



IABLE

Institute for the Advancement of Breastfeeding & Lactation Education

Paced Bottle Feeding

Paced bottle feeding is a baby-led way to bottle feed a baby. It slows the flow of milk and gives your baby control over when to suck, pause, and stop. It is a method that is recommended whether feeding breastmilk or infant formula. See the IABLE video for a demonstration of Paced Bottle Feeding (www.youtube.com/watch?v=OGPm5SpLxXY).

Why Pace Bottle Feeds?

In comparison with the common method of cradling the baby and holding the bottle nearly vertically, this method allows your baby to control the flow of milk, and to stop feeding when full or when the baby needs a break. This method:

- **Supports responsive feeding.** Paced bottle feeding switches the parent or caregiver's attention to the baby's body language and hunger cues rather than the clock or the amount left in the bottle. This promotes bonding and social interaction with the baby during feeding.
- **Helps your baby control the feeding.** This method allows your baby to drink milk at their own pace and to take a break or stop when desired. The baby makes the decision, not the parent or caregiver.
- **Reduces overfeeding.** Paced bottle feeding enables the baby to stop feeding when full, preventing overfeeding due to fast and heavy milk flow from a vertical bottle.
- **Prevents coughing and choking during bottle feeding.** Because the baby sets the pace of sucking and swallowing, the baby is much less likely to cough, choke, or aspirate (when milk goes into the lungs).
- **May prevent bottle preference.** This method requires your baby to actively remove the milk from the bottle, rather than passively swallow in response to rapid milk flow. This is similar to what a baby needs to do at the breast, so it can help avoid developing a bottle preference or breast refusal because the bottle is "easier."
- **Fosters a healthy relationship with food.** Giving your baby more control at the bottle can help them learn and trust when they feel hungry and full and may help to avoid feeding problems in the future.

When It May Be Helpful

Paced bottle feeding is an optimal way to bottle feed a baby, no matter if drinking breastmilk or formula, and is particularly important in the following situations:

- Your baby is **under 4 months**, so cannot sit up in your lap when drinking a bottle.
- Your baby feeds **both at the breast and by bottle**.
- You are giving temporary **breastmilk supplements** or working toward more feeding at the breast.
- Your baby gulps, coughs, leaks milk, or seems **overwhelmed by a fast bottle flow**.
- **Several people feed your baby**, including relatives, babysitters, or childcare staff. Teaching others to pace bottle feed promotes safe bottle feeding, preventing infant choking, aspiration, and over feeding.

- For a baby who enjoys sucking for comfort, pacing bottle feeds can help you interpret when your baby is truly still hungry, and when they just want to suck.

How to Do Paced Bottle Feeding

- **Start with positioning the baby.** Young infants who need head and neck support, such as those under 4 months or premature infants, are best paced bottle-fed while lying on their side. This can be done on a table, on the caregiver's lap, or on the floor.
- **Stimulate an open mouth.** Touch the nipple to the upper lip. Wait for your baby to open, then let your baby draw the nipple into the mouth. Do not push the nipple into the mouth if your baby is fussing or refusing the bottle.
- **Start with the bottle angled down so there is no milk in the nipple.** Breastfeeding babies suck for several seconds before the milk flows from the breast. This strategy mimics what babies do at the breast, which helps to teach bottle fed babies to be patient at the beginning of a breastfeed.
- **Keep the bottle horizontal, or parallel to the floor.** The next step is to position the bottle horizontally to the floor so that there is some milk in the nipple, but the milk does not drip out on its own.
- **Follow the baby's pace.** While your baby is sucking and swallowing steadily, keep milk available in the nipple. Whenever your baby pauses, lower the bottle's angle so the milk stops flowing. You usually do not need to remove the nipple from the baby's mouth, just change the angle of the bottle. This allows your baby to take a break when they want one, just like you take occasional breaks during a meal.
- **Resume milk flow only when asked.** When your baby begins sucking again or clearly roots for the bottle, tilt it up enough for milk to flow again.
- **Stop at fullness cues.** If your baby does not resume sucking, or actively spits out bottle nipple, your baby needs a break or is done eating. They may be full, or need a burp, or a diaper change, and might be ready to take more milk.
- **Continue to hold the bottle horizontally and gradually tip it up as the volume in the bottle decreases.** A flow that is too fast may cause gulping or leaking. A flow that is too slow may make feeding tiring or unusually long.
- **Expect a slower feeding than when using other methods.** A bottle given via this technique should take between **20-30 minutes** (for an average 3-4 oz bottle), on average.

Helpful Tips

Parents often have difficulty knowing when their baby is finished feeding from a bottle. These are a few tips to help.

- Signs that your baby is finished feeding:
 - **Your baby stops suckling and does not want to continue.**
 - **Your baby latches onto the nipple and is not drawing milk,** or is chewing/biting the bottle nipple rather than sucking and swallowing.
- When your baby seems done, **do not jiggle the bottle** or encourage your baby to finish what is in the bottle.
- Your baby may **eat different amounts** at different feedings – sometimes more, and sometimes less. That is normal.
- A smaller feeding may simply mean the **next feeding will come sooner.**
- **Never prop a bottle** or leave your baby alone with one.
- Do not put your baby to bed with a bottle.

Choosing a Nipple and Bottle

- **Begin with a slow-flow nipple.** Depending on the brand, it may be labeled preemie, size 0, newborn, or slow. Nipple labels are not standardized, so watch how your baby handles the actual flow and adjust as needed.

- **Choose a round cylindrical nipple.** Flat bottle nipples promote a tight shallow latch. A round, cylindrical nipple will promote a deep latch onto the bottle nipple, which is important if the baby is also feeding at the breast.

Common Questions and Concerns

Will my baby swallow more air? Paced bottle feeding does not cause swallowing extra air. Babies may swallow more air when milk flows too quickly, because they gulp to keep up. Slower bottle feeds help reduce a baby's intake of air.

What if my baby fusses? Pause the feeding and remove the bottle. Hold your baby upright, help them calm, and try again if they show feeding cues. Forcing the bottle can make feeding stressful and can lead to bottle refusal. If babies fuss at one feed, they will often do better with the next one. If your baby always seems to refuse bottles, fusses throughout entire feedings, or seems to have trouble removing milk from the bottle, reach out to your baby's physician or other provider.

When to Be Concerned — Contact Your Provider If...

- Your baby experiences any of the following with feedings: **coughing, choking, color change, wet or noisy breathing, marked tiredness, or is experiencing poor weight gain or fewer wet diapers** than expected.
- **Call 911** or your local emergency services phone line for severe **trouble breathing, blue or gray color, or unresponsiveness** in your baby.