



# Localised breast tenderness and inflammation

## Patient information

Localised breast tenderness and inflammation, formerly known as blocked ducts, presents as a tender or firm lump in the breast. Breastmilk accumulates behind the lump, causing inflammation of the surrounding tissues, possible localised redness of the skin and pain.

### The reasons why this may happen include:

- Your baby may be premature, vulnerable, jaundice or sleepy and does not feed regularly or effectively at the breast
- Your baby has difficulty attaching to the breast; an incorrect, poor or shallow latch can lead to poor milk removal from the breast
- Short breastfeeds or distracted at the breast (the older baby)
- Ineffective removal of breastmilk when expressing due to the pump type or flange size
- Long intervals between breastfeeds or missing a feed overnight
- Restrictive clothing or bra that apply pressure to the breast tissue
- A supply of breastmilk above your baby's needs
- A white bleb/spot on the nipple (commonly occur after breastfeeding for 3-4 months)
- Illness or separation from your baby.

### How do I reduce inflammation and pain?

Inflammation in the breast tissue causes the milk ducts to narrow and interrupt milk flow. To reduce the inflammation, use the following techniques:

- Apply cold packs to the area. **Heat is no longer recommended.**
- Consider taking anti-inflammatory medication (eg: Nurofen) to reduce the inflammation and provide pain relief.

It is important to remove milk from the breasts frequently and effectively by breastfeeding or through expressing if separated from your baby.

Breastfeed when your baby shows feeding cues and avoid long periods between feeds.

Offer the affected breast first when your baby is ready to feed.

A comfortable latch at the breast will help your baby to feed effectively and transfer milk to meet their needs.

You may need to express to ensure the breast is soft, comfortable and lump free. For example:

- If the lump is unresolved post breastfeed
- To replace missed breastfeeds in the older baby
- If your breasts are uncomfortable/full and your baby is not ready to feed.



Your midwife or lactation consultant can advise you on the appropriate pump and equipment to use (eg: correct flange size).

When breastfeeding or expressing, avoid deep tissue massage of the breast, as this may increase the inflammation

If the tenderness and inflammation persist, you can contact your local physiotherapy department for therapeutic ultrasound, which may help reduce the inflammation and improve milk flow.

Seek assistance from a lactation consultant or your healthcare provider for management of a white bleb/spot.

It is important to remove milk from the breasts regularly, so the use of formula (unless medically indicated) and dummies/pacifiers is not recommended in the first few weeks while establishing breastfeeding.

If you develop signs of mastitis (an increase in firmness, pain, redness or a fever), seek medical attention via your GP or local emergency centre.

## Support and follow-up

For individual lactation support, contact the Breastfeeding Centre of WA on (08) 6458 1844, Monday to Friday, 8am-4pm or visit the website.



**Scan the QR code for additional resources on breastfeeding**

For more information, contact the Australian Breastfeeding Association helpline on 1800 686 268 or visit their website [www.breastfeeding.asn.au](http://www.breastfeeding.asn.au)



The information provided is for information purposes only. If you are a patient using this publication, you should seek assistance from a healthcare professional when interpreting these materials and applying them to your individual circumstances.



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