

Care Plan for Treating Plugged Milk Ducts and Mastitis

Mastitis is an inflammation in your breast. There are two kinds of mastitis: inflammatory and infectious (breast infection). Inflammatory mastitis can lead to infectious mastitis—which is also called a breast infection—if not treated early. It is very important to remove milk from your breasts frequently and effectively in order to prevent and relieve mastitis.

Symptoms of Inflammatory Mastitis—Breast Inflammation and/or Plugged Duct

If you have a tender spot, redness, or a sore lump in your breast or nipple you may have a plugged duct. Milk backed up behind the plug causes the inflammation in your breast. It usually affects one breast. You may have a slight fever or none.

Symptoms of Infectious Mastitis—Breast Infection

If part of your breast or your entire breast becomes red and hard, you have a fever of 101° or higher, and you feel flu-like and achy, you may have a breast infection. Mastitis may begin as a plugged duct, engorgement, or a damaged nipple. It can develop gradually or suddenly and affect one breast or both breasts.

Care Plan Goals for Relieving Mastitis

- Decrease swelling
- Identify the cause
- Prevent inflammatory mastitis from becoming infectious--breast infection--or an abscess

Suggestions for Relieving Inflammatory Mastitis—Breast Inflammation and/or Plugged Duct

- Use cold packs on your breasts for 20 minutes before pumping (see *Suggestions for Making and Using Cold Packs* below)
- **Do not use heat on your breasts** if there is swelling. It will make it worse
- Use **light touch massage** for 10 minutes before pumping. Refer to *The Basics of Breast Massage and Hand Expression* and *Breast Gymnastics* videos at:
<https://www.mayabolman.com/videos/v/basicsofbreastmassage>
<https://www.mayabolman.com/videos/v/breastgymnastics>
- Breastfeed or pump affected breast every 2-2.5 hours during the day and 3 hours at night until your symptoms subside
- Begin each breastfeeding session on the affected breast then switch to unaffected side
- Try using different breastfeeding positions at each feeding session

If you have been following the above steps for treating a breast inflammation and/or a plugged duct and see no improvement or are feeling worse after 24 hours, you may have infectious mastitis.

It is important to treat it immediately

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Suggestions for Relieving Infectious Mastitis—Breast Infection

- **Call your doctor right away for medical treatment**
- Follow the suggestions for *inflammatory mastitis* listed above
- Take the entire course of the antibiotic if prescribed (typically 10-14 days)
- If breastfeeding feels too uncomfortable, use an effective breast pump to remove milk from the affected side. Continue breastfeeding on the unaffected breast

***Important Note:** *Removing milk from your breasts frequently and effectively, especially the affected side, is critical treating mastitis. If you stop breastfeeding or pumping, your infection may get worse, and the mastitis may lead to a breast abscess.*

Suggestions for Making and Using Cold Packs:

- Place crushed ice or small ice cubes in several Ziplock bags. (You can also use 16 oz bags frozen peas or corn)
- Use enough cold packs to wrap around your breasts
- Put Ziplock bags inside a pillowcase and place around your breasts
- Use cold packs 20 minutes before massaging and pumping
- You can also use the cold packs more frequently between feedings or pumping sessions as needed for comfort on red, swollen areas of your breast

If you are using frozen peas or corn, they can be put back in the freezer to refreeze and use later on as cold packs for your breasts. Do not eat the peas or corn after they have been thawed and refrozen.

Other Suggestions for Relieving Mastitis:

- Ask your doctor about using a non-steroidal, anti-inflammatory medication, such as ibuprofen, to reduce inflammation
- Wear a supportive, well-fitting bra but avoid a tight underwire bra or clothing that may put pressure on breasts
- Drink plenty of water and healthy fluids. Avoid high sodium (salt) in foods
- Rest as much as possible

If your symptoms continue after following this care plan, call your doctor and the lactation consultant the TriHealth Breastfeeding Care Center at 513-862-7867 option 3

Selected References

Witt, A. M., Bolman, M., & Kredit, S. (2016). Mother's value and utilize early outpatient education on breast massage and hand expression in their self-management of engorgement. *Breastfeeding Medicine, 11*(9), 433-439.

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