



# Engorgement, Plugged Ducts and Mastitis

lincolnpedsgroup.com 402-489-3834

This chart describes how breast tissue can sometimes evolve from normal swelling to abnormal infection, and what to do about it.

Condition	Signs and Symptoms	Management
Breast swelling	Normal and common when milk first comes in.	<ul style="list-style-type: none"> <li>• Massage breasts between feedings.</li> <li>• Pain can affect the let-down, so take pain medication if needed.</li> </ul>
↓ Engorgement	<ul style="list-style-type: none"> <li>• Breasts are painful, red and shiny.</li> <li>• Swelling in the breast tissue compresses milk ducts so milk can't flow out freely.</li> </ul>	<ul style="list-style-type: none"> <li>• Apply cold packs between feedings to help reduce swelling.</li> <li>• Soften breast before latching by hand expressing.</li> <li>• <b>Reverse pressure softening:</b> Apply gentle pressure 1-2 inches around the base of the nipple. This moves swelling backward and upward into the breast so the area around the nipple is softer for baby to latch on to.</li> </ul>
↓ Milk pooling	<ul style="list-style-type: none"> <li>• "Stuck" milk backs up into the breast tissue.</li> <li>• Pools of milk can develop dry clumps of milk, which can then plug the milk ducts.</li> </ul>	<ul style="list-style-type: none"> <li>• Apply warm moist heat before milk removal.</li> <li>• Massage lumps towards nipples during frequent milk removal to dislodge them.</li> <li>• Nurse, pump or hand express.</li> <li>• Avoid constricting straps which can obstruct milk ducts.</li> </ul>
↓ Plugged ducts	<ul style="list-style-type: none"> <li>• The milk plugs feel like rope-like lumps in the breast tissue.</li> </ul>	<ul style="list-style-type: none"> <li>• An over-abundant milk supply predisposes to mastitis. Seek help if this is an issue.</li> <li>• A white spot (bleb) on the nipple may be a blocked pore / duct opening which blocks milk removal. Open the bleb with a sterile needle.</li> </ul>
↓ Mastitis	<ul style="list-style-type: none"> <li>• The pooled milk behind the plugged area can develop infection.</li> <li>• It usually affects just 1 breast.</li> <li>• The breast is red, hot, swollen, firm and painful.</li> <li>• Mom usually has fever, chills, aches and fatigue.</li> </ul>	<ul style="list-style-type: none"> <li>• Rest, drink more fluids, apply heat to the breast and remove milk frequently.</li> <li>• Call the obstetrician for antibiotics if symptoms don't improve within a few hours.</li> <li>• Open sores and blisters on the nipple can be an entry point for infection, so get help with a poor latch.</li> <li>• The breastmilk is safe for the baby to drink if Mom is HIV negative.</li> </ul>
↓ Abscess	<ul style="list-style-type: none"> <li>• An abscess ("pus-pocket") could form if management is delayed or milk does not get removed regularly.</li> </ul>	<ul style="list-style-type: none"> <li>• If symptoms of mastitis do not improve within a few hours of starting an antibiotic, contact your obstetrician again.</li> <li>• If an abscess fails to improve with the treatment prescribed by your doctor, ask them to consider resistant bacteria or an underlying mass.</li> <li>• Continue removing milk regularly!</li> </ul>
↓ Decreased milk supply	If milk isn't removed regularly, supply will go down.	