Lactation after Loss
A Guide for Bereaved Mothers

Your first days and weeks at home without your baby in your arms will be extremely difficult. One of the most challenging times for many bereaved mothers is when their milk comes in. In the past, many mothers have been unprepared for how to cope during this time. We hope that this brochure will help you to think through the different options that you have for helping your body and your emotions through this experience.

Throughout your pregnancy, your breasts have been growing and changing in preparation to feed your baby. After the loss of your baby, your body will not know that the milk is not needed. Hormones will signal your body to begin milk production. For the first few days, you will notice a thick, yellowish substance called colostrum, and you are unlikely to experience discomfort. It is usually on the second or third day that your mature milk will come in.

At this time, many mothers experience anguish that there is no baby to feed. The milk comes in when most mothers have left the hospital and the company of the caregivers who helped them through their labor and delivery. Facing the arrival of your milk when you’re at home, without your baby, can be a very difficult experience. When your milk comes in, your breasts will feel very full, and the pressure from the increasing amount of milk will become uncomfortable. As long as your breasts sense that there is a demand for milk, they will keep producing it. When there is no demand, they will eventually stop.

Some bereaved mothers find that the presence of milk is upsetting and want to eliminate it as quickly as possible, while other mothers find the milk to be a comforting reminder of their body’s ability to care for the baby they so love and had wished to care for. There is no right or wrong way to feel. It is your choice to follow whatever path feels best for you. The grief can be overwhelming, and we hope you will be very gentle with yourself as you begin to heal.

**How you can help your body to stop making milk**

For most bereaved mothers, when their milk comes in, they begin the very difficult process of helping their body to stop producing milk. You may be surprised by the sudden engorgement you will feel when your milk comes in, and how quickly you may become physically uncomfortable.
In the past, mothers were told to wear a very tight bra, or bind their breasts to help to cease milk production. We do not recommend this practice, as it can be very painful, can lead to infection, and does not substantially decrease milk production. We recommend wearing a bra that is supportive but does not restrict your circulation.

When your breasts feel painful from the pressure of the milk, there are a number of things you can do:

- Stand in a hot shower and let the water run over your breasts. This can stimulate some milk release and help you to feel less full.
- Sit in a warm bath and lean into the water. This will allow some milk to leak out.
- Express just enough milk, by hand or with a breast pump, to make you feel more comfortable. To hand express, hold your breast with your fingers a few inches back from the areola. Push your hand back toward the chest wall, and roll your fingers forward toward the nipple, taking care not to slide your fingers over the skin.
- Wear a comfortable but supportive bra that does not restrict your circulation.
- A traditional remedy for engorgement is to place washed, cold, raw green cabbage leaves inside the bra to slow milk production. Replace the leaves about every 2 hours as they wilt until you are more comfortable.
- Apply ice packs for 5-15 minutes at a time to your breasts to reduce swelling and pain.
- Take a pain reliever such as acetaminophen (Tylenol) or ibuprofen (Motrin).
- Drink sage tea, which is thought to reduce milk production.

Please note that, although you are allowing milk to flow, this will not increase your milk supply. Allowing some milk to flow will decrease the chance of plugged milk ducts, infections, and serious engorgement. You should watch for blocked ducts, which will appear as tender and painful lumps in your breast. A breast infection may appear as a tender, reddened area and would be accompanied by a fever or chills. If you experience these symptoms, contact your doctor, midwife or a lactation consultant for further assistance.

During this time, you may find that your emotional pain is aggravated by the physical pain of this weaning process. We encourage you to be very gentle with yourself and to follow the steps that bring you not just the most physical comfort, but also emotional comfort. Even if your goal is to stop milk production, it is not unusual to be curious about the milk that would have nourished your baby. Many mothers want to see the milk and to taste it. If having milk in your breasts makes you feel connected to your baby, you are not alone. Take the time that you need to allow this weaning process to happen at a rate that feels comfortable for you.

If you have an established milk supply

If you have been pumping for or nursing your baby before he or she died, you will probably want to continue to pump periodically to help your body adjust to the decreased demand and avoid engorgement, plugged ducts, or mastitis.

You can adjust your schedule so that, over time, you pump less and less. For example, if you have been pumping 6 times in 24 hours, for a few days you could drop to 5 times, and then to 4. You can continue this process until you are no longer pumping at all. In addition, you can follow the suggested protocol.
above to help your body to stop producing milk. If you have a supply of frozen milk, you can refer to the suggestions below for donating your breast milk.

**Donating your breastmilk**

For some mothers, it can be very healing to pump their breastmilk and donate it to another baby in need. Breastmilk donated to milk banks is provided to premature babies in NICUs and very ill infants. It can be lifesaving. While the idea of pumping can feel difficult for some mothers, those who feel drawn to the idea usually take great comfort in their ability to put their baby’s milk to use. If you have been pumping for your baby, it can be extremely difficult to think of discarding your milk.

To begin the donation process, locally you can contact the WakeMed Mother’s Milk Bank at (919) 350-8599. You may also visit the website of the Human Milk Banking Association of North America: [www.hmbana.org](http://www.hmbana.org) to find a list of milk banks and contact information. Milk banks are generally able to accept donations from outside their areas using overnight shipping.

Becoming a milk donor involves a screening process. This includes a phone interview, a written questionnaire, blood testing, and a letter from your doctor. When you start the process please be sure to indicate that you have experienced the loss of your baby. If you are approved to donate, the milk bank will waive the minimum donation amount for you, and gratefully accept any amount of milk you are able to provide. If you aren’t approved to donate, a local researcher at North Carolina State University may be able to use your milk for research – contact UNC Lactation Services for more information.

**Sources:**


La Leche League International - [www.llli.org](http://www.llli.org)

**Local Resources:**

UNC Women’s Hospital Lactation Warmline: (919) 966-4148

WakeMed Mother’s Milk Bank: (919) 350-8599

**Used with permission of:** Empty Arms Bereavement Support, Inc. Carol McMurrich, President, Tanya Lieberman, IBCLC [www.emptyarmswesternma.blogspot.com](http://www.emptyarmswesternma.blogspot.com)

**Approved by NC Women’s Hospital Patient Education Steering Committee, June 18th, 2013**