

Mastitis - Breast Infection

Mastitis is an infection /inflammation of the breast. Your breast has lots interwoven tubes (ducts) carrying the milk to the nipple. They can get narrowed or blocked, and then the breast may get sore lumps that are swollen and red. This is the start of mastitis, and it's most often caused by having too much milk. If it goes untreated it can become an infection in the breast. Recently the way we treat and help you recover from mastitis has changed this is the latest information.

What is mastitis?

- Breast swelling with warm painful, red areas and lumps
- You are likely to feel unwell, hot and cold, achy and shivery
- You may have a fever over 37.5 (sometimes mastitis feels similar to getting the flu)

** If you have symptoms of mastitis under six weeks post birth contact your Lead maternity Carer-LMC immediately, over 6 weeks post birth see your GP.*



Mastitis examples

Breastfeeding with Mastitis

- Keep breastfeeding your baby, this is not a good time to stop.
- Offer both sides as you would normally but **be careful to not overstimulate milk production in the affected breast.**
- Keep breastfeeding from the sore breast if baby will nurse and milk is flowing freely.
- It is ok if the let-down milk comes out from the sore breast. Allow it to flow.
- If baby won't take the sore side, try some hand expressing or brief gentle pumping **only** if the milk is flowing.
- As things improve, baby will be able to come back to feeding both sides.
- If you are only pumping for your baby, just pump as normal, just what baby needs, (not more than usual).
- It is safe for baby to keep breastfeeding when you have mastitis and are taking pain relief or antibiotics. No harm will come to baby.

Do these things to help heal your mastitis

- Apply icepacks to breast lumps not the nipple (for 10 minutes every 30 min initially)
- DO NOT massage the lumps down towards the nipple, it may make it worse.
- DO NOT pump to drain after breastfeeding; we want to **decrease** the milk supply.
- Avoid heat, it can increase swelling.
- Take Ibuprofen, it can reduce swelling (200-400mg 6hrly with food as needed)
- Take paracetamol for fever and pain (1gm 6hrly as needed)
- Wear a supportive top or bra between feeds if this helps.
- Rest up, eat and drink and get support around the house and with baby if you can.



Do Lymphatic Drainage: Gentle breast stroking helps to reduce swelling. Do this while lying back, with very light gentle strokes on the breast from nipple to armpit and collarbone, as shown in the picture. This can be done as often as you like, most importantly before feeding or pumping.

**Picture used with permission from Dr Katrina Mitchell*



Other things that may help

Sunflower lecithin can be taken to reduce swelling and unblock ducts; it is a very natural and a common food additive and there are no known problems or concerns taking it when breastfeeding. Daily dose 3600-4800mg a day Take 1200mg 4 times a day for 2 weeks then slowly decrease week by week. If blocked ducts have healed it can be stopped but if they reappear, taking lecithin might be needed until you stop breastfeeding.

When to get more help with Mastitis: If the above tips have not improved your symptoms within 12 to 24 hrs, or you feel unwell with a high fever, please contact your Lead Maternity Carer (LMC) if under 6 weeks post birth. If more than 6 weeks after birth, see your General Practitioner (GP).

They will likely prescribe some antibiotics 5-7 day course is recommended; please ensure you finish all the tablets.

We encourage you to keep breastfeeding. If your mastitis is severe or keeps coming back, you might need admission to hospital for IV antibiotics please seek advice from your Lead Maternity Carer (LMC) or General Practitioner (GP).

You may also like to see a lactation consultant; under 6 weeks post birth referral is via your LMC, or you can seek one privately fees apply.

Women's Health Action Breastfeeding Support directory: <https://www.womens-health.org.nz/find-your-breastfeeding-support/>