

Breastfeeding Problems

Breastfeeding problems are common, but they last a short time. These tips may help. If you find that the problems persist, call your doctor, nurse or lactation specialist.

Engorgement

Engorgement is when the breasts become full, firm, tender and sometimes painful as your breast starts to produce milk. This often occurs 3 to 5 days after delivery.

Signs of engorgement often last 24 to 48 hours. Signs include:

- Larger, heavier and tender breasts
- Breasts that are hard, painful and warm to the touch
- Swelling of the breasts
- Firm nipples and areola

Ways to Prevent Engorgement

- Feed your baby at least 8 to 12 times each day. Watch and listen for drinking and swallowing.
- Wear a support bra 24 hours a day while your breasts are heavy. Use a comfort style bra without under wires. Some mothers find more comfort without a bra.
- If your breasts become engorged:
 - Place a clean, warm, damp cloth over each breast for 3 to 5 minutes before nursing or get into a warm shower and let warm water flow over your shoulders. Heating the breasts will help your milk flow easily to your baby. After heating the breasts, massage them in a circular motion towards the areola and the nipple. Massaging will move the milk down. Massage under the arms and the collarbone area if this area is firm and uncomfortable.
 - Soften the breast using hand expression or a breast pump. Express enough breast milk to soften the areola so that baby can easily attach.
 - Breastfeed right away. Gently massage your breasts while nursing.
 - If the breasts are still painful, full and swollen after a breastfeeding, or refill within a half hour after feeding, you may pump to soften the breasts. Only pump if your breasts are overly full and don't pump until they are empty.
 - Apply cold packs to the breasts for 20 minutes after nursing

Nipple Soreness

Nipple soreness often occurs when the baby is not attached well to the breast or positioned correctly. Make sure your baby's jaws are deeply over your areola and about ½ inch behind the base of your nipple. Your nipple should be rounded and erect after the baby detaches.

Ways to Prevent Nipple Soreness

- If you feel pinching, rubbing or biting pain during the feeding, check the baby's position and attachment.
- Air-dry your nipples by leaving your bra flaps down for a couple of minutes after a feeding.
- Express a small amount of colostrum or milk and spread it around the nipple and areola after air-drying.
- Avoid the use of soap, alcohol and extra water on the breast. Clean your breasts by allowing water to flow over them when showering.

If You Have Nipple Soreness:

- Feed your baby more often for shorter periods of time.
- Do not allow your baby to become too hungry.
- Using an artificial nipple shield over the breast for feeding may help with soreness, but can damage your nipple and get in the way of milk flow. Only use them with the help of a lactation specialist.
- Use a purified lanolin product or gel pad to heal cracked or open areas. Do not use lanolin and gel pads together.
- Begin feeding on the least sore nipple. Be sure to break suction carefully by sliding your finger inside your baby's mouth.
- If it remains painful when your baby first latches on, remove your baby and try again.
- A fast deep latch will put your baby's jaws behind the nipple and tender areas.

If latching on still painful, talk to a lactation specialist.

Plugged Duct

A plugged duct is a tender or painful lump in the breast. If left untreated, it may lead to an infection. Plugs often occur from changes in the baby's feeding pattern or pressure on the breast. Check your breast for pressure points that occur from a bra that is too tight or from bunched clothing on the breast.

If You Have a Plugged Duct:

- Apply moist heat to the breast 15 to 20 minutes before each feeding.
- Massage the breast from the area behind the discomfort toward the nipple.
- Change positions lining-up the baby's chin and jaw toward the plug.
- Let the baby nurse first on the affected breast. The stronger suck will help relieve the plug.

Breast Infection

A breast infection occurs from a blocked duct or from bacteria that has entered the breast, often through a cracked nipple. Even though the breast tissue is inflamed, the baby will not become ill from feeding on the infected breast.

Signs of breast infection may include:

- A headache, aching joints, fever or chills
- A hard, red and painful breast
- A fussy or unwilling to nurse baby when using the infected breast

Call your doctor right away if you think you may have a breast infection.

- Your doctor may order medicine to treat the infection. Take the medicine for the full time ordered. Do not stop taking your medicine, even if you feel better, without first talking to your doctor.
- Continue to breastfeed your baby often to drain the infected breast. If your breast is too painful to breastfeed, you may need to use a breast pump until you are able to breastfeed your baby again.
- Rest often and drink a lot of fluids.

Talk to a doctor, nurse or lactation specialist if you have any questions or concerns.