

# Preventing Engorgement



For the first few days after giving birth, breasts remain soft and produce colostrum – the first milk. The amounts may seem small, but colostrum is available in just the right amount for the size of your baby’s stomach. Colostrum is rich in nutrients and immune factors which feed your newborn baby and protect him from diseases.

Within 72-96 hours, you will notice changes in your breasts. They will become full, firm, warm, and perhaps tender as milk production increases and colostrum begins to change to mature milk. Breast fullness and mild to moderate swelling is normal. It is caused by milk and extra blood and fluid in the breasts. Your body will use the extra fluids to make milk for your baby. This breast fullness and swelling may last a day or two.

Your breasts will adjust over time, making the exact amount of milk that your baby needs. *In cases of extreme or prolonged, painful engorgement, get help from a lactation consultant or healthcare professional.* Your baby helps you manage engorgement by removing milk frequently. This means you should breastfeed at least 8-12 times each 24 hours. If your baby is not latching properly or feeding frequently, you may use a breastpump to keep your breasts from becoming overly full. Engorgement reduces the elasticity of the breasts and nipples, leading to more latch problems and sore nipples.

If breast fullness or swelling becomes severe, your breasts may redden and become very painful. If the excessive milk is not removed from the breast, chemical signals are released which can decrease milk production. Unrelieved, prolonged engorgement leads to a lowered milk supply.

*A temperature over 100.4 °F or 38 °C may be a sign of an infection. Call your healthcare professional.*



## Prevention

Begin breastfeeding as soon as possible after birth and frequently thereafter to prevent painful engorgement.

- Avoid early use of bottles and pacifiers while baby is learning to breastfeed.
- Avoid unnecessary supplements, as this can lower milk supply.
- Breastfeeding at least 8-12 times in 24 hours is the most important thing you can do to prevent engorgement.
- Be sure that your baby is latching well. Improper latch can reduce the amount of milk your baby removes from your breasts which can lead to engorgement.
- Let baby nurse until he finishes each breast. Do not limit baby's time at the breast.
- Gently massage and compress the breast when your baby pauses between sucks. This can help drain the milk from the breast.
- Ask for help from your nurse, lactation consultant or healthcare professional so that latch problems are resolved as soon as possible.
- If you must miss a feeding or if baby is not nursing well, use hand expression or a breastpump to remove the milk.

## Seek help if:

- Engorgement becomes severe or you are in pain.
- If you develop a temperature over 100.4 °F or 38 °C.
- Your baby has trouble latching on.

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## Treatment for Engorgement

- Use relaxation techniques and gentle breast massage to help improve milk flow and reduce engorgement.
- To start milk flow, use warm moist heat on the breasts for a few minutes, or take a brief warm shower before breastfeeding.  
**Note:** Using heat for extended periods of time (over 5 minutes) may make swelling worse.
- Hand expression or brief use of a breastpump will soften the nipple and areolar tissue, making it easier for baby to latch well and deeply.
- Pumping once to completely drain the breasts after baby nurses can resolve engorgement for some women. Then return to frequent breastfeeding to manage breast fullness.
- Gently massage and compress the breast when your baby pauses between sucks. This helps drain the breast, leaving less milk behind.
- Although research data is scarce, cabbage leaf compresses have been used for generations to reduce pain and swelling from breast engorgement. Apply clean, whole leaves of cabbage to breasts for approximately 20 minutes between feedings 3 to 4 times a day until engorgement subsides.
- A bag of frozen vegetables wrapped in a thin towel works well as a cold compress. Some women find a cold compress before nursing reduces swelling and helps relieve pain.
- If your breasts are uncomfortably full, express a little milk by either hand expressing or pumping with a quality breastpump on a low setting. Express just enough until you are comfortable; avoid over stimulating. Use manual expression or a quality breastpump on a low setting. A hospital-grade rental pump can manage engorgement in cases where the baby is unable to breastfeed. Call 1-800 TELL YOU for a local rental location or visit [www.medela.com](http://www.medela.com).
- Ask your healthcare professional about medications such as ibuprofen to reduce pain and inflammation.
- A well-fitted, supportive nursing bra makes some women feel better. Others prefer to go braless during engorgement.
- Fever higher than 100.4 °F or severe pain may signal a breast infection. Call your healthcare professional if this occurs.

## Resources and References

**Got to [www.medela.com](http://www.medela.com) to educate yourself on products and information available for you and your baby.**

**To locate Medela products or a breastfeeding specialist in your area, go to [www.medela.com](http://www.medela.com) or call 1-800-TELL YOU, 24 hours a day, 7 days a week.**

### Some other excellent resources:

- International Lactation Consultant Association – [www.ilca.org](http://www.ilca.org)
- La Leche League International – [www.llli.org](http://www.llli.org)
- United States Lactation Consultant Association – [www.uslcaonline.org](http://www.uslcaonline.org)

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