



Engorgement

Engorgement is a swelling of the breasts caused by the milk coming in. It is most common during the first week of breastfeeding.

While some breast fullness is normal in the second to fourth day after birth, a mother should continue to feel well. This fullness may last as long as seven days. With normal fullness, milk flow is normal and latch-on is generally not seriously affected (however, the baby may have a period of adjustment to latching onto the newly full breast).

Symptoms of engorged breasts include:

- Feeling warm.
- Feeling hard and uncomfortable.
- Being tender to the touch.
- Having fullness that extends to underneath the arms.

The nipple may be stretched and flattened by the pressure of the milk in the breasts. Even though the nipple may appear normal, it can be difficult for the infant to latch. Nipple damage can occur if the infant is not latching well.

Risk factors for engorgement:

1. Short restricted feedings.
2. Skipping breast feedings.
3. Engorgement may be more intense for mothers who have breastfed before.
4. Delayed initiation of breastfeeding.
5. Infrequent feedings.

Suggested Care Plan for Engorgement:

- Frequent feedings around the clock. Let baby nurse as long as he/she wants to, do not stop the baby while it is nursing.
- Be sure baby is latching well. A good latch is important for the breast to be emptied.
- If mother and baby are separated or the mother is unable to breast feed a breast pump should be used to remove milk from the breast every 2-3 hours.
- Use a warm, wet towel to cover the entire breast for a few minutes before a feeding. An electric breast pump can also be used at low settings, if necessary to empty the breast enough to help the baby latch-on.
- Change nursing positions to help empty the breast better. Use gentle massage during a feeding.
- Between feedings apply ice or cold packs to the breasts, a bag of frozen vegetables would work as well.
- Wear a supportive bra.
- Ask your doctor about medicines that will help with the swelling.
- Contact your doctor if you have the following: temperature greater than 100.6, flu-like symptoms such as chills/body aches, or pain in one area of the breast. (*Note: you can continue breastfeeding even if you have a fever*)

Wilson-Clay, B. and Hoover, K., The Breastfeeding Atlas. Austin, TX: LactNews Press; 1999. | Smith, Mary Kay, "New Perspectives on Engorgement", Dec. 1999 and Jan 2000 <<http://www.llli.org>>



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