

## ***First Week Engorgement***

**Engorgement, sore nipples, and more-than-usual jaundice often to go together.  
They all relate to a baby not nursing efficiently enough or often enough.**

**You can probably avoid early engorgement altogether, with these 3 steps:**

**1) Keep your newborn in your arms and in your bed** practically all the time at first. A lonely cradle is the last place she wants to be anyway, and holding and sharing sleep are healthy for both of you. Any standard exams or procedures can be done right there in your arms. Baths, weighing, and eye drops can all wait until after the two of you have had a good, leisurely first nursing - which may not occur for an hour or so after birth, but can last for well over an hour once the two of you get going. If she is taken away from you before her first nursing, it may not be as easy for her to figure out how to do it.

**2) Nurse as soon and as often as your baby likes**, which may be many times a day or for very long stretches at first. After that first long nursing, he may want to settle in for a long, long nap - not a problem, because he just had a good meal. But after that first many-hours-long snooze, he may want to spend most of his waking time at your breast... and he may be awake much more than you thought he would, especially if his birth was unmedicated. **Expecting babies to nurse only once every few hours causes much of the engorgement we see in this culture.** Remember, he's not very efficient right now at getting your milk or even at using the milk he gets, so expect and encourage a whole lot of nursing during this first week, even if you have to tell visitors to come back later. As your baby becomes bigger and more skilled, his efficiency (and yours) will improve.

**3) Position your baby so that nursing is comfortable** for your breast and your body. Some tenderness or super-sensitivity may be normal in the first week; pain is not. If nursing is painful, find informed help quickly. It usually means the baby isn't attached well enough to take milk out efficiently. Check to see that her lower lip is as far from your nipple as possible (though her upper lip may be just beyond your nipple); her chin is not tucked; her chest, navel, and thighs are pasted against you; and her cheeks are against your breast, hiding her mouth when she nurses. Most babies are held too far to the side and must tuck their chins slightly to nurse, which can cause pain. Try moving her more toward the opposite breast. You'll see that her chin lifts as you move her, freeing her nose and pressing her chin into your breast where it can work the milk out more easily.

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**Some women become engorged despite early, frequent, well-positioned nursing**, and some babies - especially those who were exposed to birth medications - may not be able to nurse with normal skill or frequency right away, further contributing to engorgement. Because breast tissue covers much of our chest, you may even find that your armpits are swollen!

**What can you do if you do become engorged? See the other side for ideas.**

- **Nurse or express your milk at least every 2 hours**, and at least twice during the night. The more milk you allow to collect in your breasts, the stuffier they get and the harder it is for fluids to move. By taking milk out often, you make it easier for all the fluids in your breast - not just the milk - to move around.
- **Wrap a bag of frozen peas in a small towel** and use it as a moldable cold compress to help bring the swelling down - twenty minutes on, twenty minutes off. Engorgement is like a sprained ankle. Blood and lymph are rushing to your breast to help get the milk factories up and running. We don't put heat on a sprained ankle, and it probably doesn't make sense to put heat on an engorged breast, either.
- **Use cabbage leaves** to help bring down swelling (it even works on sprained ankles). Discard the outer, possibly sprayed, leaves of a head of green cabbage. Now peel off one or more leaves, tear out the hard vein if you like, crumple each leaf gently in your hand, and put the leaves on your breast (not over your nipple). They should feel nice and cool, and can be held in place with a bra or shirt. Leave them on until you get tired of them, and repeat as often as you like. Maybe there's a reason cabbage leaves are shaped the way they are!
- **Lie on your back.** If your breasts are the highest part of your body, tissue fluids will tend to drain from them.
- **Move your breasts around gently.** Having them held rigidly in one position doesn't encourage drainage.
- **Stand in a shower** if the idea of heat is appealing, and let the hot water land between your shoulder blades. Or use a heating pad on your back. Some people feel that using a warm compress on the breast shortly before nursing is helpful. See what works best for you.
- Ask about taking **ibuprofen**, which can help reduce inflammation.

If your baby has trouble latching on because your cozy, soft breast has become a hard soccer ball, you can:

- **Express some milk** by hand or with a good pump, to soften the area around your nipple before he latches on
- **Press your fingertips** in a ring around the base of your nipple, and keep pressing for about a minute. You may find the area softens as fluids shift farther back in your breast.

Don't worry that you're going to make too much milk if you keep taking milk out. Right now, your goals are just to keep your baby fed and yourself comfortable. Your milk supply will settle down once this early "exuberance" is over.

**If you are unable to make your breasts comfortable, or if your baby is unable to nurse effectively, call a breastfeeding specialist for help.** Engorgement passes, but the sooner it passes, the happier you'll both be.