

What to Do If Your Breasts Are Swollen

Breast swelling is a common but temporary problem that usually starts during the first few days after birth and resolves within a day or two. The swelling may be from the fluid shifts associated with pregnancy, labor and delivery or it may be from the increase in your milk production. These two different types of breast swellings look the same but you need a different technique for each to soften the breast and make it easier for your baby to breastfeed effectively and comfortably.

Swollen breasts within the first three days are almost certainly from extra retention of water in your tissues. Hormonal shifts after delivery, intravenous fluids and side effects of medications given during labor can cause both your ankles and breasts to swell, which can flatten your nipples. If water retention is the cause of the swelling, pumping your breasts may make the problem worse. Imagine if you had a “fat lip” from an injury. The last thing you would want to do is apply suction. That would only draw more fluid into your lips and increase the swelling.

Swelling in the tissue from extra water can also get in the way of milk flow when the milk increases between the second and fourth day. That’s why it is a good idea to reduce the swelling from postpartum edema before pumping.

Natural breastfeeding is a great technique to help keep swelling to a minimum because the positioning helps gravity work to bring the fluid back towards the

body rather than down towards the nipple. However the following technique called Reverse Pressure Softening will speed things up by softening the breast to make it easier for your baby to latch on deeper and more comfortably..

A simple technique, Reverse Pressure Softening was developed by lactation consultant, Jean Cotterman. It makes the areola more pliable which helps the baby latch deeply, avoiding nipple pain and trauma. Reverse Pressure Softening works even better in Natural Breastfeeding positions because it allows the fluid to drain downhill—just like elevating your feet can help with swollen feet and ankles. Try a few different hand positions to see what works well for you. There is no drawback to using this technique frequently during the postpartum period but it helps to practice it a few times before your baby arrives.

Reverse Pressure Softening Technique

Developed by K. Jean Cotterman RNC-E, IBCLC

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What is reverse pressure softening?

- » It's a way to soften the a-re-o-la (the circle around your nipple) to make latching and removing your milk easy while your baby and you are learning.
- » Latching should not be painful.
- » This method is not the same as removing milk with your fingers.
- » Don't expect milk to come from your nipple each time but it's OK if some milk does come out.

Why does reverse pressure softening work?

- » Early swelling, firmness or fullness may be only partly due to milk.
- » Some swelling may be from extra fluid stored (retained) in the spongy, protective tissue around your milk ducts. (This extra fluid can never go to your baby.)
- » Delayed milk removal often leads later to retained tissue fluid. Frequent, regular removal of small amounts of early milk is best.
- » Intravenous (IV) fluids, or drugs such as pitocin may often cause early, extra retained tissue fluid, sometimes taking 7-14 days to go away.
- » Reverse pressure softening briefly moves mild or firmer swelling away from under your areola, slightly backward into your breast for a short period of 5-10 minutes.
- » This allows your areola to change shape very easily, and makes latching easier.
- » The softened areola helps your nipple extend more deeply into baby's mouth.
- » Reverse pressure softening also causes a let-down reflex. (this signals your breasts to quickly release more milk forward, so baby's tongue can reach it.)
- » A soft areola also makes it easier to remove milk with fingertips or with short periods of slow gentle pumping.
- » If you need to remove milk for your baby with fingertips or pump, use reverse pressure softening, whenever needed. You may also gently massage milk forward in the breast.
- » Avoid long pumping sessions and high vacuum settings on breast pumps to avoid movement of extra retained tissue fluid into the areola and nipple.

When is reverse pressure softening helpful?

- » In the first weeks, for firmness of the areola, latch problems or breast swelling.
- » At any time, to get a let-down reflex, before or while pumping.

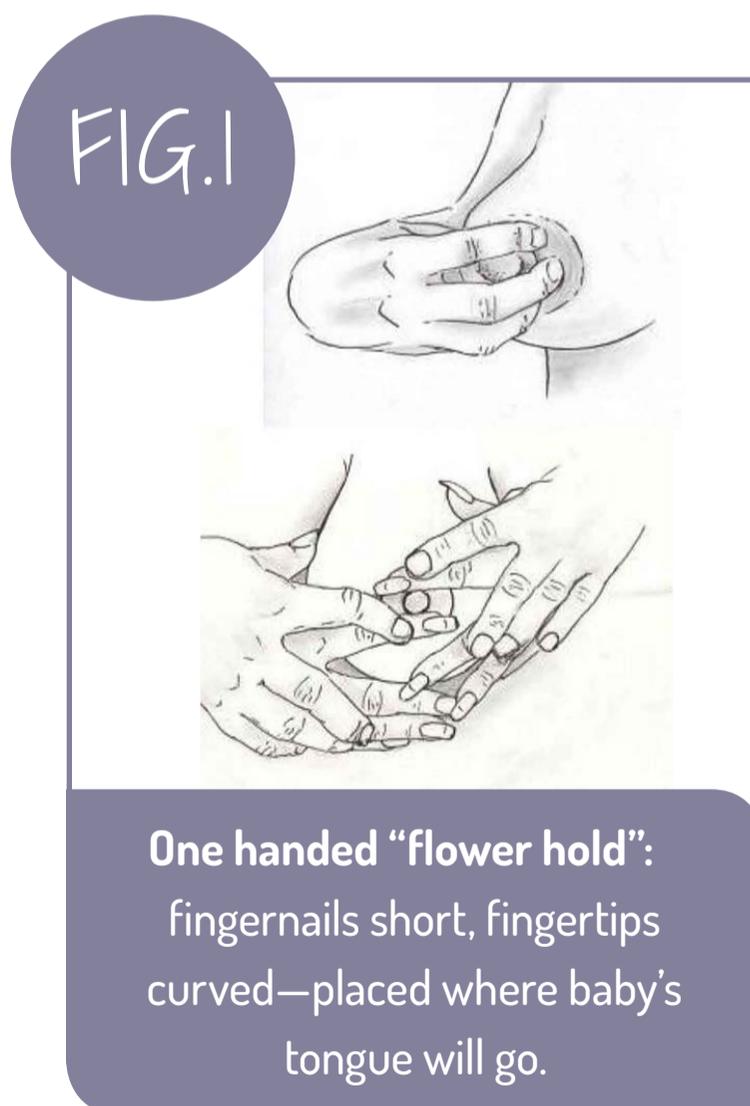
Feel your areola and the tissue deeper inside it. Is it soft and easy to squeeze, like your earlobe or your lip? If not, it's time to try reverse pressure softening each time just before your baby wants your breast. (Some mothers soften their areola before each feeding, for a week or longer, till swelling goes down, latching is deep and easy, and milk is flowing well.

NOTE: REVERSE PRESSURE SOFTENING SHOULD CAUSE NO DISCOMFORT.

CAUTION!: NEVER TO BE USED FOR MASTITIS, PLUGGED DUCTS OR ABCESS.

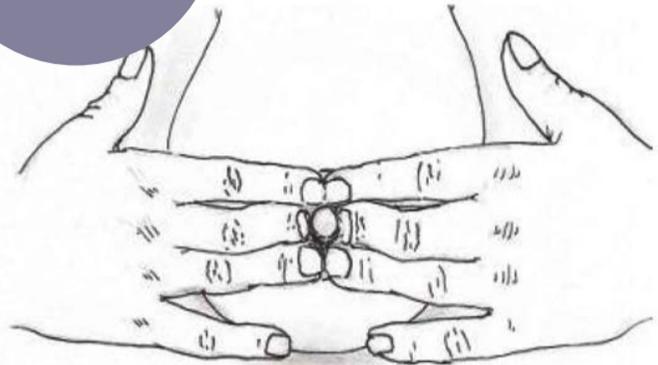
How to do Reverse Pressure Softening

- » Try this if pain, swelling, or fullness create problems during the early weeks of learning to breastfeed. The key is making the areola very soft right around the base of the nipple, for better latching:
- » A softer areola helps baby's tongue remove more milk, while being very gentle to your nipple.



- » Mothers say curved fingers work best (Fig. 1 or 2.) Ask someone to show you if needed.
- » Press inward toward the chest wall, counting slowly to 50; count very slowly if very swollen.
- » Moms with very swollen breasts get more relief lying on their back, (using gravity.)
- » This delays return of swelling to the areola, giving more time to latch. (For long fingernails, try another way shown below.)

FIG. 2



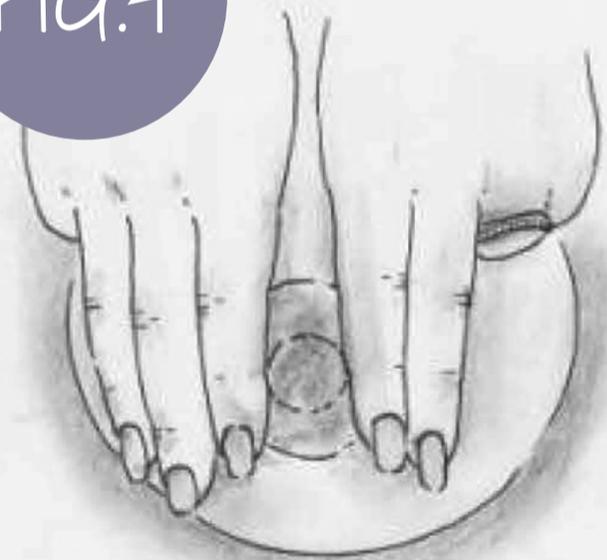
Two handed, one-step method: fingernails short, fingertips curved, each one touching the side of the nipple

FIG. 3



You may ask someone to help press by placing fingers or thumbs on top of yours

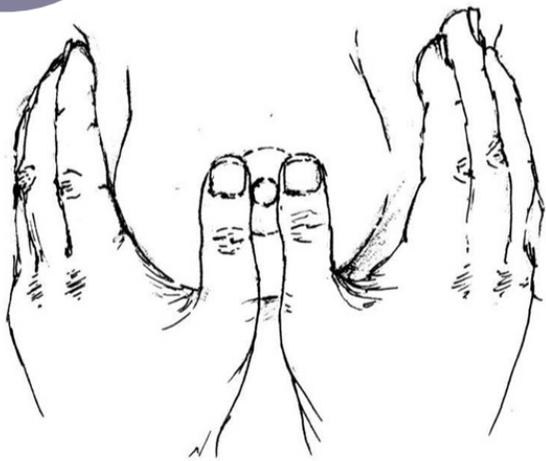
FIG. 4



Two step method, two hands: using 2 or 3 straight fingers each side, first knuckles touching nipple. Move 1/4 turn, repeat above & below nipple

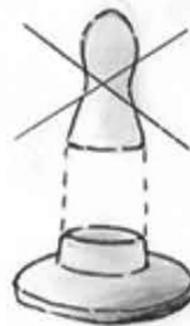
- » If mom wishes, someone else may help, using thumbs (Fig. 3).
- » Soften the areola right before each feeding (or pumping) till swelling goes away.
- » For some mothers, this takes 2-4 days or more.
- » Make any pumping sessions short, with pauses to re-soften the areola if needed.
- » Use medium or low vacuum, to reduce the return of swelling into the areola.

FIG.5



Two-step method, two hands: using straight thumbs, base of thumbnail at side of nipple. Move $\frac{1}{4}$ turn, repeat, thumbs above & below nipple.

FIG.6



Soft-ring method: cut off bottom half of an artificial nipple to place on areola to press with fingers