Engorgement

What is engorgement?

Engorgement is when your breasts become swollen, tender, hot and sometimes red.

It is very important to treat engorgement quickly. If your breasts get too big, your baby may not be able to latch correctly and this could cause more problems.

What causes engorgement?

- Your milk coming in after birth. This usually happens within 2-6 days.
- Skipping feedings (at night too).
- Giving bottles with breastmilk or other fluids and not pumping.
- Baby not breastfeeding often enough or long enough.
- Weaning too quickly.

What can help engorgement?

- Breastfeeding often: 8-12 times in 24 hours. About every 1 1/2 to 3 hours, during the night also.
- Pumping and saving the milk if you need to miss a feeding.
- Not giving water or formula to your baby, unless medically necessary.
- Massaging your breasts during feeds to keep the milk flowing.



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What can help engorgement? (continued)

- If your baby is unable to latch because your breasts are too hard and uncomfortable, try taking some milk out of your breasts:
 - Put warm, moist towels on your breasts before breastfeeding.
 - Take a warm shower and massage your breasts.
 - Pump just until the tightness is relieved. Hand express some milk while messaging your breasts is also a great method of decreasing fullness.
- Ice or cold compress may help reduce swelling and discomfort.
- If your engorgement is very painful, you may take a mild pain reliever that is recommended by your doctor. Take about 1/2 an hour before breastfeeding.
- If your breasts become engorged during breastfeeding, pump or hand express milk until tightness is relieved.
- If you are weaning, do so gradually. Stop or take out one feeding at a time.
- Wear a supportive, comfortable bra.
- Watch for plugged ducts (a lump with defined boarders) or a breast infection, (redness and swelling, along with a yellowish discharge with flu like symptoms).

If you do notice a plugged duct or a possible breast infection, call your doctor or WIC office.



