Breast Engorgement

What is Engorgement?

- **Engorgement** is a term that is used to describe **swelling in the breasts**. This swelling can be from fluid and inflammation in the breast tissue, or from the breasts filling with milk. Sometimes it is hard for mothers to know the difference, and you can have both occur at the same time.
- Engorgement is **commonly experienced in the first week postpartum** when milk production is rapidly increasing. This is also called 'the milk coming in'. People with engorgement describe their breasts as warm, pink/red, firm, swollen breasts, often lasting 48-72 hours in the first week after birth. Some will also notice a low-grade fever.
- Engorgement can also occur throughout the breastfeeding journey when there is a **long interval between times of nursing or pumping**. The breasts become very full and uncomfortable, and this fullness can lead to areas of swelling, also known as edema.

What Can You Do to Help with Engorgement?

Pace the milk flow from the bottle so that the baby has control of the flow and is not at risk for choking or drinking too fast. This method typically slows the flow and prevents overfeeding and bottle preference. See this video (https://www.youtube.com/watch?v=OGPm5SpLxXY) to learn more about paced feeding.

- **In the early days, feed your baby frequently and on demand.**

  Directly feed at least every two to three hours throughout the day and night in the first few weeks after the baby is born. If your baby is latching on and removing milk well, let them nurse for as long as they would like. Many newborns will feed more frequently than every 2-3 hours, and this is totally normal. Babies may also cluster feed (or seem to want to feed constantly) for certain periods during the day. Avoid pumping if the baby is nursing and does not need supplementation (extra milk from a bottle). Check in with a lactation specialist if swollen, engorged breasts are still a problem for you after one week.
- **If your baby has trouble latching, try these techniques:**
  - **Manually express** about 1-3 tsp (5-15ml) of milk from your breasts to soften the areola, making it easier for the baby to latch and for the milk to flow. Watch the IABLE Manual Expression video (https://www.youtube.com/watch?v=Fs-WEgrLJF0) to learn more about manual expression.
  - Use a technique called "**Reverse Pressure Softening.**" Reverse Pressure Softening is a special type of massage that makes it easier for your baby to latch when you are engorged or have a lot of fluid in your milk-making tissues. Reverse Pressure Softening involves using your fingers to push on the area around the areola (the dark part around the nipple) to push the swelling that is around the nipple away from that area (so that it can ultimately drain). The goal is to make the area around your areola softer and more compressible so your baby can latch on more easily and deeply. You can view a video of how to do this here.

- If you are experiencing engorgement due to going longer between milk removal sessions (this can happen in the early days if you are making more milk than your baby is drinking or later when your baby sleeps longer at night, or when they start nursing less as they add solids to their diet).
- **Do not pump to alleviate engorgement.** Your body needs to down-regulate production by only removing the amount of milk your baby is eating. Use a combination of ice, manual expression, and lymphatic massage (see below) for comfort until your baby's next feeding.

- **Before and/or after nursing or pumping, put something cool on your breasts.**

  Use ice packs, bags of frozen vegetables, or frozen wet towels on your breasts. Wrap these frozen items into a pillowcase to prevent frostbite to your skin. Place them over your breasts for 15-20 minutes every 3-4 hours. These cold items will help to decrease swelling.

- **Lie on your back as much as possible.**

  Lying down helps to elevate the breasts, for the same reason you would put your legs up if they are swollen. Keeping your breasts elevated will help to move the extra fluid back into your body. When lying down, you can also lift your breast off your chest for 30-60 second intervals. This can improve that flow of extra fluid out of your breasts.

- **Lymphatic massage can also help remove excess fluids from your breasts.**

  This is a very gentle massage – similar to the light pressure you use when petting a cat. This technique helps to move the fluid in the swollen areas into the lymphatic system, which recycles the fluid into the blood stream. There are a variety of techniques for doing lymphatic massage, but the basic goal is helping the fluid and inflammation drain from your breasts. This handout (https://eadn-wc01-5994650.nxedge.io/wp-content/uploads/2021/08/Lymphaticmassagehandout2.pptx.pdf) can help guide you on performing this technique. You can also see some different techniques demonstrated in these videos:

  - IABLE's Lymphatic Massage for the Breast During Pregnancy and Lactation (https://www.youtube.com/watch?v=-0Uwx7L47cg)
  - The Basics of Breast Massage and Hand Expression (https://bfmedneo.com/Breastfeeding-and-Lactation-Education-Resources/Videos/The-Basics-of-Breast-Massage-and-Hand-Expression-( ) – Breastfeeding Medicine of Northeast Ohio.

- **Take pain medication to help with discomfort.**

  Talk with your care provider about taking a medicine like ibuprofen or acetaminophen to help if the engorgement is painful.

Talk to your health care provider or a breastfeeding specialist if any of the following occur:

- You are very engorged and unable to express any milk from your breast(s).
- You are experiencing engorgement associated with fevers, chills, redness, or warmth that continues to worsen despite the techniques in this handout, or the symptoms are lasting longer than a few days.
- You are experiencing early engorgement that has not improved significantly within about a week.
- You are experiencing frequent engorgement.