



# ***Family Care Associates***

## **Basic Solutions to Common Issues Associated with Breastfeeding**

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Congratulations on your decision to breast feed your baby! As you know, breastfeeding offers baby a great nutritional start and promotes health and wellness thanks to the antibodies found in breast milk.

For many women, breastfeeding is a new experience that takes some patience and practice; just remember that your baby is learning as well. Your child is born with the ability to suck, swallow, and breathe by reflex, but they have to LEARN to eat.

Sometimes it may take a while for both of you to adjust to this new experience, and there may be times of frustration, discouragement, and trial-and-error, but **DO NOT GIVE UP!** We are here to help, and any time you have questions or concerns about yourself or your infant, we want you to contact us so that we can assure your child's health.

The following information is intended to help new mothers deal with common issues that arise while leaning to breast feed their babies. These helpful solutions are supported by our health care providers at Family Care Associates.

### **Problem #1- ENGORGEMENT:**

- Engorgement typically begins on the third to fifth day post birth and subsides within 12-48 hours if treated properly.
- The breast feels hard with tightly stretched skin, you may experience warmth, tenderness, and throbbing. These symptoms may extend to the underarm area.
- The areola may feel hard rather than soft and your nipple may increase in diameter, become flat and taught, making latch-on a challenge.
- You may experience a low grade fever.

### ***To Prevent or Minimize Engorgement:***

- Nurse early and often, up to ten times in 24 hours. Do not skip feeding even at night.
- Nurse on demand, every 2-3 hours. If baby is sleepy, during the night you may allow one long stretch of 4-5 hours between feedings.
- Ensure correct latch-on and positioning.

- If baby is not nursing well, be sure to pump or express your milk to maintain supply and minimize engorgement.

### ***Before Nursing:***

- Gently massage from the outside of the breast towards the nipple.
- COOL compresses up to 20 minutes before nursing
- Moist warmth for just a few minutes before nursing may help the milk flow, but does NOT help the swelling of engorgement. You can try a warm shower with the spray hitting your back and expressing milk with your hands, or immersing breasts in a bowl or sink filled with warm water. AVOID using warmth for more than a few minutes as it can increase swelling and inflammation.

### ***While Nursing:***

- Gently compress and massage your breast. Simply nursing your baby will help give relief.

### ***After Nursing:***

- If you still experience discomfort, you can pump to the point of relief using a quality double-electric pump.
- COLD compresses 20 minutes on, 20 minutes off.
- Choose a well-fitting, non-underwire supportive bra. Tight bras do not allow the breast to empty properly and can lead to plugged ducts and mastitis.
- Cabbage leaves can be used chilled or at room temperature. Apply to breasts no more than 20 minutes three times a day. Using more often can cause a decrease in milk supply. Discontinue when engorgement subsides.

### ***AVOID:***

- Excessive stimulation of the breasts (i.e. shower spray).
- Application of heat or warmth as it can cause additional swelling and INCREASE engorgement.
- DO NOT restrict your fluid intake.

### ***Contact your physician or lactation consultant :***

- Your baby cannot latch-on after trying these suggestions

- You have symptoms of mastitis- fever, chills, flu-like symptoms, painful red area on your breast.
- Talk to your doctor about using ibuprofen for pain and/or inflammation.

## **Problem #2- SORE/CRACKED/BLEEDING NIPPLES:**

Remember, BREAST FEEDING SHOULD NOT HURT! The most common cause of nipple soreness is poor positioning and latch. Be certain to keep baby “tummy to tummy” and make sure baby latches on with a wide-open (yawning) mouth thus taking in both the nipple and a good amount of the areola as well.

## **Problem #3- FLAT OR INVERTED NIPPLES:**

- Try using a nipple inverter or doing a “nipple roll” with your fingers.
- Pump a few minutes prior to nursing,

## **Problem #4- NIPPLE SORENESS FROM PUMPING:**

If you find pumping uncomfortable, consider these questions:

- *Is your pump of good quality?* A good pump should not hurt.
- *Do you have the suction turned up too high?* You should only have the suction and speed turned up as high as your comfort allows.
- *Is your nipple centered in the pump flange?* Improperly centered, the nipple may rub or be pinched against the sides of the flange tunnel. Reduce friction by lightly coating the inside of the tunnel with Lanolin.
- *Are you pumping too long?* Pumping sessions should be limited to no more than 20 minutes at a time. Pumping for too long is likely to make your nipples tender. To optimize and maintain supply, pump in shorter, more frequent sessions.
- *Is the breast flange large enough for your nipples?* Most pumps come with a standard size flange designed for the “average” mother. In needed, some manufacturers offer larger flanges that can be purchased separately.
- *Are you holding the suction too long?* If you use a pump for which suction is released manually, make your suction-release cycles shorter or consider a pump that releases the suction automatically

- *Could you have thrush?* If you have not experienced discomfort after pumping, and then you start having symptoms, it could be a sign of thrush. Contact your physician or lactation consultant for evaluation.

## **Common products to alleviate breast discomfort:**

**Breast Shells-** use with lanolin for moisture. Breast shells can provide relief by protecting the nipples from friction of clothing and breast pads, and they allow for air circulation around the nipples. Allow plenty of room in your bra so that they don't cause additional pressure on your breast.

**Hydrogel Pads-** worn in the bra, similar to breast pads, and help speed healing by providing moisture to damaged nipples and relieving discomfort. Follow manufacturer's instructions carefully- keep the pads on a clean surface when removed during nursing sessions. Hydrogel pads have a limited life and may need to be purchased several times thus making them more costly.

Challenging