

Stopping Your Breastmilk Production After Infant Loss



St Joseph's General Hospital Elliot Lake

Adapted from:

Lactation After Stillbirth and Infant Loss, Breastfeeding Support
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What is this book about?

Losing a baby any time after 16-18 weeks gestation may still lead to breast milk coming into the breasts a few days later. This is because the arrival of milk is driven by the drop in hormones following the delivery of the placenta.

The presence of breast milk may not have been anticipated and you may find it very upsetting. While some women will want to stop milk production as soon as possible after stillbirth, miscarriage or loss of a baby, others may take comfort in pumping and donating breast milk.

Stopping Milk Production

Express to comfort

The key to stopping breast milk production is to express just enough milk to stay comfortable and not more (express to comfort). This will avoid:

- severe engorgement (breasts that are painfully full, tender and swollen with milk),
- reduce the risk of inflammation of the breasts (mastitis)
- send a signal to the breasts to reduce milk production.

If engorgement is ignored, painful blocked ducts or mastitis, sometimes known as “milk fever”, may need antibiotics to avoid breast abscesses.

Use cold compresses

Cold compresses such as frozen peas in a damp cloth or chilled cabbage leaves, held against painful areas of the breast for twenty minutes at a time can reduce any pain or inflammation. There is some evidence that cabbage leaves may be better than cool gel packs for reducing engorgement.

Pain relief

Take pain relief as needed and as recommended by your health care provider.

Breast support

Do not bind the breasts with tight cloths or very tight bra. A firm well fitted supportive bra can help comfort levels by supporting the breasts.

Drugs to dry up breast milk

Historically prescription drugs were used to dry up breast milk, but they can have some undesirable side effects. Hormonal birth control pills and certain decongestant medications can also reduce the milk supply. However, there is no evidence that these drugs work any better than expressing just enough milk to be comfortable. For further information about these drugs, consult with your health care provider.

