

Causes, prevention, treatment

WHAT IS MASTITIS?

Mastitis is inflammation of the breast tissue that can be caused by an engorged breast or a blocked duct.

A red, lumpy, painful area on the breast is an early sign and mastitis can develop quickly if the milk is not removed.

Signs and symptoms

- Chills/fever
- Joint aches and pains
- Flu-like symptoms.

Your breast becomes:

- Painful with pink/red areas
- Hot
- Swollen.

Possible causes

- Incorrect positioning and attachment to the breast.
- Nipple damage (grazes or cracks).
- An engorged or over-full breast.
- Infrequent feeding or a change in the pattern of feeds, including when weaning.
- Pressure on the breast. This could be from a tight bra or finger pressing into the breast during a feed.
- Favouring one breast.
- Scheduling of breastfeeds, limiting sucking time.

When treated early, more serious infections can be prevented.

AVOIDING MASTITIS

- Wash your hands before handling your breasts or nipples.
- Position and attach your baby to the breast correctly. The nipple may look slightly stretched after the feed but should not be squashed or flattened.
- Make sure the breast you feed from first is soft and comfortable before feeding from the other side.
- If your baby feeds on one side only, you may need to express some milk from the other side for comfort only.
- Gently feel your breasts for lumps or tender areas before and after a feed.
- If you find a lump or tender area, gently massage towards the nipple before and during feeds.
- Use different feeding positions such as underarm or cradle hold. Place your baby's chin towards the fullest area of the breast during feeds.
- If you become unwell, feel your breasts for lumps and look for redness (using a mirror can be helpful) – refer to the Signs and Symptoms section.

- If you feel pain when breastfeeding or think you may have mastitis, seek help from your Midwife, Child and Family Health Nurse, Lactation Consultant (IBCLC) or Australian Breastfeeding Association Counsellor.

MANAGEMENT OF MASTITIS

The most important step in treating mastitis is frequent and effective milk removal.

- To help empty your breasts, offer the affected side first. Express the other breast for comfort if your baby does not feed from it.
- Your baby may need to be woken to feed.
- If unable to feed, hand express or use a pump to soften the breast.
- Make sure your baby is positioned and attached correctly and do not limit sucking time.
- Gently massage the affected area toward the nipple before and during feeds. A drop of olive oil on the breast may help prevent skin friction.
- Point your baby's chin to the affected area during feeds.

- A warm pack can be used just before feeds to encourage milk flow.
- Cold packs after and between feeds may help with pain relief and swelling reduction.
- It is important to rest and ask for help at home.
- Consider short term use of pain relief such as paracetamol or ibuprofen, as directed.

If the problem does not get better within 12-24 hours or you suddenly feel very ill, contact your doctor. Antibiotics may be needed.

USE OF ANTIBIOTICS

- The current recommendations are Flucloxacillin (preferred) or Cephalexin (if allergic to penicillin).
- These antibiotics can be used safely when breastfeeding.
- Two full courses of antibiotics (10-14 days) MUST be completed to minimise re-occurrence.
- Antibiotic treatment can sometimes cause vaginal thrush. If symptoms develop, treatment will be needed.
- Take extra care with hand washing.

Breastfeeding is generally very safe for babies during mastitis if you receive and complete the recommended antibiotic treatment.

In the rare instance that your baby seems unwell or has a fever, you should seek prompt medical attention.

Contacts

- Your local Maternity Unit.
- Your Child and Family Health Centre.
- Australian Breastfeeding Association Helpline
Ph: **1800 686 268**, 7 days a week, or visit www.breastfeeding.asn.au
- MotherSafe (Medications in Pregnancy & Lactation Service)
Ph: **(02) 9382 6539** or **1800 647 848** if outside the Sydney Metropolitan area.
- For a Lactation Consultant (IBCLC)
www.lcanz.org/find-a-consultant.htm
- After-hours telephone advice lines are listed in your baby's *Personal Health Record* (Blue Book).

References

Australian Breastfeeding Association <https://www.breastfeeding.asn.au/bf-info/common-concerns-mum/mastitis>
Eat for Health, NHMRC Infant Feeding Guidelines for Health Workers 2012.