

# Weaning or suppressing lactation

**There are many reasons why women decide not to breastfeed or to wean after a period of breastfeeding. The timing will be different for each mother and baby.**

## STOPPING YOUR MILK SUPPLY

Colostrum (first milk) can be produced as early as 16 weeks into a pregnancy. Your body will produce milk even if you decide not to breastfeed.

Suppression (stopping breastfeeding) and/or weaning can cause different feelings and emotions. These can be discussed with your Child and Family Health Nurse, your GP or Australian Breastfeeding Association Counsellor.

**Babies who are younger than 12 months and are not breastfeeding need a suitable infant formula. After 12 months, full-fat cow's milk can be given. 'Follow on' or toddler formulas are unnecessary.**

## WHEN TO WEAN?

The World Health Organization recommends babies be given only breastmilk during their first six months, then introduce solid foods while still breastfeeding. They also recommend that breastfeeding continue for up to the age of two and beyond.

### WHAT IS WEANING?

Weaning is the term often given to stopping or reducing breastfeeding and the introduction of formula or cow's milk to babies/children.

It is also a process where mothers gradually introduce their babies to foods while continuing to breastfeed.

## After birth - ways to stop your milk or reduce breast discomfort

- A comfortable, supportive bra and breast pads may be useful.
- Apply cold packs or chilled wash cloths on your breasts. Use for about 20 minutes before removing. Reapply as required.
- Limit handling of your breasts.
- Avoid heat by aiming the shower away from your breasts.
- Take paracetamol or ibuprofen as directed to relieve pain and discomfort.
- If needed, express enough milk to keep breasts comfortable and avoid mastitis. This will not increase your supply because you are not emptying your breasts.

## Reducing or stopping your milk

If you have been breastfeeding and decide to wean, it is better to do it over several days or weeks rather than suddenly. It is the safest method as it allows your baby and

your breasts to adjust. It reduces the risk of engorgement, blocked ducts and mastitis.

- Drop one feed every few days. Replace this with milk from a bottle or a cup.
- Express for comfort as necessary at this time, reducing this slowly. Watch for any signs of mastitis, such as redness, pain or flu-like symptoms. If these occur, continue to express until resolved and contact a healthcare professional.
- When breasts feel comfortable, drop another feed.
- Continue to drop feeds in this way, usually about one feed a week.
- Use ideas from the After Birth section of this leaflet for comfort.

## Partial weaning

This means that some breastfeeds are substituted with formula or cow's milk or solids (depending on the baby's age) and some continue. This may be useful if you return to work as it allows your baby to continue receiving breastmilk and gives you and your baby some one-on-one time after being apart.

## Abrupt weaning

This is the sudden ending of all breastfeeds and is not recommended. You should seek the advice of your Child and Family Health Nurse, GP or Australian Breastfeeding Association Counsellor if you find it is necessary.

## How to suppress if you have been fully pumping instead of breastfeeding

This is particularly important for any mother who has been expressing by pump for more than two weeks. Express just enough to keep your breasts comfortable. Slowly reduce the time expressing.

Medication is rarely used, and is only prescribed by a doctor in exceptional circumstances.

**If you are unsure about your particular situation, seek the guidance of a healthcare professional or an Australian Breastfeeding Association Counsellor.**

Leakage may occur for some time after the discomfort has settled.

## Weaning a reluctant toddler

- When you decide to wean, try to stick to your decision.
- Offer plenty of alternative drinks.
- Give drinks in a cup.
- Wear non-breastfeeding clothes.
- Avoid sitting in usual breastfeeding positions.
- Plan outings or activities to distract your toddler.
- Give extra cuddles and smiles.

## THINGS TO WATCH FOR

### Engorgement

This is when breasts become hard, red, shiny and painful. Should this happen, expressing and emptying breasts once can relieve the pain. Continue to express just enough milk for comfort over several days.

## Mastitis

This is a tender, inflamed area on the breast often accompanied by fever and joint aches and pains. Refer to the Mastitis leaflet and contact your midwife, Child and Family Health Nurse, Lactation Consultant, Australian Breastfeeding Association Counsellor or GP.

## 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](http://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](http://www.lcanz.org/find-a-consultant.htm)
- After-hours telephone advice lines are listed in your baby's *Personal Health Record* (Blue Book).

## References

Eat for Health, NHMRC Infant Feeding Guidelines for Health Workers 2012.  
Australian Breastfeeding Association, Lactation Suppression 2010.