What is Engorgement?
Engorgement is a filling of the breasts with increased amounts of milk, blood, and lymph fluid. Normal engorgement typically begins 3 to 5 days after delivery and is relieved within 24 to 48 hours.

How will my breasts feel?
Some mothers will have only slight fullness, while others may find their breasts become larger and heavier with increased tenderness or throbbing. The breasts can become hard with tightly stretched skin that may appear shiny or feel warm. Engorgement can also extend up into the armpit and out to the end of the nipple. Some mothers develop a low grade fever.

What are some things I can do to help relieve engorgement?
Before feedings:

- Gently massage the breast from the chest toward the nipple.
- Try to express a small amount of milk to soften the areola, (either with hand expression or with a breast pump on a low setting).
- Apply a warm, moist compress for no more than 3 to 5 minutes to help your milk to “let-down” just before a feeding.
- Stand in a warm shower with the spray directed at your back to help relieve tension and improve milk flow.
**During feedings:**
- Ask your nurse or lactation consultant to verify that your baby has an effective latch before you are discharged from the hospital.
- Gently compress or massage the breast during feedings.
- Breastfeed your baby for as long as possible after “let down” has occurred to make sure they remove as much milk as they can.
- Let your baby breastfeed for as long as possible on the first breast before offering the second breast. The first breast should be noticeably softer after a feeding.

**In between feedings:**
- Breastfeed your baby frequently. It is normal for a newborn baby to breastfeed as often as every hour, but don’t go longer than 3 hours between feedings.
- Use cold packs on the breasts for 20 minutes after feedings with a layer of fabric between the skin and the cold pack.
  - You can use green cabbage leaves instead of cold packs. Wash the leaves of cabbage and apply to the breast for 20 minutes, no more than 3 times per day.
- Try wearing a well-fitting, supportive bra. Avoid tight fitting bras which can lead to plugged ducts and mastitis (breast infection).
- Avoid using heat for comfort as heat can increase swelling and inflammation which can make it more difficult for milk to flow.

**Can I take any medication for the engorgement pain?**
You can take acetaminophen or ibuprofen as directed for discomfort. These medications are safe to take for breastfeeding moms.
Should I use a breast pump to relieve engorgement?

During the normal period of engorgement that occurs 3-5 days after delivery, your body will determine how much milk is necessary to feed your baby. As milk is removed, your body will respond by producing more milk. Likewise, unused milk that accumulates in the breast will cause the body to slow milk production. This is described as “supply and demand.”

If your baby has demonstrated an effective latch and is feeding frequently at the breast, additional pumping should not be necessary. You may be tempted to use your breast pump between feedings to relieve some of the pressure of engorgement. In this case, you should limit pumping to only a couple minutes. Your goal should be to pump to comfort, but not to completely drain the breasts. This allows your body to respond to the needs of your baby without making more milk than is necessary.

If your baby is unable to latch to the breast, or having a difficult time staying latched, you will need to use a breast pump or hand expression to remove milk and prevent infection. In this case, you should use a double electric breast pump and pump both breasts together for 15-20 minutes at least every 3 hours. Your goal should be to pump until you no longer see milk dripping and your breasts feel softer. This allows your body to respond to the anticipated needs of your baby until they are ready to breastfeed consistently.

Will my breasts get engorged again?

Engorgement can occur at any time during the breastfeeding relationship if the breasts are not emptied fully and frequently. Some of the risk factors for engorgement include:

- Baby sleeping longer than usual and missing a feeding.
- Short or restricted feedings.
• Baby taking more feedings away from the breast, with supplements or when starting solids.

**When should I call my health care provider?**

• Most cases of engorgement resolve within a day or two. If your engorgement is not relieved by the steps listed above, contact a lactation consultant for help.
  o For general breastfeeding questions, please call the Lactation Help Line at (844) 200-8894. You will be asked to leave a message and a lactation consultant will return your call within 24 hours.

• If you notice signs of infection, including fever, redness or swelling, contact your health care provider.
  o If you delivered your baby within the past 6 weeks, you can call Triage at (734) 764-8134.

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