



# MASTITIS & BLOCKED DUCTS

This is an inflammation of the breast and although the size of the affected area can vary, it is usually confined to one breast.

It can suddenly emerge and within a very short time you can be experiencing quite severe flu like symptoms, with or without infection.

Symptoms can include reddening of the skin, hard swelling, throbbing heat, severe pain, high temperatures and shivering.

All these symptoms would suggest an infection, and certainly in some breasts this can be the case, especially if you already have an entry point for bacteria eg. a cracked nipple.

However in most women with mastitis these painful symptoms are simply due to a blocked duct which causes the milk to backlog. This build up forces the milk back up the ducts, within the breast, to the alveoli where it leaks into the surrounding tissue and eventually enters the blood stream. The blood doesn't recognise this substance and assumes it to be a danger eg. a bacteria or virus and sets up the whole natural defence mechanism.

The simple answer is to release the blockage and get the milk flowing again.

Easier said than done, when the breast is too painful to handle.



Be astute for very early signs, such as not feeling the fabulous relief you get when a baby drains a full breast. For those of you who have never breastfed it's a bit like when you are desperate for the loo but there's no toilet to be found. After diddling for ages with an increasingly full bladder you finally find one.. Ah ! relief ! Get the picture?

Use a mirror to examine all parts of your breast, you may find a very small pink, slightly hardened area. A bit of work at this stage can often prevent the more severe symptoms from developing.

## SO WHAT CAUSES MASTITIS ?

Mastitis can develop for a variety of reasons and in some cases it's hard to understand quite why it has happened.

However here are some of the more common ones:

- Baby not being correctly attached at the breast.
- Premature attempts to set routines by leaving breasts too long between feeds.
- Insufficient emptying at each feed; leading initially to a backlog and eventually mastitis.
- Restrictive bras or tight lycra tops pressing on the breast during feeds.
- A knock or trauma to the breast.
- Squeezing the breast or over handling it during feeds.
- Pump hardware being pressed in too enthusiastically during expressing.

***Infected mastitis*** can be caused by bacteria tracking up from a cracked nipple. The symptoms are almost identical in the early stages but most importantly they don't clear or improve with simple remedies ( see below ) and are still present or worse in 24 hrs.

Antibiotics are needed here so visit your GP or a Walk in Centre if out of hours.

## AND WHAT CAN YOU DO TO TREAT IT ?

- Always check attachment. If you are not sure, ask for help. Attend a local breastfeeding café.
- Ensure that your breasts are emptied sufficiently at each feed.
- Warm the affected breast with flannels, or better still, shower with warm water for 5 minutes, directing the flow close to the reddened area. **Avoid power showers.**
- Using a lubricant and the flats of your fingers, not the tips, massage the affected area downwards towards the nipple.
- **Get your baby feeding** to drain the milk. If possible, have your breast hanging free whilst feeding and attempt to continue massaging during the feed. If this all sounds too contorted, just feed in your preferred position. If feeding is simply too painful you must get the milk out somehow. Pumps at this stage can be too harsh, hand expression is gentler and more localised. If you are unsure how to do this, ask for help.
- Take painkillers such as Paracetamol or preferably anti inflammatory therapy such as Ibuprofen (some pre existing conditions mean these can't be taken, if in doubt, check with a doctor)
- Drink plenty fluids
- Rest
- Take Antibiotics **only if indicated.**