

Supporting Your Milk Production

Most mothers make enough milk for their baby if they remove milk frequently and do not take medications that lower their milk production. **If your milk production is not meeting the needs of your baby**, we recommend working with an IBCLC to explore the following suggestions:

Especially for a Young Baby (less than 6 weeks old)

If possible, hold your baby skin to skin after birth. This allows your baby to learn to latch well and encourages your milk production. Repeat in the hospital and when home.

Nurse frequently during the day, especially in the morning hours when your supply is the highest. If your baby is sleepy, wake your baby at least every 3 hours during the day and 4 hours at night. A sleepy baby is not always a well-fed baby. If your baby is jaundiced or losing weight, you may need to wake your baby.

Keep your baby close to you for easy nursing at night. Avoid putting your baby in bed with anyone who has been drinking alcohol, taking sedatives or narcotics, or smoking cigarettes. Do not put your baby in a waterbed, or a bed with loose pillows or blankets. Never fall asleep on a couch or in a recliner with your baby. If you are nursing in bed, try to put your baby in his or her own sleep area next to your bed after nursing.

If your baby is nursing and starts to swallow less often, gently compress your breast with your fingers and listen/watch for swallows. When swallowing stops, rotate your hand on your breast and compress again. Do this until you do not hear any more swallows.

If you have trouble with letdown, establish a routine. Turn off your phone, listen to your favorite music, breathe deeply, relax your shoulders and picture milk flowing from your breasts.

Drink to thirst and eat a balanced diet with protein, fruits, vegetables, and whole grains. This will support your overall energy and well-being.

Do not hesitate to take pain medicine if you are in pain from a Cesarean or an episiotomy.

If you smoke, stop, or at least decrease the number of cigarettes you smoke. Ask your healthcare provider about medication to help you stop.

Avoid antihistamines, decongestants (Sudafed) and alcohol- they can decrease your milk production. Avoid hormonal birth control in the first six weeks. Watch your milk production and your baby's weight gain if you do start birth control pills after six weeks, even the "mini-pill" which does not contain estrogen. Avoid injectable or implanted birth control as they are more difficult to discontinue. If you are taking any over the counter, or prescription medications, discuss their use with your physician or lactation consultant.

A low hemoglobin or thyroid level may affect milk production. If you have bright red bleeding one week past your baby's birth and are passing clots, with or without cramping, and your milk has not come in at all, consult with your health care provider. Retained placental fragments can interfere with milk production.

If your baby appears hungry, feed your baby rather than offering a pacifier. Try to use a pacifier for extended suckling and comfort, rather than when your baby is hungry.



Additional Suggestions as Your Baby Gets Older

If you are back at work and your baby is sleeping longer at night, you may want to add a middle of the night, or an early morning feeding, to increase your production and baby's intake. Quietly wake baby in a dark room. Most babies will nurse well and immediately return to sleep. Many "older" babies tend to nurse better when they are drowsy and less distracted.

Older babies can get impatient with a slow milk flow. You may find that using a pump after your baby nurses, along with breast compressions will help to "drain" your breasts better and build your production. <https://firstdroplets.com/downloads/>

If your baby is over 4 months old and you have started solids, offer the breast before solids when at home. At day care, offer solids before milk, especially if day care is offering your milk in a bottle. A sippy cup may help your baby be satisfied with less milk at day care.

Try to decrease the amount of time your baby is away from the breast if your baby goes to day care. Sit down and nurse your baby when you drop your baby off at day care and again when you pick baby up from day care. This also exposes you to the latest viruses at day care and may help to protect your baby with increased antibodies.

Try to decrease the amount of time between milk removals at work. How often you pump may be more important than how long you pump. Even one extra 5-minute pumping session may help.

Consider new membranes or using a different pump. The Medela Symphony rental pump may be more effective. Switch out the membranes on your pump every 3 months.

Try to power pump once daily, or several times a week. Pump for 10-12 minutes, break for 10-12 minutes, pump for 10-12 minutes, break for 10-12 minutes and pump for 10-12 minutes. You may also try a shortened power pump version for a half hour. Pump for 5 minutes, break for 5 minutes, pump for 5 minutes, break for 5 minutes, and pump for 5 minutes.

If your production decreases with the return of your period, you may find that a calcium/magnesium supplement (1000mg/500mg) taken daily is helpful.

A galactagogue is something that increases milk production. Herbs (plants) have been used around the world for centuries, however, there is little to no research on their effectiveness and safety. There are two prescription medications that can be used to increase milk supply: Reglan and Domperidone. We do not often recommend Reglan because of its potential side effects. Domperidone is not readily available in the U.S. Frequent milk removal is usually the most effective way to increase milk production. (See our information on **Galactagogues** for dosages, potential side effects, etc.)

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