

ENGORGEMENT

Engorgement of the breast in the early postpartum period involves swelling due to increased blood vessels and fluid in the breast as your milk volume increases (“comes in”). It is different than mastitis. Engorgement typically begins 3-5 days after birth, and subsides within 12-48 hours if properly treated (7-10 days without proper treatment).

To prevent engorgement:

- * Feed your baby frequently: Directly feed your baby at breast/chest early and often, at least 8-10 times in 24 hours for the first few weeks after the baby is born. As long as your baby is latched on comfortably and removing milk well, let them nurse for as long as they would like. Many babies will feed more frequently (Cluster feeding), this is totally normal for newborns. Cluster feeding tends to happen in the evening and into the night.
- * Don't skip nighttime feedings.
- * Nurse with baby's early cues (“on demand”)
- * Allow baby to finish the first breast before offering the other side. Switch sides when baby pulls off or falls asleep. Don't limit baby's time at breast.

For moderate engorgement (Your breasts are as firm as the tip of your nose):

- ◆ Ensure correct latch and positioning so that baby is nursing well and sufficiently softening the breast.
- ◆ Apply heat to your breasts before nursing or pumping to encourage the milk to flow.
A warm shower, a warm washcloth, or a moist heating pad directly on your breasts/chest can help promote milk flow.
- ◆ Apply cold after feedings to reduce swelling and provide comfort. You can use ice packs or bags of frozen vegetables wrapped in a light towel. Apply for 10-20 minutes and then take a break for at least 20 minutes.
- ◆ Lymphatic massage can also help remove excess fluid from your breast or chest.
This is very gentle massage up towards your armpit – similar to the pressure you would use to put on lotion or pet a cat. If you have a lot of fluid in your breast/chest tissue (also known as edema), this technique can help relieve it. Check out the video via the QR code in your Guide to Breastfeeding.
- ◆ Support your breasts with a well-fitting bra. If you don't want to wear a bra, that's fine. But know that if you have lots of engorgement and/or larger breasts, **swelling in the connective tissue will collect in the bottom parts of your breast/chest if you go without a bra. This is the same as what happens if you were to sit in a car for 12 hours and not move your legs: your ankles would swell. If you wear a supportive bra, you will help your breast more naturally drain this fluid and it will improve pain and redness.**
It is a **SERIOUS** myth that bras cause mastitis, and it has resulted in so many women suffering from back pain, chest pain, and lymphedema (swelling in the lower portions of the breast/chest). Even small breasted women can develop lymphedema (Engorgement of the breast).

For extreme engorgement (Your breasts feel as hard as your forehead):

- ◆ Apply cold, *No heat*, to reduce swelling and provide comfort. You can use ice packs or bags of frozen vegetables wrapped in a light towel. Apply for 10-20 minutes and then take a break for at least 20 minutes. These cold items will help to decrease swelling and engorgement.
- ◆ Side lying nursing can help if it's comfortable for you to lay on your side.
- ◆ Lying on your back helps the excess fluid in our breasts be reabsorbed by your body.
- ◆ Hand express a few drops (up to 5-15ml) of milk from your breasts to soften the areola, making it easier for the baby to latch.
- ◆ **Reverse Pressure Softening (RPS)**, which reduces swelling in the areola and nipple, can help an infant latch more easily to an engorged breast. RPS involves using your fingers to push the area around the areola in order to get rid of the swelling that is around the nipple. (See handout provided)
- ◆ Talk to your healthcare provider about taking an anti-inflammatory medication, like Ibuprofen, to help with discomfort.
- ◆ Some people have found relief with acupuncture and/or therapeutic ultrasound for severe engorgement.

***Do NOT increase pumping frequency between other pumping or breastfeeding sessions to treat engorgement. If necessary, use a hand pump or hand express to remove as little volume as possible to make yourself comfortable.**

***If your baby is not nursing well, you will need to pump and/or hand express your milk at least every 2-3 hours. Check in with a lactation consultant if swollen, engorged breasts are still a problem for you after one week.**