

Guide to Common Breastfeeding Problems

Congratulations on your new baby! You have made one of the best choices for your health and the health of your baby by deciding to breastfeed. We know that the road can sometimes be bumpy, and want to give you a little information to help get you through the tough spots if they should come.

When your baby is about 7 to 10 days old, he/she probably will want to eat all of the time. You may find yourself wondering—what's happening to my milk supply? RELAX! This is very normal, and not a sign that your milk is decreased. In fact, your baby is going through the first of many growth spurts. Just nurse as often as your baby demands and this will increase your milk supply to meet his/her growing needs. You can also expect a growth spurt around 3 weeks, 6 weeks, 3 months, and 6 months (or a little earlier).

Other common problems with breastfeeding you may have include those below. Don't be discouraged; you may have none of these. However, it's nice to know what to do and where to go for help if you do.

Sore Nipples

Feeding often, when the infant first seems to be hungry, is the best way to prevent sore nipples. Latch the baby on your breast with the baby's mouth wide open so that the entire nipple plus some breast tissue are inside the baby's mouth. If nipples are becoming sore, pay special attention to latch-on. Try nursing the baby in different positions. Many mother's nipples get a little sore at first, but if your nipples keep hurting during the feeding, there may be something wrong with how the baby is latching on to your breast. If soreness is getting worse, you should call for help from a lactation consultant or your health care provider. When ending a feeding on one breast, if your baby does not release the suck on her own, make sure to break the seal of the baby's mouth. This can be done by gently putting your finger in the corner of the baby's mouth and pushing the lips off your breast. If you do experience sore nipples, here are some things you can do to help speed the healing process:

- 1) Start each feeding on the side that hurts less. Babies suck harder at the start of each feeding.
- 2) Applying moist heat to the breasts after nursing will help the healing process.
- 3) Rub a little breast milk or Lanolin into the sore places to help them heal.
- 4) Use different feeding positions to reduce pressure on the sore nipple.
- 5) You may also want to buy some breast shells which fit inside the bra to allow air to circulate while sore nipples are healing.

Plugged Milk Ducts

Sometimes milk will build up in one part of your breast. It will feel hard and may be sore to touch. You can prevent this by avoiding tight or under wire bras, nursing the baby frequently, and massaging areas that are uncomfortably full as the baby nurses. Here are some things you can do to help relieve this so you do not develop a breast infection - a complication of an unrelieved plugged duct:

- 1) Nurse the baby on the hard side first.
- 2) Put warm wet washcloths on the hard part of the breast, or submerge the breast in hot water prior to nursing.
- 3) Massage the hard part of the breast while the baby is nursing.
- 4) If you wear a bra, take it off to nurse.
- 5) Nurse until the hard part is softened. You should be nursing at least every 2-3 hours.
- 6) Pump or express milk by hand from the hard breast if the baby does not get it softened.
- 7) After nursing, a cold ice pack may help relieve soreness or swelling.

Breast Infections (mastitis)

If a hard area in your breast becomes extremely sore or red, you may be developing a breast infection. You may also experience generalized symptoms of illness such as fever, headache, or body aches. Contact your health care provider right away if this happens so that you can receive guidance and to determine if medical treatment is needed. Other things that will help during your recovery include the following:

- 1) Nurse frequently—at least every 2 ½ hours. The problem is in the tissue. Your milk is not infected, and it is best for the baby to continue nursing.
- 2) Gently massage the sore area during feedings or pumping.
- 3) If you wear a bra, take it off when you are nursing.
- 4) Rest and drink plenty of fluids, as you would with any serious illness.

Fussy Baby

All babies cry; it is the only way that they can “talk”. When your baby is fussy, you may be wondering if he or she is getting enough to eat. If he/she feeds 8 - 12 times in 24 hours, you hear audible swallowing when he/she nurses, he/she is normally seems full after the feeding, and is having 6 wet diapers and 3 or more BMS in 24 hours, your baby is probably getting plenty to eat. If there is any question, take your baby to be weighed.

Remember, sometimes your baby may request frequent snacks, eating every 15 - 30 minutes for several feedings. This is normal behavior. However, if your fussy baby is not satisfied after nursing, or is not having wet diapers and bowel movements, he or she needs to be checked. Also, if you feel your baby just doesn't like your milk or is allergic to it; please discuss this concern with your health care provider before giving formula. Formula may confuse issues and make it hard to sort out why the baby is fussy.

Yeast infections

It is common for newborn babies to get an overgrowth of yeast inside their mouths. You may notice white patches inside the baby's lips or cheeks. This is also known as thrush. The baby can pass the yeast to your nipples and breast. If you have burning or redness on your nipple and areola, or feel a stabbing sensation in the breast, you need to contact your health provider. If you or the baby have symptoms of yeast, both of you need treatment.

If you have any questions or concerns, please contact your health care provider or local breastfeeding support group.

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