

# A Guide For Breastfeeding Mothers



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## Breastfeeding

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East Grampians Health Service supports breastfeeding.

Breastfeeding is a great way to increase a baby's resistance to infection and disease. If you find you are having issues with breastfeeding, a lactation consultant is available if needed. Refer to **Where to Get Help** for more information.

## Full Breasts

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Usually around the third or fourth day after you give birth your breasts start to produce milk. This is known as milk coming in. The milk is no longer a yellow thick fluid and begins to change to thin white/blue milk.

At this time your breast may produce more than your baby needs. They will feel full and uncomfortable. This will only last a few days. Most woman will feel their breasts beginning to soften from 10 days to 2 weeks after birth.

## When Milk Comes In

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- Your breasts may feel quite full and firm making it difficult for your baby to attach to your breast. In this case, hand express prior to a feed just until your breasts feel soft.
- Some babies will be unsettled for the first 24 hours after the milk comes in and want to feed very frequently.
- Your baby may have lots of loose greenish poos.
- **Keep breastfeeding your baby while your breasts are full.**
- **Keep breastfeeding to regularly drain the breast to avoid complications such as blocked ducts and mastitis.**

## How to Ease Discomfort

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To ease discomfort:

- Make sure your baby is correctly positioned and attached. Ask your midwife to assist if you are unsure.
- Offer one breast per feed. Don't swap sides unless the first breast feels soft after your baby finishes feeding from it.
- If your baby wants a top up within an hour of a feed, offer the same side.
- If your baby is full and has only had one side and the other side feels uncomfortably full, hand express or pump a small amount until you feel comfortable.
- Change sides each time you begin a new feed.

To ease discomfort between feeds you can:

- Express a small amount until you feel relief.
- Wear a good supportive maternity bra to help support fuller breasts.
- Apply cold packs (e.g. cold cabbage leaves) on the breast for 10-20 minutes after or between feeds to help reduce swelling and discomfort.
- Prior to feeds:
  - Stimulate milk flow by placing a warm pack on the breast for 5 minutes, or have a warm shower or bath.
  - Paracetamol (e.g. Panadol) or ibuprofen (e.g. Nurofen) may also be helpful to relieve discomfort. Follow instructions on the packet.
  - Let some milk drip from one side into a container while feeding on the other side.

**Once your supply has settled down and your breasts may feel soft, offer both sides at each feed. Remember to let your baby finish the first side before starting on the other.**

## **Blocked Ducts**

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A blocked duct can cause a tender reddish area on the breast. You may feel a small lumpy area under the skin but otherwise feel well.

To treat a blocked duct apply warmth and gently massage lump towards the nipple. This can be done while feeding or expressing in the shower and bath.

You can try positioning the baby so that their chin points towards the lump as this may help clear the lump. If the block doesn't clear after 24 hours call our Lactation Consultant or Australian Breastfeeding Association (ABA) Counsellor (see [Where to get Help](#)).

## **Mastitis**

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Mastitis is a breast infection. The breast becomes red, swollen, hot to touch and painful. You may feel unwell and have a fever.

This condition occurs more commonly when breasts are full, if feeds are missed or a blocked duct goes untreated.

Mothers who are run down or very tired are more prone to mastitis.

To prevent mastitis:

- Make sure your baby is well positioned and attached
- Try to rest, eat well and look after yourself

If you think you have mastitis you should seek medical advice from your GP or visit your closest Urgent Care Centre as you may need antibiotics.

## **Expressing by Hand**

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Wash and dry hands thoroughly before expressing, and sit comfortably.

To stimulate milk letdown (release), gently massage your breast, moving from the back to the front of the breast towards the nipple. You can also apply a warm moist towel or face washer to enhance milk flow.

Place your thumb and forefinger opposite each other on the outer edge of your areola (2-3cm behind the nipple).

Press the thumb and forefinger back towards your chest, then press them towards each other through the breast tissue, keeping them well back from the nipple. The pressure should be firm but it should not hurt.

Move your thumb and forefinger around to another area of the areola and continue, gradually working your way around the areola. You can swap hands when you need to.

Change breasts when the flow decreases and you have worked your way around the whole areola. This may only take 3-5 minutes. Both sides may be expressed as often as you wish in a given session or until you tire. It is normal for hand expressing to take 20-30 minutes, particularly in the beginning.

Continue compressing in a rhythmical motion until milk flow decreases.

## Expressing with a Pump

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### Hand Pump

A hand pump is useful if you want to express occasionally so you can go out, have a break or work part time. There are a wide range available from most pharmacies. They are inexpensive, convenient and do not need to be sterilised.

### Electric Pump

An electric pump is useful for mothers who need to express regularly. They have the advantage of being portable and easy to use.

Pumps can be hired from:

- The Australian Breastfeeding Association: 1800 686 268
- East Grampians Health Service:  
Midwifery Department: 5352 9321
  - \$50 deposit is required at time of booking
  - Maximum loan period of 4 weeks

They can also be purchased from:

- Priceline Pharmacy: 5352 1007 (can order them in on request)
- Blooms The Chemist: 5352 1114
- Australian Breastfeeding Association  
[www.breastfeeding.asn.au](http://www.breastfeeding.asn.au)
- Baby Bunting Ballarat: 5338 1777
- Online

## **Cleaning and Storage of Pumps**

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- Wash pump equipment in hot soapy water
- Rinse in hot water and sterilise
- Dry thoroughly
- Store in an air-tight container

## **Storage Times**

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Freshly expressed milk can be stored:

- At room temperature (26 degrees celsius or lower) for 6-8 hours.
- In the refrigerator for 3-5 days. Store at the back of the fridge where it is coldest.
- In the freezer with a separate door for 3 months.
- In the freezer compartment inside fridge for 2 weeks.
- In the deep freeze (temp minus 18 degrees celsius) for 6-12 months.

## **How to Freeze, Thaw and Warm Breastmilk**

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### **Freezing Breastmilk**

Ensure container is only 3/4 full as the milk will expand when frozen.

Place labelled container in the fridge to cool, and when cold place in the coldest part of the freezer (usually the bottom).

### **Thawing Frozen Breastmilk**

Thaw breastmilk in the fridge over 24 hours. If you need the frozen milk straight away, place the milk under cold running water, gradually increasing the temperature of the water until the milk becomes liquid.



Do not thaw milk in boiling water as it may curdle. Discard any milk left over from the feed.

It is not recommended to thaw or warm in a microwave oven as the milk may heat unevenly which may cause burning of the baby's mouth. It is also not known how microwaves affect the beneficial qualities of breastmilk.

Research suggests microwaving may change the immune and nutrient quality of breastmilk.

Thawed breastmilk should be kept in the fridge until used. If defrosted in the fridge, use within 24 hours of being fully defrosted. If defrosted by warming, use within 4 hours. Thawed breastmilk cannot be refrozen.

It is normal for breastmilk to separate into different layers when chilled or frozen, and it may appear a little curdled after defrosting. Shake the container to mix the milk before use.

## **Warming Breastmilk**

Warm chilled or thawed breastmilk in a jug or saucepan of hot water until the milk reaches body temperature. Test the temperature by dropping a little on your wrist.

Never use boiling water to warm breastmilk.

## **Cleaning Equipment**

Breast pump parts, milk storage containers and feeding equipment should be rinsed straight after use so milk does not dry on them. Wash in hot soapy water, rinse well and dry thoroughly. Store equipment in a clean dry container with a lid.

## When Else Should I Seek Help?

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**Other complications requiring a review by a Lactation Consultant may include:**

- Low milk supply
- Breast/nipple thrush
- Nipple trauma
- Difficulty attaching baby to breast
- Introducing a nipple shield
- Nipple vasospasm
- Feeding after breast enlargement/reduction

## Where to get Help

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### **East Grampians Health Service**

Lactation Consultant  
(03) 5352 9321

Urgent Care Centre  
(03) 5352 9364

Australian Breastfeeding Association

24 hour helpline - phone 1800 686 268

[www.breastfeeding.asn.au](http://www.breastfeeding.asn.au)

Maternal Child and Health

24 hour helpline

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## Feeding Plan

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### 1. How often should I feed my baby?

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*Tip – give your baby lots of skin to skin contact before, during and after feeds.*

### 2. Should I offer one breast or both breasts each feed?

- ☐ One breast per feed
- ☐ Both breasts
- ☐ 'Switch' feeding (swap breasts when baby is sleepy or restless)
- ☐ Expressing and feeding by other methods

### 3. Should I offer top-up feeds

Use the guide below to decide if you need to offer top-up feeds and how to give them. Always top-up straight after breastfeeds. If possible, use expressed breastmilk (EBM) for top-ups first. If not enough EBM, make up the right amount with formula.

Sucking attempt	Top-up amount
Baby is not feeding at the breast at all  <b><u>OR</u></b> Baby has had only a few sucks at the breast	Offer a full feed.....mL
The baby is sleepy, with some deep sucking and swallowing for at least five minutes in total	Offer.....mL (half of baby's full feed amount)

The baby has sucked strongly and swallowing is seen and heard for at least 10 minutes in total.	Offer.....mL <b><u>OR</u></b> No top-up needed (circle option)
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**If expressing AND topping up:**

Breastfeed first, THEN top-up, THEN express and save EBM for the next top-up feed.

**Important tip** – Aim to breastfeed + top up + express within about one hour, so you and your baby can rest in between feeds. If unsettled after the top-up, the baby can go back to the breast for comfort.

**4. How should I give top-up feeds?**

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**5. How often and how long should I express and what type of breast pump should I use?**

**Tip** – to build up and maintain a good milk supply, express until baby is feeding very well and gaining enough weight by breastfeeding alone.

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**6. Other important points**

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**7. Duration of this plan**

☐ Until next review \_\_\_\_\_ ☐ Ongoing

**8. For the mother**

**Nipple and breast care**

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**Medications/supplements**

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**Other information**

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**9. Appointments/follow up**

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