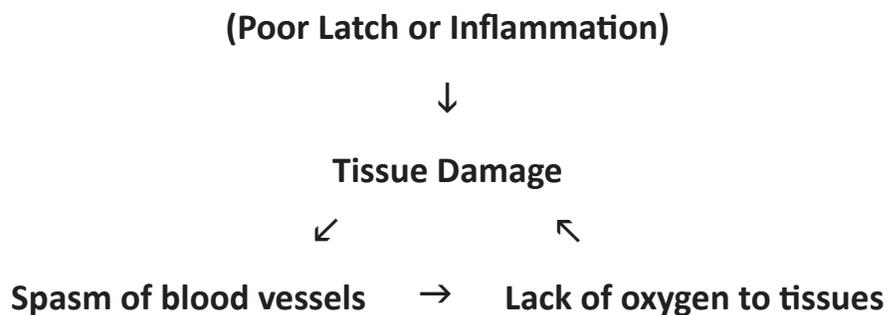


Vasospasm of the Nipple

Spasm of blood vessels (vasospasm) in the nipples can result in nipple and/or breast pain, particularly within 30 minutes after a feeding. It usually happens after nipple trauma and or infection. Vasospasms can cause repeated **disruption of blood flow to the nipple**. Within seconds or minutes following a feeding, the nipple may turn white, red or purple, and a **burning or stabbing pain** is felt. Occasionally women feel tingling or itching. As the nipple returns to its normal color, a throbbing pain may result. Color change is not always visible.

If there is a reason for nipple damage (poor latch or yeast) the **cause needs to be addressed**. This can be enough to stop the pain. But sometimes the vasospasm continues in a “vicious” cycle, as depicted below. **While the blood vessels are constricted, the nipple tissue does not receive enough oxygen. This causes more tissue damage, which can lead to recurrent vasospasm, even if the original cause is “fixed”:**



To promote improved blood flow and healing of the nipple tissue:

- See a Lactation Consultant for help with latch and/or pumping to reduce future trauma.
- When baby comes off the nipple, immediately cover the nipple and apply a heating pad on the “low” setting for at least 5 minutes, over your clothes.
- **You may also want to wear 100% wool, or polar fleece breast pads.** These pads help keep the nipples warm, thus avoiding vasospasms due to wet and/or cold nipples.
- If the above measures are not helpful AND you routinely experience Raynaud’s phenomenon (vasospasm in your fingers in response to cold) you may benefit from Nifedipine. This is a prescription medication (pill), and is RARELY required to relieve symptoms.

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