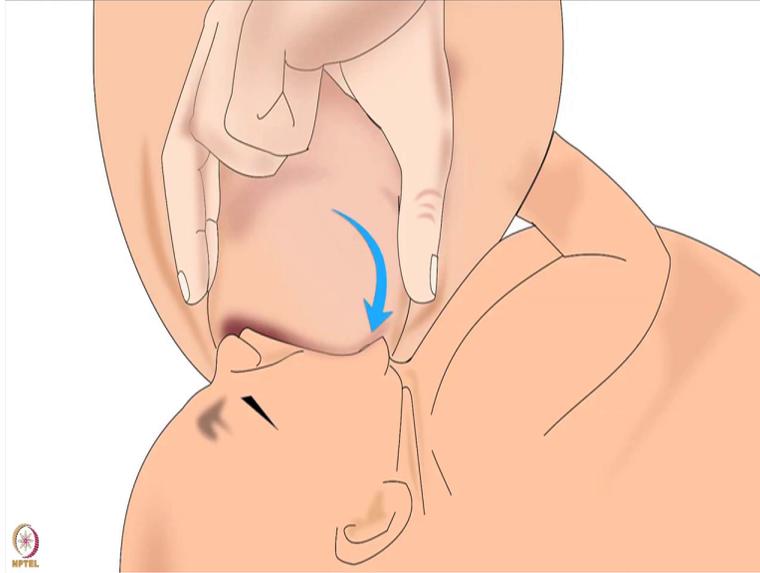
Now, that the baby is positioned correctly, let us learn how to hold the breast. Using the fingers of the hand that is free, the mother should cup her breast in a U-shaped hold from the top. The mother in this picture will use her left hand to hold her right breast. To understand the correct position of thumb and fingers imagine the nipple to be the center of a clock on the mother's right breast. Mother should place her left thumb at 3 o'clock position on this clock, while her left index finger and middle finger should be placed at 9 o'clock position. Mother's fingers holding the breast should always be in the direction of the baby's lips.

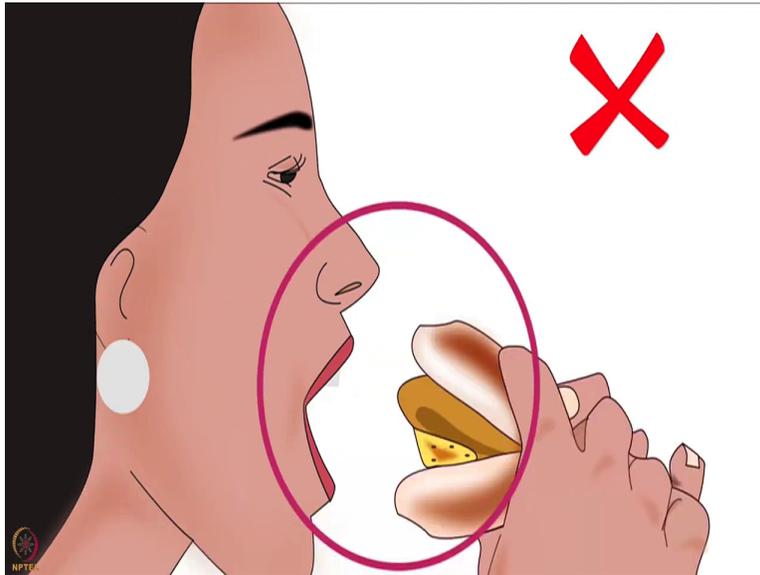
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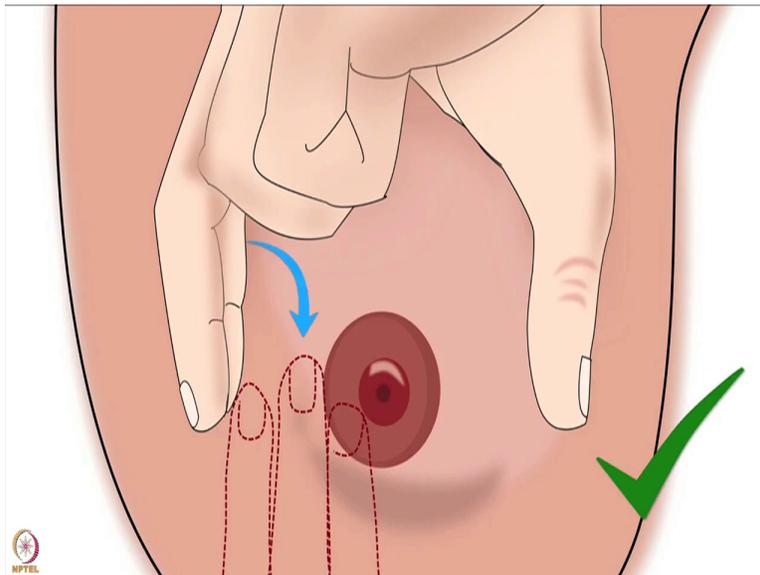
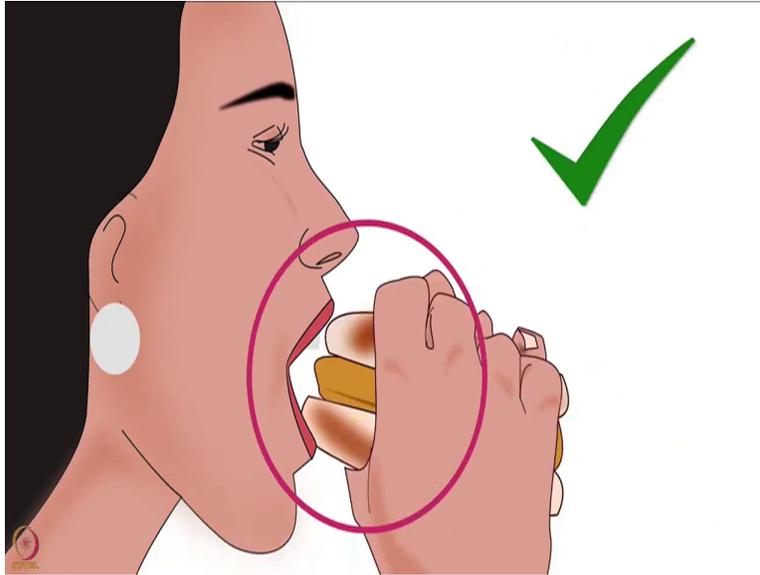


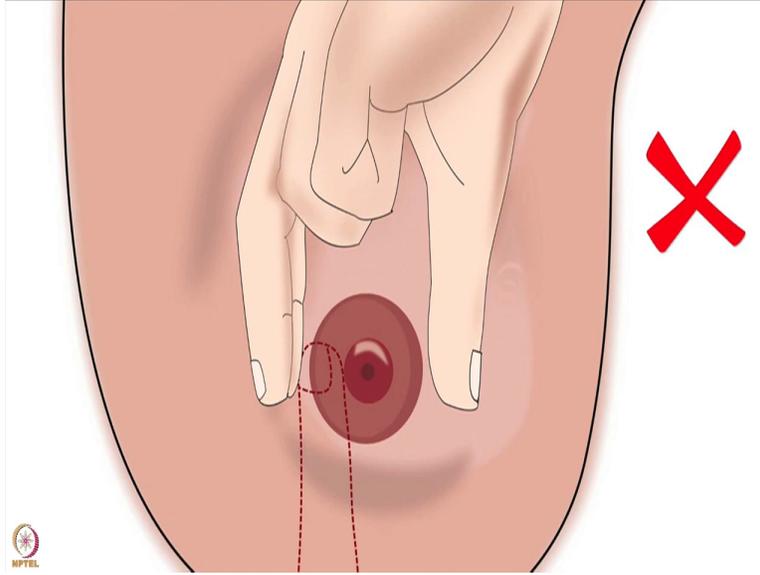


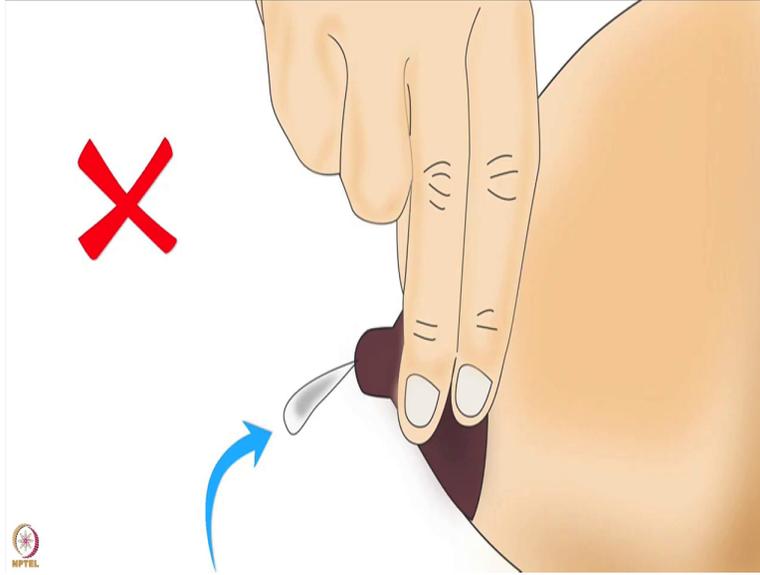


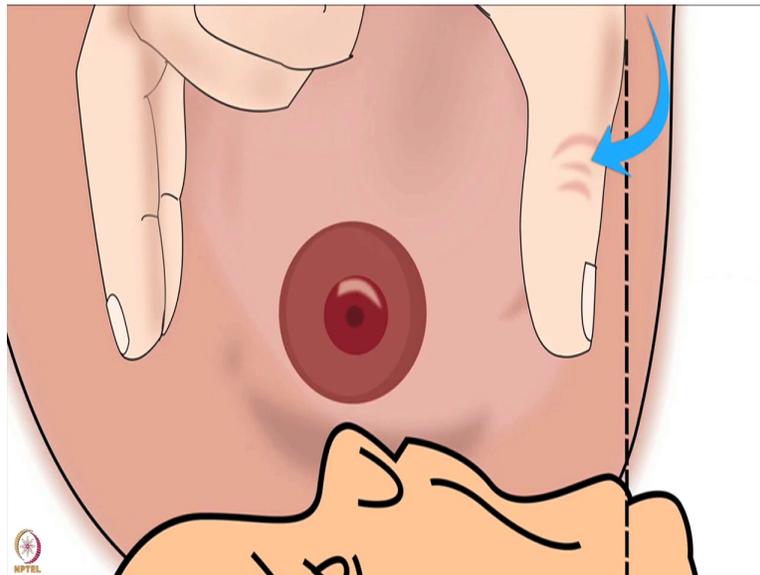
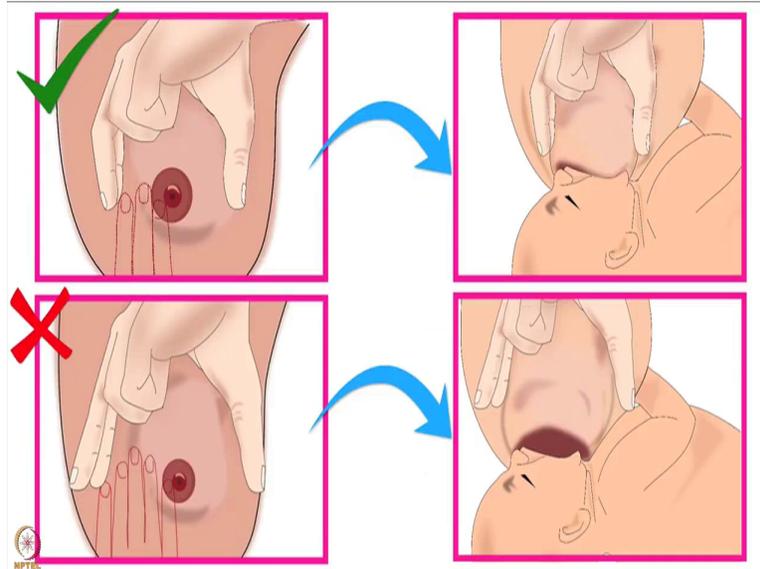












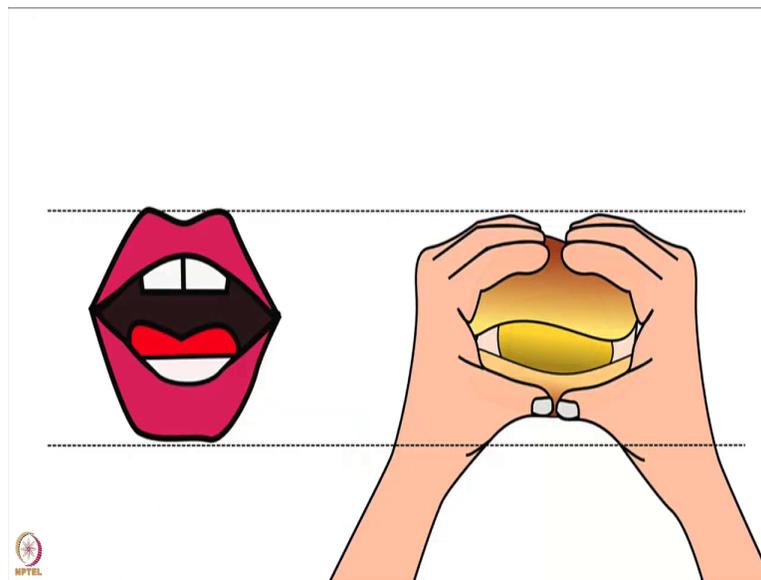
Why? Let us understand this using a simple example. When we eat a vada pav or burger, our lips open horizontally. We hold the vada pav or burger horizontally to take a big bite. Here the thumb and fingers are placed in the direction of the lips. If we hold the vada pav or burger vertically, we would not be able to take a big bite. Similarly, observe the direction of baby's lips. The lips are vertical here. Therefore, the fingers and thumb should also be placed vertically on the breast. This will help the baby to take a big part of the lower areola in her mouth.

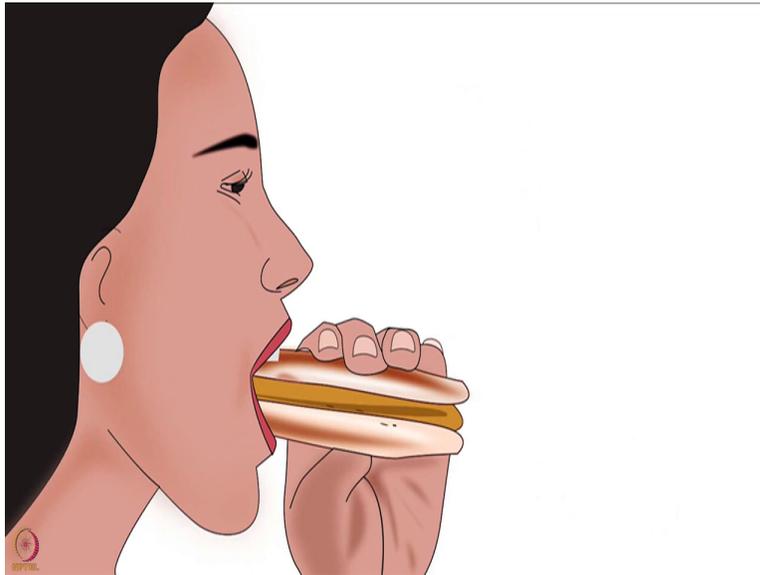
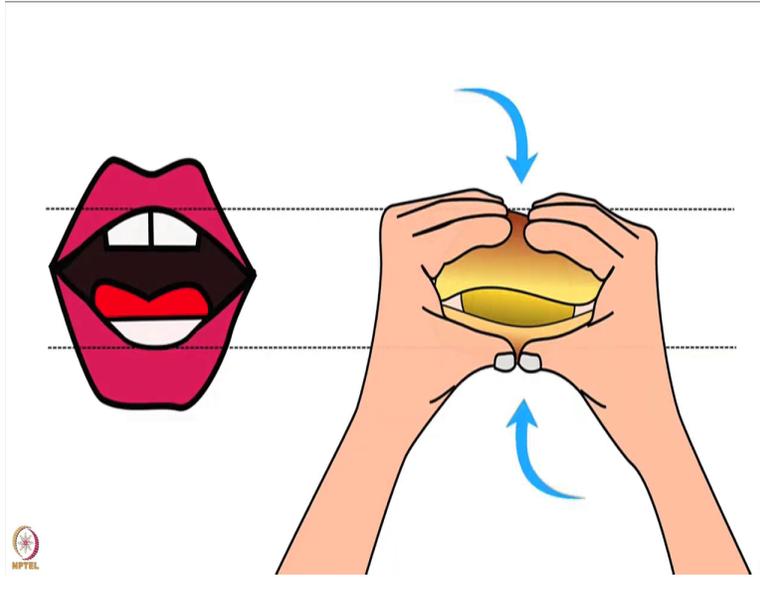
In addition to being in the direction of the baby's lips, mother's thumb and fingers should always be at a distance of three fingers from the nipple. Again, while eating a vada pav or burger, if we

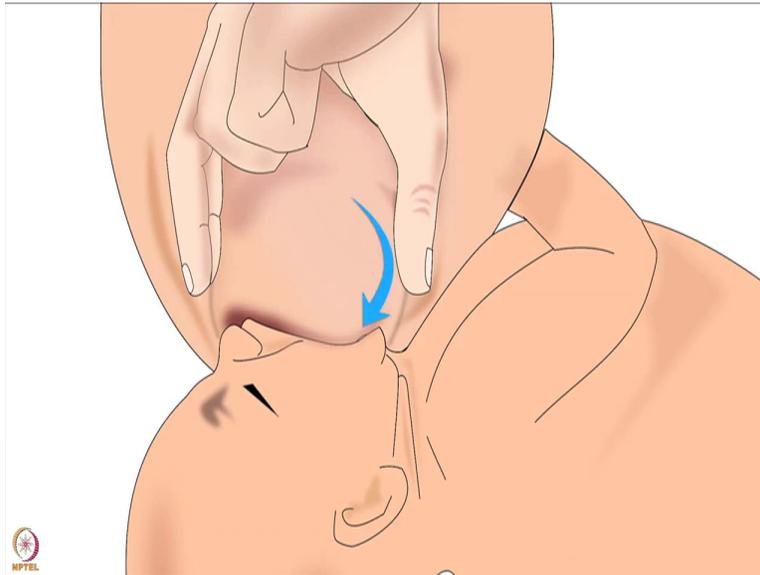
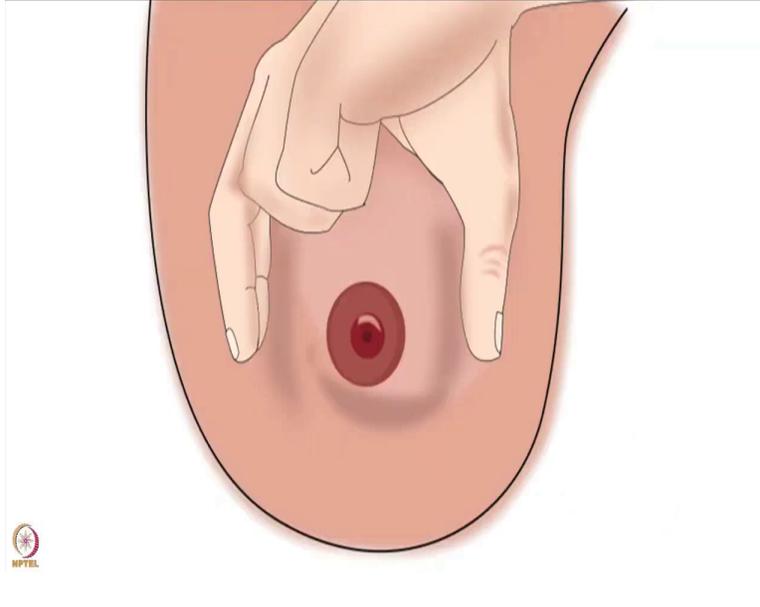
hold it too close, our fingers will block our mouth from taking a big bite. If we hold it too far away, it will not be shaped correctly to fit in our mouth. Therefore, we hold it at the right distance to take a big bite. Similarly, for the baby, the right distance is of three fingers from the nipple as shown in this picture. This distance will ensure that mother's fingers do not block the baby from taking a big part of the areola in her mouth.

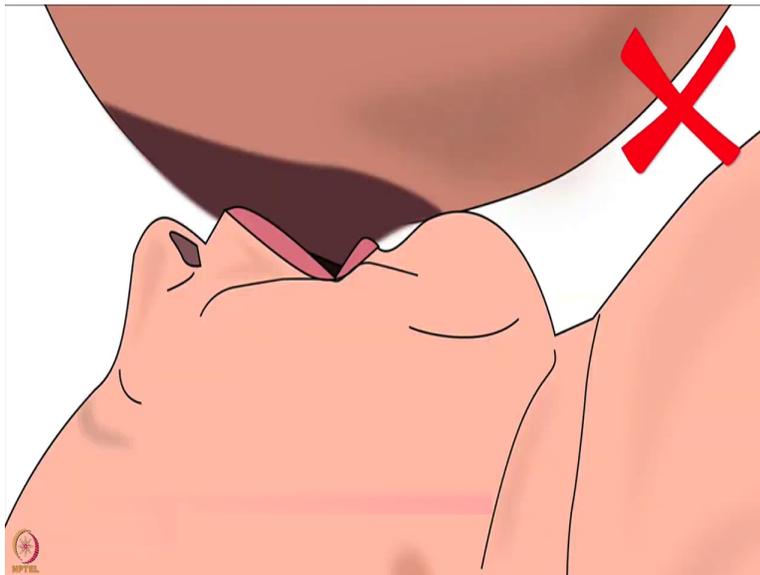
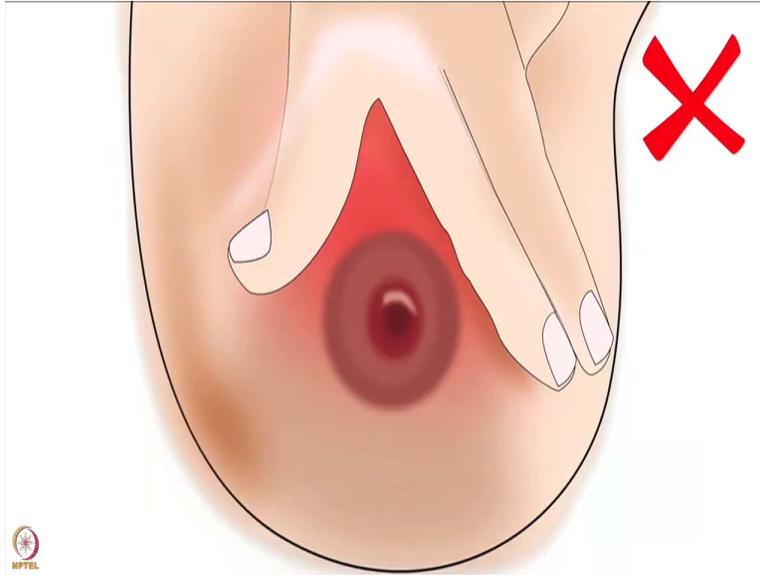
Mother does not compress only the nipple, which will give very little milk. Mother compresses the larger milk ducts beneath the areola to express more milk out and the breast is shaped correctly to help the baby attach deeply. Remember, mother's thumb should be on the side of the breast where the baby's chin is present and her two fingers should be on the side of the breast where baby's nose is present.

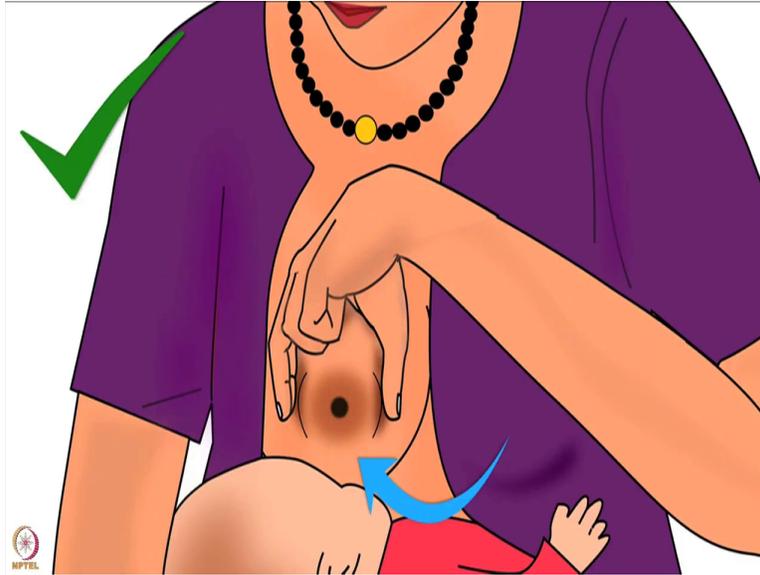
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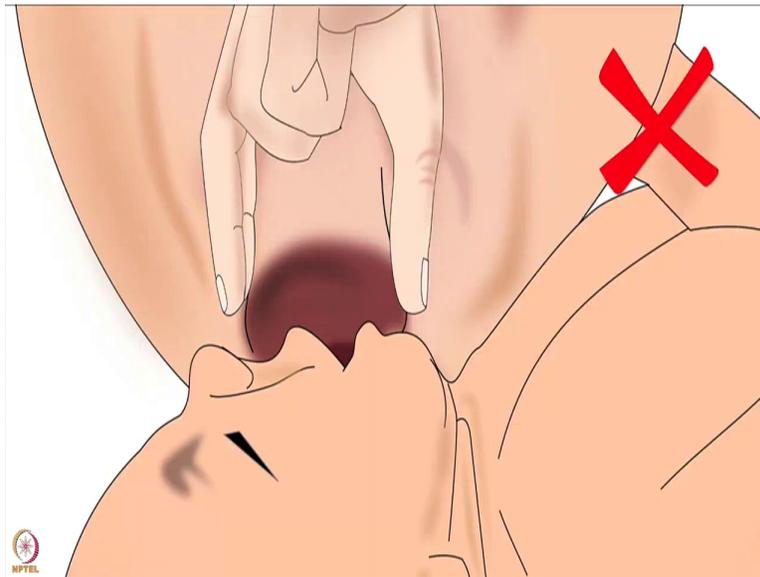


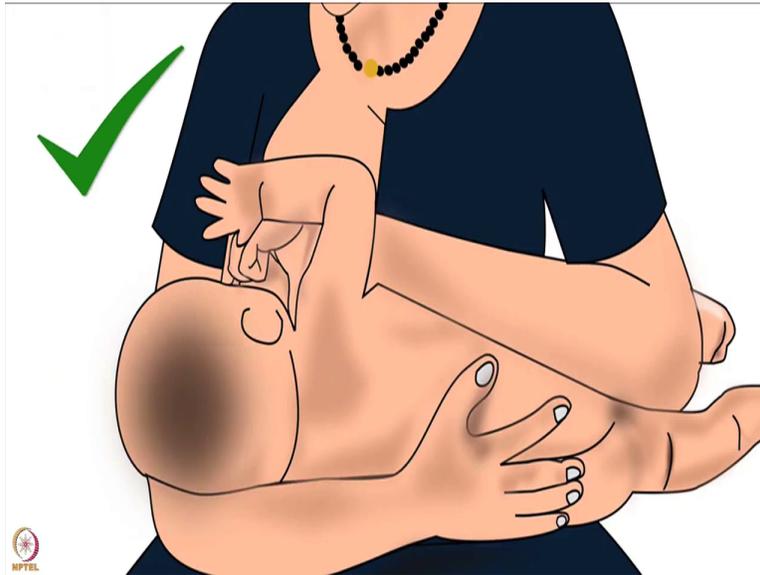
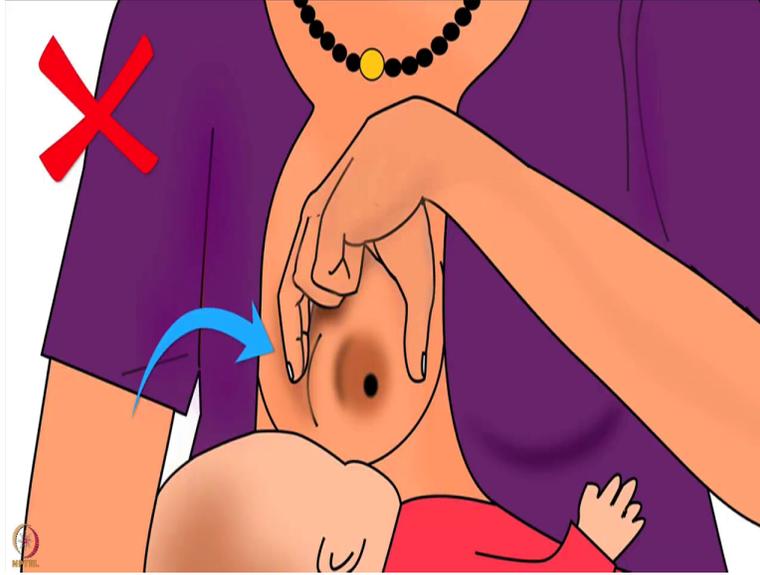


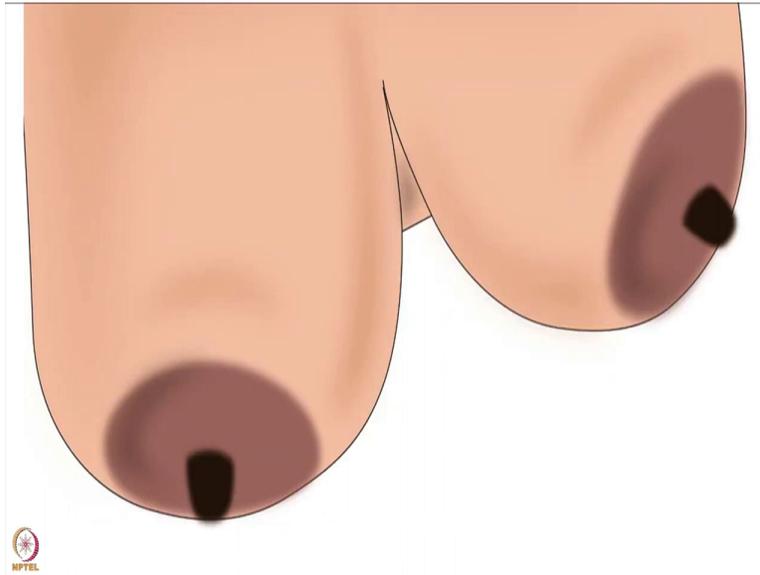














Spoken Tutorial Project, IIT Bombay

Funded by NMEICT, MHRD, Government of India

Domain Review:

Dr. Rupal Dalal, MD Pediatrics, IBCLC



DISCLAIMER

The information shared in this Spoken Tutorial is provided by domain experts and professionals. However, it is not a substitute for a qualified medical opinion.

In case of a doubt or further query, please consult a doctor or a nutritionist or a dietitian or a lactation consultant trained in Maternal, Infant and Young Child Nutrition.



Let us go back to the example of vada pav or burger. After holding the vada pav or burger correctly, we always press it to take a big bite. Similarly, the mother should lightly press her breast in a U-shaped hold from the top. This will help the baby to take a big part of the lower areola in her mouth.

But remember, mother should not press her breast in an inverted V shaped hold. V shaped compression will pinch the breast and cause nipple feeding. Also make sure that there is equal compression of the breast with the thumb and the fingers. Otherwise, the nipple will shift either to the right or the left side and the baby will not be able to attach deeply to the breast.

Remember, never bring the breast to the baby by pushing it sideways towards the baby. Always bring the baby towards the breast. Now, the baby is in cradle hold and ready to attach to the breast for breastfeeding. Correct attachment of the baby to the breast is explained in another video in the same series.

As soon as the baby is attached deeply to the breast, and if the breast is not too heavy, then mother should release her breast from her hand and bring that hand underneath the baby for support. In this position, mother should bring both her arms very close to her body. This will keep her comfortable during breast feeding. This brings us to the end of this tutorial. Thank you for joining.