Breast milk and bereaved mothers.

The passing of an infant, no matter what the circumstances, is a tremendous loss. While you grieve your infant, you may also be experiencing physical changes due to postpartum recovery and lactation.

You are likely to be feeling a range of changing emotions such as frustration, sadness, anger, disappointment, exhaustion, anxiety or depression.

Depending on the age of your infant and circumstances, your milk may just be coming in or you may have a full supply. You might also have stored expressed milk at home or at the hospital.

Feelings regarding lactation after a loss vary from mother to mother. Your breast milk is a very tangible physical link to your baby. Some mothers want to stop lactation as quickly as possible while others want to take more time. Mothers may want to donate stored breast milk to a milk bank while others feel that the milk they produced was just for their baby. There is no right or wrong and you will need to decide what is best for you.
“Our son, Ashton, was born at 29 weeks with severe complications. While being amazed by our little fighter in the NICU, I was fortunate to pump and freeze every drop of milk. The NICU staff explained breast milk was medicine which no synthetic drug could ever replace.

We were hopeful for the day Ashton would be stable enough to have breast milk for food; however, he only received 2 teaspoons before he became our Angel Baby. Donating my breast milk has been a bright, positive light in our bereavement journey knowing other NICU families may spend an extra hour, day or lifetime with their baby.”

-Val Lee
Tips for discontinuing lactation

If you have an established supply:
For days, weeks, or months, you have been nursing or pumping for your little one. This was truly a labor of love.
It will take time for your body to adjust and stop production.
Abruptly stopping the removal of milk from the breasts may cause discomfort, plugged ducts, or mastitis. You will need to pump or hand express milk, gradually decreasing frequency for at least several days. How often you need to pump or hand express depends on how often you had been nursing or pumping. For example, if you have been pumping six times in 24 hours, drop to five times in 24 hours for a day or two. Then drop to four times in 24 hours. Continue this process until you are no longer pumping at all.
When pumping or hand expressing, the goal is not to drain the breast but to just remove enough to make you comfortable.

If your milk is just coming in:
For months, your body has been preparing for lactation. Birth signals your breasts to begin to produce milk. For the first few days you will notice small amounts of thick, yellowish colostrum. A couple of days to a week after birth, your milk will “come in,” meaning that mature milk begins to replace colostrum. This is when your breasts will fill and you may experience engorgement. If the breasts are not drained of this initial milk, the body quickly gets the message to stop production. Try the tips below to ease engorgement.
Dealing With Engorgement and Discomfort

Cold compresses can reduce swelling and ease discomfort. Apply compresses for 15 to 20 minutes four times a day, or as needed.

Consider using an over the counter pain reliever such as acetaminophen or ibuprofen.

Cabbage leaves contain enzymes that aid in relieving engorgement. Wash cold, raw, green cabbage leaves and crush the leaf veins to release the enzymes. Place “compresses” of these leaves inside your bra cups. Replace cabbage leaves about every two hours, or as they wilt, until your milk supply decreases. Often, women feel relief in as little as two hours.

Pump or hand express milk just enough to relieve pressure.

Wear a supportive bra. Do not bind your breasts as this may cause plugged ducts.

Plugged Ducts and Mastitis

When breasts remain very full, they may develop a plugged duct. A lump appears and the breast can be sore. Sometimes the area becomes reddened or the breast feels warm. If you develop symptoms of a plugged duct, try the following home care measures:

Pump or hand express milk every few hours. You will need to remove more milk than usual to clear the blockage. You can resume reducing your milk supply after the plugged duct resolves.

Apply warm compresses to the affected area for 15-20 minutes before pumping or expressing milk.

Gently massage the lump working from the lump to the nipple. This can be done during and in between pumping or hand expressing sessions.

Sometimes, a plugged duct can lead to mastitis, an inflammation of the breast tissue. Mastitis can develop quickly and its symptoms include fever, achiness, and shivering. If you develop flu-ike symptoms, cannot clear a plugged duct within 24 hours, or have any other reason to believe that you have mastitis please contact your healthcare provider. Mastitis is easily treated with antibiotics. It is important to seek medical advice as mastitis left untreated can result in an abscess.
Your body and its breast milk

How long will it take for my body to stop producing milk?

Every mother will have a different experience. Factors such as the age of your baby, the stage of your pregnancy, or how often you were previously nursing/pumping may play a part.

Weaning is relatively easy and quick for some mothers while it takes several weeks for others.

Sometimes, breasts may produce drops of milk for weeks or months after weaning.

What is milk donation?

One option for expressed milk is to donate it to a local milk bank. Mid-Atlantic Mothers’ Milk Bank is a nonprofit milk bank affiliated with the Human Milk Banking Association of North America (hmbana.org). We provide both infants in Pennsylvania and West Virginia with pasteurized breast milk from screened donors.

Many mothers find the act of milk donation to be healing. It may be a one-time donation of stored milk or milk donated over a period of time. Some mothers continue to pump specifically for donation.

Arrangements for shipping or pickup can be made if you have milk stored at the hospital. Most hospitals are able to keep your breast milk for a period of time while you decide what you would like to do.

If you would like to donate your breast milk, you will need to go through the screening process. Screening consists of a 10 minute phone interview, completion of an application packet, and blood screening performed at a lab close to your home.

Donate your milk to local babies in need.

To begin the screening process, you can contact us at donate@midatlanticbank.org or 412-281-4400. Please visit midatlanticmilkbank.org for more information.
Additional Resources

As part of our mission, Mid-Atlantic Mothers’ Milk Bank is committed to the wellbeing of parents with infants in the NICU and parents who have experienced the loss of an infant. You do not need to be a donor to participate in our programming.

An updated list of resources for parents who have experienced the loss of an infant is maintained by the Mid-Atlantic Mothers’ Milk Bank. You can access the list by visiting the “For Bereaved Families” section of our website at midatlanticmilkbank.org.

Web: midatlanticmilkbank.org
Phone: (412) 281-4400
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Proud to be part of the Human Milk Banking Association of North America (HMBANA)