

# Mastitis

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Taking a closer look at one of the more common problems that local breastfeeding women are experiencing, and how, as peer supporters, we can offer effective support

Firstly I would like to identify that many women experience a hard, painful swelling which on occasions includes a significant part of the breast. This is often a blocked duct and usually resolves itself within 24 hours, and commonly (not exclusively) can be a problem for a mother who has an abundant supply of milk. It often happens when babies only 'half empty' the breast. The best prevention of blocked ducts is getting a good start with breastfeeding and most importantly getting good positioning and attachment as early as possible.

When we are identifying the symptoms of mastitis we need to recognise that mastitis is an inflammatory condition of the breast which may/ may not be accompanied by infection.

Symptoms of mastitis are often identified as red area on the breast, lumpy breast which may be hot to touch, flu-like symptoms (aching, increased temperature, shivery) feeling tearful and tired. This feeling can sometimes start very suddenly and get worse very quickly.

As peer supporters we can offer support to mothers by empowering them to keep feeding, and reassurance about the value of breast milk and that it is safe to continue feeding.

It is essential that women are successfully taught effective removal of breast milk, either by correcting positioning and attachment or demonstrating how to effectively hand express. All peer supporters require a clear understanding of how self-help measures can effectively help clear blocked ducts and engorgement

- Check positioning and attachment
- Feed from the affected side first to drain it as thoroughly as possible
- Soften breast before feeding, by expressing a

little milk or running warm water over it, to aid attachment

- Feed baby more frequently, express between feeds if necessary
- Express gently after feeds, to ensure breasts are well-drained
- Use a warm compress over breast before feed to aid milk flow
- Use a cold compress, or cold cabbage leaves, over red area of breast after feed, to reduce inflammation
- Use wide tooth comb to stroke gently over the red area, towards the nipple, to help the milk flow
- Check for any clothing that is pressing into mother's breast
- Encourage mum to rest as much as possible
- Take regular pain relief, paracetamol and/or ibuprofen, as long as mum is able to take such medications
- Encourage mum to remember how she felt, so she can start self-help measures straight away if mastitis were to develop again in future

It is important that all peer supporters are able to offer this level of support and understanding, and also that they know when to signpost to the GP (usually within 24 hours of symptoms). This will enable mothers then to have a course of antibiotics if the self-help measures have not been effective on their own.

Peer support is so valuable to mothers, empowering them to 'get through' mastitis and prevent recurrence.

Resources available to mothers are the BFN leaflet on Mastitis, available in all breastfeeding peer support groups' resource boxes, and the leaflet is also available to download and print from the [www.breastfeedingnetwork.org.uk](http://www.breastfeedingnetwork.org.uk) website.

References are from BFN website and leaflet plus reference to the Ultimate Breastfeeding Book of Answers Jack Newman M.D.



# Self help measures which can help effectively help clear blocked ducts and engorgement

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