

A photograph of a woman in a light blue shirt breastfeeding her baby. The baby is wearing a light blue hat and is latched to the breast. The woman's hands are gently supporting the baby's head.

Mastitis

What is mastitis?

Mastitis is an inflamed or swollen area of the breast. The area may be infected with bacteria. Your breast may be red, hot and hard. The area may be tender or painful. It usually happens to one breast but can happen to both breasts. You may feel tired or nauseous or have chills or a fever.

What causes mastitis?

Mastitis can happen a few ways. Bacteria can enter the breast tissue through an open, cracked area on your nipple. Pressure from a plugged duct or tight bra can damage the inside breast tissue and bacteria can grow.

How is mastitis treated?

If you think you have mastitis, contact your health care provider. They may recommend taking ibuprofen to help with the pain and swelling. If you have red streaks on your breast or a fever, they may prescribe an antibiotic. You can continue to breastfeed your baby or pump. The infection is not in your milk.

- Wash your hands before breastfeeding or pumping.
- Heat, gentle massage or hand expression before breastfeeding or pumping can help the milk start to flow.
- Breastfeed or breast pump regularly, at least 8x/24 hours, to relieve fullness.
- Apply cold after breastfeeding to reduce swelling.
- Drink plenty of fluids and get plenty of rest.

Can I prevent mastitis?

Yes. Here are some tips:

- Help your baby to breastfeed with a good latch to avoid sore and cracked nipples.
- If you develop cracked nipples, wash the area with soap and water a few times a day. Use a nipple ointment or hydrogel pad between feedings.
- Do not always breastfeed your baby in the same position. Use at least 2 different positions throughout the day.
- Breastfeed or pump regularly to drain your breasts of milk. Your goal should be about 8x a day in the first few weeks. Skipping breastfeeding or pumping sessions can lead to plugged ducts which can turn into mastitis if left untreated.
- If you feel a PLUGGED DUCT, a small, hard lump in the breast, it is best to treat it early on. Apply heat to the area before breastfeeding and gently massage the area while breastfeeding. If it isn't gone in 2 days or you don't feel good, call your health care provider.
- Avoid tight bras that place pressure on parts of your breast. This makes it difficult for the milk to drain well.
- If you are weaning, wean gradually. Increase the time between feedings over a few days to a few weeks. Hand express or pump to relieve fullness between feedings.

What is thrush or nipple candida?

These are fungal infections caused by an overgrowth of yeast. It is not serious, but it can cause pain and discomfort for both you and your baby. You can still breastfeed but breastfeeding may become difficult for both of you. Your baby's mouth and your nipples may be sore.

How do I know if I have thrush or nipple candida?

Only your healthcare provider can diagnose thrush or nipple candida.

You may have:

- Red or purple nipples
- Shiny areolas
- Itchy or burning pain in the nipples or breasts
- Flaky appearing nipple

Your baby may have:

- White patches in her mouth
- Bright, red diaper rash

How is thrush and nipple candida treated?

Both you and your baby will need to be treated even if only one of you has symptoms. Yeast can be passed back and forth to each other. Your health care provider will give you an antifungal medication, such as:

- A prescribed or over-the-counter product to apply to your nipples.
- A solution to swab inside your baby's mouth after every feeding.
- An ointment for your baby's diaper area.
- A prescription drug you swallow.



To reduce pain, start on the least sore breast and switch breasts after your milk begins flowing.

If breastfeeding suddenly becomes painful, you could have a nipple or breast infection.



How can I prevent thrush or nipple candida from returning?

- Make sure to follow the treatment for the recommended time even if you start feeling better before or the yeast can grow back.
- Wash your hands before each breastfeeding and after each diaper change. Wash your baby's hands too. Clean your nails well and remove artificial nails where fungus can grow.
- Yeast grows well in moist, dark places. Change wet breast pads and diapers frequently. Avoid breast pads with plastic liners—they keep moisture in.
- Expose your nipples to air after breastfeeding. If this causes a throbbing pain, cover up with a cotton shirt or some other breathable material instead to keep your nipples warm.
- Wash all bras, shirts and towels that touch your breasts in hot, soapy water each day.
- Any plastic part that goes in your baby's mouth or on your breasts should be boiled for 20 minutes daily (pacifiers, toys, bottle nipples, pump parts).
- Avoid foods that support the growth of yeast such as sugar, dairy products, wheat, nuts, peanut butter, dried fruit and fruit juices.

This is general information and does not replace the advice your healthcare provider. If you have a problem you cannot solve quickly, seek help right away. Every baby is different. If in doubt, contact your physician or other healthcare provider.