

Alternative feeding methods – cup or finger feeding (using a syringe or tube)

This leaflet explains ways to feed your baby without using bottles. These alternative feeding methods work well with direct breastfeeding* and can help maintain your feeding journey while supplementing with expressed breastmilk. If you are unsure about anything, please ask your care assistant or midwife.

*Cup or finger feeding are also suitable for formula feeding but in this leaflet we will focus on feeding expressed breastmilk using these methods. Please read '[Possible effects of offering formula milk](#)' on our Infant feeding page to help you make an informed decision about your feeding choices.

How to maintain breastfeeding while cup, or finger feeding

We will support you to work towards breastfeeding by encouraging you to:

- Maintain prolonged skin-to-skin contact whenever possible, by ensuring your baby's neck is straight and head tilted back slightly so you can see baby's face which ensures easy breathing.
- Look for and respond to early feeding cues. These are when babies poke out their tongues, root, and turn their face towards the breast. These signals usually mean babies are ready to feed. Ask a member of staff to help you position and attach your baby if needed.
- Express frequently (at least eight times in 24 hours including at least once at night) initially by hand, and then in combination with a pump if baby is not feeding from the breast. This is essential to secure your supply while there is lack of stimulation from the baby attaching to your breast. Staff can show you how to do this.
- You may also find it helpful to watch these videos;
 - <http://www.unicef.org.uk/BabyFriendly/Resources/AudioVideo/Hand-expression/>
 - <https://globalhealthmedia.org/videos/how-to-express-your-first-milk/>

Why cup feed?

The advantage of cup feeding is that your baby can take increasing amounts by lapping / slurping the milk. It is a suitable option for very young babies as they can pace the feed. The disadvantages are that there can be some spillages, which can waste a bit of your milk, and a risk of the milk being inhaled into baby's lungs which is why following the correct method of cup feeding is important.

If used when babies are too sleepy, and without a good technique, your milk will be taken too fast, which will cause spluttering and choking. It is important to avoid pouring the milk into the mouth, as the aim is to promote active feeding from the cup.

It is essential that your baby is alert, yet calm. Cup feeding can require patience and time, and it is more suitable for small volumes of milk. Feeding by a small, sterile, plastic cup is usually a short-term measure whilst breastfeeding is being established.

How to cup feed. A step-by-step guide:

Wash and dry your hands before beginning, use a sterile cup each time.

- Wrap your baby with a muslin cloth to prevent their hands knocking the cup, this can be useful in case of spillages.
- Support your baby in an upright position on your lap so that you are both comfortable.
- Stroke your finger over baby's top lip to encourage mouth opening.
- Place the cup gently on the lower lip with the outer cup edges touching the mouth corners.
- Angle the cup just enough so the milk is just touching the lower lip.
- Wait for your baby to lap or slurp the milk; they might smell it first, so do this slowly.
- It should **not** be poured into your baby's mouth.
- Gently increase the angle of the cup as the milk is swallowed, so that milk is always at the rim.
- Allow baby to have short breaks, to encourage baby to pace the feed, taking only what is needed at each feed. Keep the cup in place during the pauses.
- Babies will close their mouths when they have taken enough milk. Our staff will show you how to wash and re-sterilise the cup.



The technique gets easier with practice!

Why finger feed?

The advantages of finger feeding are that your baby can have small amounts of milk, and you can use your finger to stimulate the suckle reflex if baby is unable to latch and breastfeed. This is not uncommon, and your baby will soon begin to show interest in to breastfeeding. Finger feeding directly onto baby's mouth with droplets of colostrum on a clean finger is often enough to stimulate a sleepy baby in the first instance. Please ask a member of staff to help until you are confident with finger feeding.

Finger feeding using a syringe* A step by step guide:

- Wash and dry your hands thoroughly before you start, making sure your nails are not too long, and use a sterile syringe each time.
- Remove the purple lid from the syringe.
- Hold your baby in an upright position.
- Gently stroke down over baby's top lip to encourage rooting and mouth opening.
- Once baby opens their mouth, place the pad of your finger to the roof of baby's mouth, taking care not to make your baby gag. If this happens, pull back your finger so it is more comfortable for your baby.
- Place the top part of the syringe into the baby's cheek between your finger and baby's gum.
- Push the plunger gently so that the baby suckles your finger while drinking in the milk a little at a time (0.1-2ml).
- Continue until all the milk has gone.

Continue to give the milk in this way until your baby feeds reliably at the breast, and consider cup feeding, or finger feeding with a tube, as your milk volumes increase. Finger feeding with a syringe is useful for giving small amounts of colostrum (first breast milk) which is usually of a thicker consistency.

Finger feeding using a tube.

Finger feeding with a tube is used for larger amounts when the milk is more liquid.

- Wash and dry your hands before beginning, using a fresh sterile tube each time.
- Hold your baby in an upright position on your lap with one of your hands around your baby's shoulders and neck, or support baby across your forearm, ensuring you and baby can have eye contact.
- Place the tip of tube near the tip of your finger, and secure with tape.
- Place the other end of the tube with the black bit in the milk container (trim off the extra grey and white extension).
- Gently stroke down over baby's top lip to encourage rooting and mouth opening.
- Once baby opens their mouth, place the pad of your finger to the roof of baby's mouth, taking care not to make your baby gag. If this happens, pull back your finger towards the front of the mouth so it is more comfortable for your baby.
- Allow your baby to suck your finger and the milk will gradually be drawn along the tube.
- Allow your baby to pause so they can pace the feed at a rate that is comfortable for them.

Seek help from an infant feeding specialist if problems persist.

Further information

- <https://www.royalberkshire.nhs.uk/featured-services/maternity/infant-feeding/>
- Further help is available from your local midwife/health visitor, local breastfeeding supporters, please refer to your baby's Red Book for the information about local resources.
- Email: rbft.infantfeedingteam@nhs.net

References

1. Cochrane (2017) Cup feeding versus other forms of supplemental enteral feeding or newborn infants unable to fully breastfeed Flint A New K Davies M [Cup feeding versus other forms of supplemental enteral feeding for newborn infants unable to fully breastfeed - Flint, A - 2016 | Cochrane Library](#)
2. <https://livi.org/cup-feeding/>

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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