

Breastfeeding Your Baby: Caring For Your Breasts

Breast milk gives your baby more than just good nutrition. It also provides important substances to fight infection. Breastfeeding has medical and psychological benefits for both of you.

Here is information from the American Academy of Pediatrics on how to care for your breasts.

How do I take care of my breasts?

During pregnancy, the oil glands around the nipple become more active, moisturizing and protecting the skin. When you take a bath or shower, wash your breasts with warm water only. Don't use soaps or lotions because they aren't necessary and may be irritating.

If you wear bras, you will probably have to purchase new ones as your breasts grow during pregnancy. Nursing bras have fasteners in the front to allow easy access for feeding.

Deciding to wear a bra is a personal choice. Some women choose not to wear a bra during pregnancy or breastfeeding. There's no research to say that wearing a bra affects breast size or shape in later life.

When your milk comes in, your breasts will go from feeling soft to firm. If your nipples leak, use an absorbent pad to catch the leaking milk. Don't use plastic-lined pads because they prevent air from circulating around your nipples.

Your obstetrician or family doctor should examine your breasts and nipples during pregnancy and at your yearly checkups. You should learn how to do a breast self-exam. Self-exams should be done monthly during and after pregnancy. If you plan to prepare your breasts or nipples in any special way based on cultural practices, discuss this with your doctor. Remember to ask any questions you have about breastfeeding or other health concerns.

What is engorgement?

Expect your breasts to get bigger and your breasts and nipples to feel tender when you first start breastfeeding. Engorgement occurs when your breasts become too full. This often occurs if you haven't been breastfeeding often enough or not draining your breasts adequately. Feeding on demand ensures that your baby's hunger is satisfied and helps prevent engorgement.

If your breasts become engorged, try

- Breastfeeding frequently.
- Soaking a cloth in warm water and putting it on your breasts or taking a warm shower before feeding your baby.
- Using cool compresses or ice packs after feedings to relieve your discomfort and reduce swelling.
- Gently massaging your breasts from under the arm and down toward the nipple.
- Different positions during feeding, such as lying down or using the football hold.
- Expressing some milk before you breastfeed, either manually or with a breast pump. This may be needed to allow the baby to latch on properly.
- Pain medicines such as ibuprofen or acetaminophen. If you received prescription medicines for pain after delivery, these can be used as well, but only for a few days.

Engorgement is a temporary condition. Once the engorgement passes, your breasts will become soft again. This is exactly what should happen.

What should I do for sore nipples?

Get help right away if your nipples are sore. Breastfeeding shouldn't make your nipples sore. Most often soreness is caused by incorrect latch-on. Many women think they have to wait and "tough it out," but this only makes it harder to treat the problem. If you have nipple pain that continues after the latch-on, pain all through the feeding, open cracks, or bleeding, you need to be seen by your doctor or a lactation specialist.

What are blocked or plugged ducts?

Sometimes an area of the breast becomes blocked or plugged. The area is firm and painful and may be slightly red, but the mother is otherwise healthy. Treatments for blocked ducts are moist heat applied to the area, massaging the area before and during feeding, and frequent draining of the breast by feeding or milk expression. If the blockage doesn't clear within 48 hours, call your doctor. Sometimes a blocked or plugged duct will lead to a breast infection.

How do I know if I have a breast infection, and how is it treated?

Mastitis is an infection of the breast. The infection is in the tissues, not in the milk. It causes swelling, burning, redness, and pain in the breast, along with flu-like symptoms such as fever, body aches, and low energy. Mastitis usually occurs in just one breast. If you have any of these symptoms, let your doctor know right away so that you can start treatment. Treatment usually includes continued breastfeeding or pumping, a lot of rest and fluids, warm compresses, antibiotics, and pain relievers.

Remember

For some mothers and babies, breastfeeding goes smoothly from the start. For others, it takes a little time and several attempts to get the process going effectively. Like anything new, breastfeeding takes some practice. You're not alone. If you need help, ask your pediatrician, a lactation specialist, or a breastfeeding support group.

Visit [HealthyChildren.org](https://www.HealthyChildren.org) for more information.

Adapted from the American Academy of Pediatrics patient education booklet, *Breastfeeding Your Baby: Answers to Common Questions* © 2022.

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