

# Breastfeeding after breast surgery

**Many mums find they can successfully breastfeed after breast surgery, however some mums may find they need to supplement their baby.**

Breastfeeding and supplementing with infant formula is not uncommon as your baby grows. Even partial breastfeeding has great benefits for your baby because of the immunological and anti-infective properties of breastmilk, as well as its perfectly balanced nutrients.

How much milk you have will depend on the type of surgery performed. It will also depend on what your breasts were like before surgery and what damage (if any) has occurred. It is important to get support when you start breastfeeding to give your breasts the best chance to show what they can do. Speak with your Midwife or Lactation Consultant before your baby is born for advice and support.

## The first breastfeed

Babies are usually very alert in the first hour or so after birth, so this is the best time to start breastfeeding. Your midwife will help you get your baby in the best position to attach correctly to the breast. The first breastfeed will help make sure that your baby gets the idea of suckling. It is also helpful for milk production.

## Correct positioning and attachment

Support your baby skin-to-skin against your chest so they do not need to turn their head to reach your nipple. Wait for a wide open

## SIGNS OF PROGRESS

### Can colostrum / breastmilk be expressed or seen as the baby feeds?

If your baby is sucking and you can see some swallowing and short pauses, then your baby is getting milk.

### Is the 'let-down' reflex working?

In the first days after birth, period-like pelvic discomfort while breastfeeding can indicate your breasts are working well. Other signs can be:

- Being thirsty or having a dry mouth when feeding
- Tingling feeling in breasts at the start of a feed
- A change in the way your baby sucks from short, quick suckling to a slower suck, swallow pattern.

### Is your baby getting enough?

New babies have small stomachs that fill quickly and empty quickly. They need at least six (but often up to 10 or 12 feeds) in 24 hours in the early weeks.

Once your milk volume increases (around third to fifth day after birth), you will notice your baby will pass more urine. They should have six to eight pale coloured, wet cloth nappies or five to six pale, heavily wet, disposable nappies over 24 hours. Your baby's bowel movements will change from the initial blackish meconium to more frequent runny yellow movements. At least one bowel movement every day in the first two weeks is a good sign your baby is getting enough milk.

Babies can lose up to 10% of their birth weight in the first two to four days as they adjust to life outside the womb. As your milk 'comes in' they will start gaining weight and are usually back to birth weight before they are two weeks old.

mouth before bringing baby to the breast, directing your nipple to the roof of their mouth. If your baby is on the breast properly they

will be able to suckle and obtain the colostrum (early milk) easily without causing discomfort or nipple compression.

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Look for early signs that your baby is hungry (mouthing or sucking at fingers) then offer the breast.

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### Unrestricted feeding

Feeding helps your breasts make milk. Look for signs that your baby is hungry (mouthing or sucking at fingers) then offer the breast.

Offer both breasts at each feed at least once and allow your baby to stop feeding when they are ready. Offer the breast rather than a dummy and encourage lots of skin-to-skin contact. Give your baby a breastfeed before offering any formula as a top up (if needed).

### LONG TERM

Many women who have had breast surgery successfully combine breastfeeding with supplementary (top up) formula feeding for many months. If top ups are needed they can be given by cup, supply line or bottle. Lots of information and support will help. Some suggested reading includes:

*Defining Your Own Success: Breastfeeding after Breast Reduction Surgery* by Diana West

*Breastfeeding with Confidence* by Sue Cox

*Breastfeeding... naturally.* Australian Breastfeeding Association.

## 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)
- Breastfeeding After Reduction [www.bfar.org](http://www.bfar.org)
- 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 Feeding Guidelines Information for Health Workers 2012.  
Australian Breastfeeding Association 2006. *Breastfeeding... naturally.*  
Riordan J and Auerback K. 1998 *Breastfeeding and Human Lactation*, 2nd ed, USA. Jones and Bartlett.