

Breastfeeding: Easing sore nipples

Breastfeeding shouldn't be painful. Yet, sore nipples are a problem for many women, especially in the first few weeks of breastfeeding. Caring for your skin before and after breastfeeding is a great way to help prevent and treat soreness. There are also things that you can do while you are feeding your baby to prevent soreness.

Care before and after feedings

Care for your nipples before and after feeding by:

- Keeping them clean. Wash with warm water only. Don't use soap. Let your nipples dry completely before covering them.
- Rubbing a small amount of nipple cream or ointment on them as directed by a lactation specialist or your provider. Make sure that the cream you use is approved for breastfeeding.
- Using prescription ointment cream. If you
 have ongoing pain and damaged nipple skin
 after trying other treatments without relief, your
 doctor may prescribe an ointment. Be sure to:
 - Apply athin layer to your nipples after each feeding (don't wash or wipe it off).
 - Continue to use it for 7 to 10 days. Note that longer use can damage the nipple tissue.
 - Call your lactation consultant or doctor if your pain continues.
- Using gel pads. Gel pads are products used to heal a wound. You may find them at your pharmacy or grocery store. Common brand names include under brand names, such as ComfortGel, HydroGel, MediHoney, and Soothies. Here's how to use them:
 - Wear the pad under your bra directly against the nipple and areola. Remove them before breastfeeding.
 - Clean the gel pad with cool tap water between feedings. Follow the package directions for duration of use.

Where can I learn more?

For help with breastfeeding, call:

 Lactation consultants.
 Check online or call your birthing hospital and ask for an outpatient lactation clinic in your area. (There might be one at the hospital itself.)
 Arrange to meet with a lactation

consultant for expert help.



Phone number: _

 La Leche League. This organization provides support, encouragement, and information to breastfeeding moms.



Your baby's medical provider.

Phone number:	

- Put the gel pads in the refrigerator before use for even more cooling relief. However, don't use lanolin or other ointments on your breasts while using them.
- Store them in the provided packaging or in a ziplock bag when not in use to keep them from drying out.
- Pumping or manually expressing a few drops of your milk and gently massaging it onto your nipples. Breast milk can soothe your delicate skin. Be sure to let the nipples air dry before covering them.

Care during feedings

Care for your nipples during feedings by:

- Being aware of your baby's latch (how your baby grasps your nipple in their mouth). You should feel a strong tug when your baby latches on. If you feel pinching or pain, it's possible that your baby isn't latching on correctly. Try this method: As you put your baby to your breast, your baby's head should be tipped back slightly and their chin should come in contact with the breast first. You want your baby to grasp onto your areola, not just your nipple, with a wide open mouth. If you don't see this, remove your baby from your breast and try again. (See pictures at right.)
- Breaking the suction before you take your baby from your breast. You can do this by gently pulling at the corner of their mouth until the suctions breaks. If this does not work, you can insert your finger.
- Trying different nursing positions.

 A different position may improve your baby's latch and move pressure off the more sore areas of your nipples. For positioning options, see pages 9 to 13 of A Guide to Breastfeeding booklet.
- Breastfeeding about every 2 to
 3 hours to keep your breasts from becoming too full. Overly full breasts can make it difficult for your baby to latch on correctly. If your breasts do become too full, express (pump or squeeze out) some milk before breastfeeding.
- Not letting your baby chew on them or go to sleep holding your nipple in their mouth.
- Using the right size of flange (if you're using a breast pump). The flange is the funnel-like part that fits over your breast. Make sure your nipples are comforbably moving inside of the flange. If they aren't comfortable, you may need a different size, or consult with a lactation consultant. These are available at lactation supply stores, online, and from lactation consultants.



Position your baby so that their nose is in line with your nipple. Tickle their upper lip with your nipple to encourage them to open wide.



When your baby's mouth is open wide, bring them to your breast with their upper lip aiming for the nipple and their bottom lip aimed as far away from the base of the nipple as possible. With this latch, your areola will show above your baby's top lip.