## Nipple Blisters or Blebs

A nipple "blister" (or bleb) starts as a white or yellow spot on the nipple. If it breaks open immediately, you may only see a tiny red spot. A bleb is often quite painful, but not always.

- Although not well understood, we think a nipple blister/bleb is usually caused by nipple trauma. If your baby's latch has not been assessed, or you are pumping and think your pump may have caused the bleb, you may want to see a lactation consultant (IBCLC). With an older baby, a common cause of a nipple bleb is a baby "yanking" on the nipple to stimulate a faster milk flow, or to see who walked into the room! In a younger baby, it can be associated with baby pinching to slow fast flow, or just not latching deeply.
- If your bleb is not painful and not causing any problems, it is okay to do nothing and let it resolve on its own.
- MilkWorks

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- If your bleb is not "open," or if milk seems to be flowing much more slowly than usual, milk may back up and create a tender mass in the breast. This could lead to mastitis. (See our information on *Plugged Ducts and Mastitis*.) Applying a warm washcloth over your nipple may feel good as you seek care, BUT do NOT try and open with a pin or by squeezing, as this usually results in more inflammation and scarring, further blocking milk flow.
- Rest frequently and eat well. Mothers who are experiencing recurrent plugged ducts within the breast may benefit from taking soy or sunflower lecithin (~1200 mg three to four times a day). We do not know how this helps- may be a prebiotic for "good bacteria" within the breast.
- While blebs may be annoying and painful, they are not harmful unless they completely stop milk flow from part of the breast, leading to a breast infection (mastitis) or loss of milk production from that area of the breast. If a bleb is painful or obstructing milk flow, a prescription, mid-potency steroid ointment can be applied after nursing and covered with an "occlusive dressing". A six-inch square piece of plastic wrap will do the job to help the medication penetrate deeper. Apply a tiny amount of the ointment to the bleb after every breast feeding or pumping session until your nipple is no longer painful and milk is flowing freely. Do not continue to use steroid ointment for more than one week if the bleb is not improving, and do not use the steroid ointment longer than two weeks total unless directed to do so by the prescriber.

