8. NEWBORN FEEDING

8.2 BREASTFEEDING CHALLENGES

8.2.6 MANAGEMENT OF MASTITIS

8.2.6.1 MASTITIS MANAGEMENT IN THE HOME

The majority of women with mastitis can be managed in the home. Referrals to Hospital@Home are accepted 24 hours a day. For further information on referral to Hospital@Home go to the attached link: http://www.silverchain.org.au/

The decision to refer care to Hospital@Home is based on the following:

INCLUSION CRITERIA

- Women with clinical signs of mastitis:
  - temperature >38°C
  - flu-like aching symptoms
  - red, tender hot area on the breast
- Requirement for intravenous antibiotic therapy (failure of oral antibiotic therapy or severe infection).

EXCLUSION CRITERIA

Co-existing medical conditions requiring hospital admission

EMERGENCY CENTRE CARE

Prior to transferring the woman’s care to Hospital@Home it is essential to:

Complete referral form which is found at the silver chain web site (http://www.silverchain.org.au/)

- Obtain a pathology work up:
  - Sample of expressed breast milk is sent for microscopy, culture and sensitivity
  - If the temperature >38°C or rigors are present do a full blood picture and blood cultures
- Commence intravenous antibiotics. Ensure the woman also has a script for oral flucloxacillin.
- Notify the Breastfeeding Centre (a message may be left on the answering machine)
- Commence mastitis variance ‘MR261.16 Management of Mastitis’ and document appropriate management plan. Give this to the woman.
GENERAL MEASURES

- **Antibiotics:**
  - Cephazolin 2g Intravenously twice daily for 48 hours. See Section P 4.8 Antibiotic treatment for breast infections.
  - If afebrile and there is a decrease of erythema and pain in the breast change to flucloxacillin 500mg orally four times a day for at least 10 days.
- Rest and continue to breastfeed or express.
- For further information see Clinical Guidelines, Section B. 8.2.6 Causes and Management of Mastitis

GP / EMERGENCY CENTRE REVIEW

- Review the patient after 48 hours of intravenous antibiotics if the woman is still febrile and the breast is very painful.
- Admit to hospital for further treatment if:
  - extension of erythema and increasing pain in the breast despite adequate drainage and following the mastitis variance plan.
  - Social isolation – no other adult available at home for support.

DAY THREE

Emergency Centre to review expressed breast milk and blood cultures results to ensure correct antibiotic has been prescribed. If a change of antibiotic is required, Emergency Centre (EC) will inform the woman to come and collect the new script from EC.

Refer to the Breastfeeding Centre for follow up appointment.