



IABLE

Institute for the Advancement of Breastfeeding & Lactation Education

Clogged Ducts and Mastitis – Management and Prevention

Mastitis is a general term for **inflammation of the breast**. The word “mastitis” does not automatically refer to an infection but rather symptoms of inflammation and congestion/swelling in the breast tissue that can progress to infection. See our handout titled “Clogged Ducts and Mastitis - Causes” for a more detailed explanation.

I Think I Have a Clogged Duct or Mastitis. What Do I Do?

Mastitis is like a **sprained ankle** because both involve swelling in the local region. When you sprain your ankle, you elevate and ice the ankle and take pain medicine as needed. Treatment for mastitis or clogged ducts is similar:

- **Avoid aggressive or hard massage** of the area (“stay off of it”). There is no ‘plug in a duct’ so deep massage will only cause more inflammation and lead to complications such as abscesses.
- **Ice the area** frequently, such as for 10-15 minutes 4-6 times a day.
- **Lymphatic massage/drainage** (this is like elevation of a sprained ankle, because it helps drain the inflammation away from the injured area). See this [video](#) for instruction.
- **Do NOT increase the frequency of nursing or pumping.** Old advice included nursing more often to ‘drain the infection’. Now we know that increased frequency of nursing or pumping can cause more inflammation and swelling. Stay with your normal pumping or nursing frequency. Breastfeeding is preferred over pumping because it does not over stimulate the breasts like pumping can.
- **Pain medication as needed** - Ibuprofen and/or acetaminophen if OK with your physician/provider.

Icing and avoiding aggressive or hard massage are the most crucial of the above treatments.

If you are experiencing symptoms of a clogged duct or mastitis, remember these tips:

- Start doing the above treatment techniques **frequently throughout the day**. Some like to apply a cold pack on their breast every few hours for 15 minutes, while others choose to use an ice pack for 10 minutes every hour. Figure out what works for you and do it regularly.
- **Be patient**. Most of the time, swelling and inflammation will not develop into a more serious condition. If you start the recommendations in this handout, your symptoms should level off and then improve, over 48 hours.
- **Nurse on demand** or remove milk with a pump regularly. Only remove the amount of milk needed for the infant. **Adding extra pump sessions for engorgement/mastitis will drive up production and worsen swelling.**
- **If milk is not flowing at all**, hold off on nursing and pumping on that side until milk is starting to flow again. This will lead to a temporary drop in milk production. As swelling resolves, and milk is flowing, go back to your regular schedule of nursing or pumping.
- **Rest, hydrate, and take care of yourself.**
- If symptoms are **not improving or at least stabilizing after 24 hours**, seek medical care, but continue following these steps even if you are on antibiotics for an infection.
- Check out the [Academy of Breastfeeding Medicine's information on the mastitis spectrum](#).

How Can I Prevent Clogged Ducts and Mastitis?

- The most common reason for clogs and areas of swelling/inflammation/mastitis is making more milk than what is being removed. This typically happens when the breasts are **overstimulated from cluster feeding or adding pumping to breastfeeding**, as these activities can markedly increase milk production. Taking a longer break after increasing the rate of production, such as taking a longer sleep break overnight or missing a feeding/pumping during the day, leads to over-fullness, increasing the risk of swelling and mastitis. If you notice this pattern, please see a breastfeeding medicine physician or lactation consultant to discuss how to prevent these episodes.
- Note- some lumpiness and small areas of swelling are a **normal part of your body adjusting** milk production. Feeling a tender lump or seeing some redness does NOT automatically mean you have an infection. Start with the basics by using **ice and gentle lymphatic massage**. Many times, symptoms will improve with these steps over 24-36 hours.
- If you are making more milk than your body needs, try to **reduce the extra production**. A lactation consultant or breastfeeding medicine physician can help guide you.
- Wear a **supportive bra** without an underwire.
- **Avoid nipple shields.**
- Doing gentle [lymphatic massage](#) each day may help reduce ongoing swelling or inflammation. If it's not helping, talk to a lactation consultant, breastfeeding medicine specialist, or a knowledgeable **physical therapist or occupational therapist**.
- If you pump regularly, make sure your **flanges are the correct size**, as this can change over time, and/or you may need a different size for each side. Also, ask a lactation consultant or breastfeeding medicine physician if your pump settings are appropriate.
- **Get rest and take care of yourself** with a well-balanced diet and adequate hydration.
- In more severe or ongoing cases, treatments like **therapeutic ultrasound** - usually done by a physical therapist or other medical professional - may be helpful.
- **Osteopathic Manual Medicine (OMM)** is a hands-on treatment used by osteopathic physicians. It can help some people who have repeated clogged ducts or mastitis, and in some cases, it may also help babies who are having trouble feeding effectively. You can search for practitioners of OMM at the following websites:

- <https://omm.directory/>
- <https://cranialacademy.org/>

When to Be Concerned: Contact a Health Professional If...

- You have swelling, redness, and pain WITH:
 - **Fever of 101 degrees Fahrenheit** (38.0 degrees Celsius) or over
 - **Chills and body aches**
 - **Headache**
 - **Sweats**
 - **Not improving within 24 hours** of ice, lymphatic drainage, medicine, and no hard massage
- There is **blood or pus** coming out of your breast
- You have a lump that is **continuing to worsen after 48 hours** even without fever or above symptoms
- You have **persistent or recurrent** symptoms
- A lump lasting **2 weeks or more**
- **Recurrent clogs or lumps** that are always in the same place
- Persistent or worsening **skin changes** on your nipple, areola, or breast (with or without a lump)