

Lactation suppression

There are a number of reasons a woman may decide to stop her milk supply; this process is known as lactation suppression.

These reasons can include:

- · the mother has chosen to formula feed,
- · the mother has a medical condition than prevents her from breastfeeding,
- · the mother requires medication that prevents her from breastfeeding,
- · the infant has a medical condition that prevents them from feeding, or
- the mother has experienced a stillborn or neonatal death.

Reducing or stopping your milk supply following birth

- Prescribed drugs can be used to stop your milk supply by reducing the hormone involved in making milk, known as prolactin.
- These medications work best in the earliest stages following birth when prolactin levels are very high. They are less effective if you have been breastfeeding for some time.

It is also possible to stop your milk supply without medication, by following some of these measures:

- If your breasts are firmly supported and you don't express more milk than necessary to feel comfortable, your milk supply will gradually decrease.
- Wearing a firm bra during the day and at night will keep your breasts more comfortable. You might need to wear a larger size for a while.
- Use breast pads to soak up leaking milk and change them when they get wet. Disposable and reusable pads are both useful.
- Swelling and discomfort can be relieved by putting cold packs from the fridge (but not the freezer) directly onto the breasts.

- Handle your breasts very gently as they can bruise very easily while full.
- If you feel too full and sore, you can gently express a little milk to relieve the pressure.
 But remember that the more you express, the more milk your breasts will make.
- Express only enough milk to make you comfortable.
- Drinking less fluids will not reduce your milk supply so continue to drink when you are thirsty.
- Having full breasts may make laying in bed for the first few days uncomfortable, so try lying on your back or side with an extra pillow to support your breasts. If you prefer laying on your stomach, put a pillow under your hips and stomach to ease the pressure on your breasts. A good idea is to lay on a towel to soak up any leaking milk.
- You can take simple pain relief such as paracetamol or ibuprofen if you are uncomfortable. Discuss this with your doctor if you're worried about these medications.

Things to watch out for:

Engorgement (painful, overfull breasts)

- Engorgement often happens in the first few days after delivery because additional blood and fluids, as well as milk, can build up in the breasts.
- Engorged breasts become very swollen, painful and hard.
- If you've tried all of our suggestions (a firm bra, cold packs, expressing for comfort and pain relief) it may help to express all the milk in your breasts, just once, with an electric pump. This will relieve the pressure and hopefully you will be able to prevent that level of build up again.
- Continue to wear a firm bra.
- Remember to only express enough for comfort from this point.

Blocked ducts and mastitis

- When breasts are very full there is a risk that one or more of the milk ducts can become blocked.
- A lump can form, and the breast can feel very sore.
- Sometimes you can see a red area on the skin and / or the breast may feel hot to the touch.
- If the blockage isn't cleared, milk can be forced into the breast tissue which becomes inflamed.
- You may also have shivers and aches and feel like you are getting the 'flu'.
- This is known as mastitis and can come on very quickly.

- See your doctor if you have these flu-like symptoms or if you cannot clear the blockage.
- If you develop mastitis, you will need to express your milk as part of the treatment.
- If mastitis isn't treated properly an abscess may develop.

Treat blocked ducts and mastitis quickly to avoid further problems

- Apply a cool pack or a cool, wet cloth to the affected area (again, from the fridge and not the freezer).
- Express all of your milk.
- Express every few hours to keep the breast as empty as possible. While expressing, gently stroke your breast towards the nipple to encourage good drainage.
- Visit your GP if you have a fever, feel unwell or if you can't clear a blocked duct. Sometimes antibiotic treatment is necessary, and you can continue with analgesic pain relief as well.
- Express until the mastitis is gone and gradually reduce the number of expressions per day over several days. You can stop all expressing once your breasts fill only after 24

 48 hours.
- Avoid reducing your milk supply when mastitis is present. When the mastitis has passed you can go back to reducing your milk supply.

For further information and advice, please contact the Breastfeeding Centre of WA on (08) 6458 1844 or call (08) 6458 2222 and ask for pager 3310. Monday to Friday, excluding public holidays.





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Women and Newborn Health Service

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