PREPARATION FOR BREASTFEEDING

First, it is important to understand that there is very little that you need to do to prepare for breastfeeding. Your body has already done most of the necessary preparation, and is producing colostrum (the first form of breastmilk) by week 26 of your pregnancy. Therefore, this handout covers: optional supplies you may choose to obtain before baby is born, things you should not do to prepare for breastfeeding, and some things you may want to do.

Nursing Bras
While breastfeeding, women’s breasts tend to be heavier and fuller than usual, and most women find they are more comfortable if they wear a supportive bra. If you normally wear soft cup bras, you may find it works fine to use these: simply pull the cup down below your breast, exposing the nipple for nursing, but leaving breasts supported. Or, you may choose to buy special bras, which have flaps that open out from the center, or down from the top to expose the nipple. Shop in the final weeks of pregnancy: The band should fit on the tightest hook, and be able to loosen a little if needed. If you can just slip a hand inside the cup; this will allow for a little breast growth during nursing.

Nursing Pads
Sometimes nursing moms’ breasts leak milk. If your breasts leak, just use your hand or forearm to put a little pressure on the breast till leaking stops. If you leak often, you’ll want nursing pads: you tuck one in each side of your bra to prevent milk from leaking through your shirt. It’s important to change pads anytime they get wet: wearing wet pads can cause sore nipples. Some women use plastic breast shells to catch leaking milk, but this may cause more leaking.

Breastfeeding Clothing
You can breastfeed discreetly in almost any shirt you already own (t-shirts, sweaters, sweatshirts, etc.): when you are holding baby in your arms, simply lift the shirt up from the waist, up over the lower part of your breast, then slip your bra down to expose the nipple and latch baby on. Baby will cover any skin you have just exposed. If you prefer, there are special nursing clothes available with a variety of openings. These can be useful for moms who are learning to breastfeed, or moms who are especially worried about nursing in public. You can get nursing wear at maternity stores, online, or at consignment shops.

Checking for Inverted Nipples
You may hear about “inverted nipples.” When pressure is applied to the areola, these nipples sink down into breast tissue rather than protruding outward, or becoming flat. Also, they do not become erect when cold or stimulated. About 1/3 of women have inverted nipples at some point in pregnancy, but only 10% remain inverted by the 9th month. To test for this, hold your breast with your thumb and index finger at the edge of the areola, and gently press thumb and forefinger together. If the nipple sinks in, or seems to disappear into the breast tissue, it is considered inverted. Babies may have a more difficult time latching on in the first few days, but typically, baby’s suckling helps the nipple to protrude over time.
There are two possible treatments for inverted nipples. One is to wear plastic breast shells in the final weeks of pregnancy, which gently draw the nipple out. The other is “Hoffman exercises”: which gently stretch the nipple tissue. Interestingly, a clinical trial showed no significant benefit to these treatments, and found that “no treatment” appeared to be the best option.

For more information call Swedish’s breastfeeding info line: (206)386-MOMS.

Some sources recommend use of “nipple shields”, soft plastic shields worn while nursing baby, to help draw a nipple out, and to protect sore nipples. Be aware that nipple shields can interfere with milk production, and should not be used without the advice of a lactation professional.

If you have any other specific concerns about your nipples, your breast shape, previous breast surgeries, health, or any other issues which may affect breastfeeding, you can ask your caregiver for a referral to a lactation consultant for a consultation before baby is born.

**Toughening Nipples??**

You may also hear a variety of advice about how to “toughen up” your nipples prior to birth. Here’s what *not* to do:

- **Do NOT** rub your nipples with a nail brush (or even a washcloth) to toughen them. This may irritate nipples, and may cause uterine contractions.
- **Do NOT** apply alcohol, witch hazel, tincture of benzoin, or Vaseline to harden / prepare the nipples. This may irritate the nipples and predispose them to pain and cracking.
- **Do not** use soap on your nipples. The glands on the nipples secrete a substance which helps keep them clean and moist, and soap can dry them out.
- **Do not** hand express colostrum, or massage breasts prior to birth in hopes of avoiding engorgement. These methods don’t appear to affect engorgement, and may cause contractions.

These things are not harmful, though they’re also probably not necessary:

- For a few minutes every day, or longer if desired, expose your nipples to fresh air.
- You can go bra-less occasionally, or wear a nursing bra with the flaps down, which lets the nipples rub against your clothing. *May* prepare nipples for handling friction.
- Lovemaking with gentle oral or manual stimulation of the nipples.

A general caution: Nipple stimulation in pregnancy can cause uterine contractions and could induce labor. Minimal stimulation is not likely to cause any problems, but if any of your actions are causing contractions, you should stop and consult caregiver.

Some women attempt to induce labor, or increase the strength of contractions, by using nipple stimulation. This should only be done under the advice of a caregiver. See PCN p. 268.

**Supportive Caregivers**

Before baby is born, surround yourself with people who know about breastfeeding, support breastfeeding, and believe that it will work for you and your baby. Especially important: make that your partner, other family members, your baby’s doctor, and any babysitters or childcare providers you work with are educated about breastfeeding, and prepared to support you with it.