

Breastfeeding

Helpful Hints for Breast Care



During pregnancy and breastfeeding, breasts and nipples change in size, shape and sensitivity. This is a normal part of making milk to feed babies.

In general, breastfeeding can be a little uncomfortable at first while mothers and babies are learning. Practice makes perfect! Using good positioning and latch-on is very important. They help the baby get milk quickly and easily and cut down on the chances of mom feeling discomfort or pain during a feeding. After about 2 weeks of breastfeeding using good positioning and latch-on, much of the discomfort should be gone.

If there is any pain or discomfort that does not go away or gets worse, call your doctor, lactation consultant, nurse or nutritionist to get help right away!

General Breast and Nipple Care

- Wash and dry breasts and nipples as usual when you take a bath or shower.
- As you wash, massage the breast. If you find any hard spots, massage in that spot to soften it. You might squeeze out some milk at the same time — that's okay.
- If you leak some milk onto breast pads, try to change the pads when they get damp. Try to keep the breast and nipple dry so that you don't get a rash.
- Wear a soft and supportive nursing bra. Try to stay away from underwire bras if possible — the wires can sometimes block milk flow.
- After breastfeeding, leave a little expressed breast milk on the nipple and let it air dry.

Breast Changes During the First Week

Your baby's birth signals your body to increase your milk. At birth, you are already making colostrum. By about day 3 to 5 after birth, your milk supply should quickly increase and begin to look whiter.

Normal Breast Fullness

Because your body doesn't know at first how hungry your baby will be, you will probably make more milk than the baby needs. Expect breast fullness during the first week, especially in the morning. Keep yourself comfortable by

- Breastfeeding baby often, at least every 3 hours
- Massaging the breast before and during feedings
- Expressing a little milk using hand massage if the breast is starting to feel tight.

The more you breastfeed in the early days, the faster your body learns how much milk to make. Also, the faster your baby will return to birth weight and change from black, tarry stools to yellow 'breastmilk' stools.

Remember that your baby may go through a growth spurt at around day 7 to 10. You are not losing your milk! Your baby is growing quickly and is hungrier. By breastfeeding often during this time, your milk supply will be built up.

If your body makes a lot more milk than your baby will take, or you do not feed often enough, your breasts may get very, very full. This is called *engorgement*. It happens during the first week, but can also happen any time you skip breastfeeding. Besides being very uncomfortable, engorgement can lead to other breast problems. Use the chart on the back of this sheet to keep yourself healthy. Talk with your nurse, nutritionist or lactation consultant if you have any breast fullness that is very uncomfortable and lasts more than a couple of days.

The chart gives a description of how breasts feel when they get overly full or uncomfortable (engorged), and the problems that can then happen, like a plugged duct or a breast infection (mastitis).

Use this chart to keep yourself healthy. If you think you might have a problem, use the chart to help you feel better. Also call your doctor, nurse, nutritionist, or lactation consultant for help.

Normal Breast Fullness	Engorgement	Plugged Duct	Breast Infection (mastitis)
Normal increase in milk supply.	Milk overflowing inside because baby is not breastfeeding enough.	A clump inside the breast that blocks milk from getting out.	An infection in the breast from an untreated plugged duct.
Most often occurs on the 3 rd to 5 th day after birth.	Most often happens on the 3 rd to 10 th day after birth.	Rarely happens in the first five days after birth.	Rarely happens in the first five days after birth.
Happens in both breasts gradually.	Can happen in one or both breasts gradually.	Usually happens in one breast gradually.	Usually happens in one breast suddenly.
Breasts feel fuller and maybe a little tender, but skin stays soft and elastic.	Breast feels harder, warm, tight, throbbing; nipple may flatten out.	Breast has tender spot, redness or sore, hard lump that is cool.	Breast has tender spot, redness or sore hard lump that is hot and very painful.
Affected area doesn't move around in breast.	Affected area doesn't move around in breast.	Tender spot may move around in breast.	Tender spot stays in one area of the breast.
Mother feels well.	Mother feels generally well with maybe a low fever (<101F).	Mother feels generally well with maybe a low fever (<101F).	Mother feels tired, achy, run down, feverish (>101F), with possible nausea.

How to treat

Continue to breastfeed baby every 1 ½ - 3 hours during the day and at least 1 time during the night.	Get milk moving out of the breast to bring down the swelling. Will take a day or two.	Massage on the tender spot during and between breastfeedings to soften the lump and move it out.	See your doctor – you will probably need to take an antibiotic.
	Continue to breastfeed baby at least every 1½ - 3 hours during the day and at least 1 time during the night.	Continue to breastfeed baby at least every 1 ½ - 3 hours during the day and 1 time during the night.	Continue to breastfeed baby at least every 1 ½ - 3 hours during the day and at least 1 time during the night.
	Before feeding, use massage and a warm washcloth on the breast to help express out some milk and soften the breast tissue.	Don't wear tight clothing that could pinch or block milk flow. This includes underwire bras, purse and diaper bag straps, and tight shoulder seat belts.	Before feeding, use massage and a warm washcloth on the breast to help express out some milk and soften the breast tissue.
	Express milk out of the second breast if needed in order to be comfortable.		Don't wear tight clothing that could pinch or block milk flow. This includes underwire bras, purse and diaper bag straps, and tight shoulder seat belts.
	Put cold packs on both breasts for 15 minutes after breastfeeding to decrease the swelling.		Rest as much as you can, drink plenty of fluids, take pain relievers as suggested by your doctor.

Source:

Int'l Lactation Consultant Assn. (2001) *Core Curriculum for Lactation Consultant Practice*.



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Breastfeeding Welcome Here

For more information on breastfeeding, talk with your Nutritionist or Nurse and the Lactation Consultant at the hospital where you had your baby.

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