

# Breast Compressions

## What is Breast Compression?

- in the first 3-6 weeks of life, many babies tend to fall asleep at the breast when the flow of milk slows down.; sometimes they have not had enough
- “Breast Compression” refers to the method of applying pressure to the breast to continue or increase the flow of milk to the baby once the baby is no longer drinking at the breast
- your baby is drinking when you hear a “cah” sound and/or you see pauses or swallows between long sucks
- you may only have to use compressions for a short period of time, until baby is able to feed well on his own

## What can breast compression improve?

- low weight gain in a baby
- colic in the breastfed baby
- frequent feedings and/or long feedings
- sore nipples in the mother
- recurrent blocked ducts and/or mastitis
- milk intake in the baby who falls asleep quickly but is not drinking enough
- milk intake in premature babies who might have weak sucking power

## Did you know?

- a baby who is well latched gets milk more easily than a baby who is poorly latched
- a baby who is poorly latched can get milk only when the flow of milk is rapid
- after a certain age babies may begin to pull away from the breast when the flow slows down

## How do I do breast compressions?

- latch baby to your breast comfortably
- Use one of your hands to hold your breast; place your hand around your breast close to the chest wall with thumb and fingers on opposite sides (see figure 1)
- when you no longer see or hear swallowing and your baby is not actively drinking, compress your breast bringing your thumb and fingers closer together; do not roll down toward the nipple; you want to put pressure on the breast behind the milk
- keep up the pressure until the baby no longer drinks/swallows even with the compression; release the pressure every 5-10 seconds
- the baby may stop sucking when you release the pressure but will start again once she tastes milk
- use compressions until the baby no longer drinks/swallows even with compressions
- switch to the other side and use compressions again if necessary to increase the amount of milk the baby drinks



Figure 1—breast compression

If your baby still needs help to get enough milk, even though you are using breast compressions, call your health care provider or lactation consultant for help.



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