

Managing lactation and breastfeeding

The death of a baby or child is a devastating and life-changing experience no matter how it happens. If it is unexpected, there is no time to prepare yourself for the worst and you may well be in shock.

As well as feeling a range of emotions as you grieve for your precious little one, your body will also be going through physical changes. For mothers who are lactating, there is an additional concern about how to manage your milk supply.

This information sheet is to help give you some guidance as to what other parents/carers have found helpful to manage lactation and breastfeeding in the last days of their child's life or after they have died.

Breastfeeding and lactation – how do I manage this?

There are several options for you to consider when deciding what to do regarding your breastmilk.

- Donating breastmilk
- Frozen memento
- Suppressing lactation

Donating breastmilk

- Some mothers wonder if their breastmilk can be used to help another baby. The Australian Red Cross Milk Bank accepts donations of breastmilk from mothers whose child has died. There are also other privately run milk banks that may accept milk.
- Potential milk donors need to be screened by having blood tests before they can donate milk.
- Speak to the hospital staff if you would like to know more about donating breast milk.

Frozen memento

Many parents like to keep mementos of their child. You may like to freeze a small container of breastmilk to remind you of the special bond you have with your child. You can keep it as long as you like.

Suppressing lactation

To decrease milk supply, it is important to express small amounts of milk from the breast so that you remain comfortable. It may take a few weeks, but usually discomfort passes after a few days. Other ways to suppress lactation and provide comfort are:

- Wear a firm bra day and night to support your breasts and keep you comfortable.
- Use breast pads to soak up any leaking milk, and change frequently.
- Relieve pain and swelling by putting cold packs in your bra, and use cold compresses after a shower.
- Handle your breasts gently, as they can bruise easily.
- Whenever your breasts feel too full, express a little milk, but only enough to make you comfortable.
- Mild painkillers may help with any pain.
- Drink when you are thirsty – cutting down fluids will not help reduce your supply.
- For the first few days, you may be uncomfortable lying in bed with very full breasts. Try side-lying with an extra pillow supporting your breasts.

Things to watch for

- **Engorgement** – full and painful breasts. In this instance, it may be helpful to express all the milk via a pump (just once) to relieve the pressure.
- **Blocked ducts or mastitis** – when breasts are very full, there is a risk that one or more of the ducts that carry milk to the nipple have become blocked. Lumps form and the breast will feel sore. If the blockage remains, milk is forced into the breast tissue, causing inflammation. You can feel achy, or like you are getting the 'flu'. This is called mastitis and can develop quickly. This requires review by a doctor.