# **Breast Engorgement After Childbirth**

### What is postpartum breast engorgement?

Usually 2 to 5 days after your baby is born, you will notice changes in your breasts. They will get larger, somewhat firm, and slightly tender as they start to make more milk. This is called postpartum breast engorgement.

Engorgement is normal. However, the swelling of your breasts may make it hard for your baby to get milk. Your baby may not be able to latch on correctly and your nipples may get sore. If your baby is having trouble nursing, the pressure in your breast from all of the milk can cause you to make less milk or to even stop making milk. Knowing how to manage engorgement will help you avoid these problems.

### What is the cause?

After your baby is born, hormones in your body change and your breasts start making a lot of milk. The milk, swelling (edema), and extra blood flowing to the breasts makes them engorged.

When your milk first comes in, engorgement usually lasts just a few days until your body gets used to making and releasing milk. You may think that you are making more milk than your baby needs, but getting milk to flow is more the problem than making too much milk.

Once your baby is nursing well and your milk is flowing easily, there will be less swelling and firmness. Within a few days, your breasts will adjust to your baby's appetite. Then you will most likely make just as much milk as your baby takes from your breasts. By the end of the first week after the birth of your baby, your breasts will have adjusted and will be much less engorged. However, if you go too long between feedings, your breasts may get engorged again.

## What are the symptoms?

Your breasts are swollen and firm. They may feel tender or painful.

## How can I take care of myself?

If you are breast-feeding your baby, here are some things you can do to help your breasts be less engorged and more comfortable.

#### · Nurse often

Nursing often day and night can help your breasts be less engorged. Plan to nurse your baby at least every 2 to 3 hours until you have less engorgement. Feeding less often at night is OK. You can go up to 4 to 5 hours between feedings at night, but don't go this long between feedings more than once a day for the first month. Aim to feed your baby 8 to 12 times every 24 hours. Your newborn should nurse vigorously at least 10 minutes or until the baby is done on the first breast before moving to the second breast.

### · Use heat and cold to reduce fullness and discomfort

Warm your breast just before nursing. Heat improves blood flow and helps your milk let-down. Try taking a warm shower just before feeding. Or cover the breasts with a warm washcloth. You can put a plastic diaper over the washcloth to keep the heat in.

Cold compresses such as frozen packaged vegetable bags or gel packs after breast-feeding can decrease the swelling.

Some breast-feeding experts recommend using cool cabbage leaves to treat uncomfortable breast engorgement. Many women who have tried cabbage leaves claim the treatment brings relief from discomfort and improves milk flow.

### · Use reverse pressure softening and express some milk

The reverse pressure softening technique uses gentle pressure to soften an area of the breast near the areola surrounding the nipple. This technique helps move some of the swelling around the areola so that the baby can latch more deeply onto the breast. It can help for you to lay flat to allow gravity to move the swelling toward the chest. Put the fingertips of both of your hands at the base of the nipple and gently press in towards your chest. Keep pressing for 60 seconds or longer (up to 10 to 20 minutes may be needed). The pressure should be firm but not painful.

Once the areola is soft, you can more easily let out (express) milk. Before each feeding, use your hands to let out a small amount of milk from both breasts. Express enough to soften the nipple and areola so that your baby can better grasp the area around the nipple. Gently massage your breasts before and during the feeding to help empty and soften your breasts.

Put cool washcloths on your breasts between feedings to help relieve discomfort and reduce swelling.

Ask your healthcare provider about medicine or supplements that might help with the discomfort of engorgement. Be sure to talk to your provider before you start taking any medicine or supplement.

#### · Express or pump milk as needed

It's important to be able to empty your breasts and relieve engorgement because the engorgement puts pressure on the milk-producing glands and can quickly decrease your milk supply. If your breasts are so full that your baby cannot latch on or if your baby is not nursing well after your milk has come in abundantly, you may need to use a breast pump or get help with breast-feeding.

If your baby is not nursing well, hand expressing or pumping your breasts will let you relieve uncomfortable fullness and keep making a lot of milk. Express your milk at regular feeding times. Your child's healthcare provider can refer you to a lactation consultant to assist with breast-feeding technique.

If your breasts are still uncomfortably full after feeding your baby, pump or express milk for a few minutes until your breasts are softer and you have less

discomfort. Soon your baby will empty your breasts well at each feeding and you will no longer need to pump. Ask your child's healthcare provider if you need to feed your baby any expressed milk. If it is not necessary, the milk you express can be frozen for future use.

Many women are afraid to pump or hand express milk while they are engorged because they think it will cause them to make even more milk. However, engorgement is really a problem of poor milk flow, rather than too much milk.

If you are feeding your baby with formula instead of breast milk, uncomfortable engorgement will usually get better after 3 to 4 days of not nursing your baby. During this time, wear a bra that gives good support. Cold compresses and ice packs put on the breasts for short periods of time will give relief. You may also take ibuprofen to relieve the pain. Nonsteroidal anti-inflammatory medicines, or NSAIDs, such as ibuprofen, can cause stomach bleeding, kidney problems, and other problems. Take the medicine as directed.

Contact your healthcare provider if pain in your breasts is severe.

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