

# Breastfeeding FAQs: Pain and Discomfort

Breastfeeding is natural, but it takes practice to get it right. Here's how to handle pain and discomfort during nursing.

## Is It Normal to Have Cramps While Breastfeeding?

Yes. During the first few days to weeks after delivery, you may feel strong, menstrual-like cramps in your uterus when your milk “lets down” (starts to flow). This is your uterus shrinking back to a smaller size.

## Is It Normal for My Breasts to Get Engorged?

During the first 2–5 days after birth, it's normal to have engorged (very full) breasts as your milk supply increases. But if your baby nurses (or you pump) every 2–3 hours, your breasts should not feel engorged.

Engorgement can lead to sore, painful breasts or a breast infection. So it's best to try to avoid it. The longer you wait to breastfeed or pump, the more uncomfortable and engorged your breasts may get.

If you can't feed your baby right away, use warm compresses and try to pump or manually express your milk. One way to express milk is to put your thumb on top of your areola and a finger below it. Gently but firmly press your thumb and fingers back against your chest wall. Then compress your fingers together to express (push out) your milk.

## Is It Normal to Feel Pain During or After Breastfeeding?

When babies latch on properly, some moms feel a few moments of discomfort at the very beginning of a nursing session. After that, discomfort should ease. You may feel a gentle tug on your breasts while your baby feeds, but it shouldn't hurt.

If you feel discomfort during nursing, stop nursing and reposition your baby to get a better latch. Your nipple areola (the ring around the nipple) should be mostly in your baby's mouth. When babies are latched on wrong, it can hurt or feel like a pinch each time your baby sucks. Over time, this can lead to painful, sore, cracked nipples.

If you have pain during breastfeeding, talk to your doctor or lactation consultant to make sure your baby is properly latched or that something else isn't going on.

## What Else Can Cause Breast Pain?

The most common causes of breast pain include:

**A plugged milk duct.** Sometimes milk ducts get plugged. You may feel pain in an area of your breast or a lump may form under the skin where the duct is plugged. To help unclog the duct and ease pain:

- Take warm showers or use warm compresses on the area. Massage the area several times a day. Then, breastfeed your baby right away.

- Position your baby's chin so that it points toward the clogged area during feeding. This will help that area of the breast empty sooner.
- Gently massage the lump while your baby feeds. It may take 2 to 3 feedings for the lump to go away. You also can use a manual (hand) or electric pump for a few minutes to help draw out the clogged milk while gently massaging the area.
- Apply cold compresses (ice wrapped in a thin towel) between feedings.
- If the lump doesn't go away within a couple of days, or if you have a fever, chills, aches, or red streaking, call your doctor.

**Mastitis.** This is an inflammation of the breast. If your breasts are sore; have red streaks; or have a hard, red area, you may have mastitis. Some women also get a fever and chills. If you think you have mastitis, call your doctor. In the meantime, continue to breastfeed or pump to drain the milk from your breasts. Switch between warm compresses and gentle massage right before breastfeeding and then apply cold compresses after a session. Mastitis caused by an infection may need treatment with antibiotics.

**Oral thrush.** Sometimes babies develop a yeast infection in the mouth called oral thrush. Babies with this have cracked skin in the corners of the mouth, and whitish or yellowish patches on the lips, tongue, or inside the cheeks. The infection can spread to your breast and cause:

- shooting or burning breast pain either during or after feedings
- pain deep within your breast
- strong pain in the breasts or nipples that doesn't get better after your baby properly latches on or you reposition your baby
- nipples that are cracked, itchy, burning, or are pink, red, shiny, flaky, or have a rash with little blisters

Call your doctor if you or your baby have any of these symptoms.

**Inverted or flat nipples.** Women who have inverted nipples (nipples that turn in rather than stick out) or flat nipples (that don't become as erect as they should when a baby is nursing) may have a harder time breastfeeding or have nipple pain. If either is the case, talk to your doctor or a lactation consultant about ways to make nursing easier and reduce any pain.

## How Can I Ease Breast or Nipple Pain? During Feedings

- Nurse first on the side that's less sore and vary breastfeeding positions.
- Make sure your baby latches onto your breasts correctly. If breastfeeding is too painful, it may be more comfortable to drain your breasts by pumping the milk.
- If you have sore nipples, ask a lactation consultant or your health care provider if a nipple shield is a good idea. Nipple shields go over the areola and nipple during a feeding to protect sore or cracked nipples. They should only be used when recommended by your care team as they can sometimes affect milk supply.
- Gently break the suction when removing your baby from your breast. Slip your finger in the side of your baby's mouth, between the gums, and then turn your finger a quarter turn to do so.

- At the end of a feeding, massage some breast milk onto your nipples, and then let them air dry.

## Between Feedings

- Gently massage the sore area before nursing.
- Use wet or dry heat on your breasts (a warm shower, water bottle, heating pad, or warm washcloth) right before feeding. But if you have a yeast infection in your breast, you'll need to keep your nipples dry because yeast thrives on moisture. Get plenty of rest and fluids.
- Put ice packs or cool compresses on engorged breasts after feedings.
- Make the area where you feed your baby comfortable. Sit in a glider or a cozy chair with armrests. Footstools and pillows can give extra support. Some women like wraparound nursing pillows or "husband" back pillows with arms on each side for nursing in bed.

If breastfeeding is painful or uncomfortable for you, call your doctor or lactation consultant for help.

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Date reviewed: January 2021

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