

Increasing Breast Milk Supply



Parents often worry about breast milk supply even when their baby is getting enough. We hope this information helps to reassure you.

A note on self-care:

Lots of parents who are working to increase their milk supply forget to take care of themselves.

Remember to:

- ✓ Drink fluids regularly.
- ✓ Eat healthy foods.
- ✓ Try to rest whenever you can.



In this booklet:

- When we say 'baby', we mean those healthy babies born at or around full-term.
- We use the word 'breastfeeding'. You might prefer a different word such as 'nursing' or 'chestfeeding'. Let your family, friends, and care providers know what word you prefer.
- When we say 'healthcare provider', this could be your family doctor, midwife, nurse practitioner, or lactation consultant.

How do I know if I have enough milk?

Your baby usually gets enough breast milk when:

- ✓ You see and hear your baby swallowing (a soft 'ka' sound).
- ✓ Your breasts feel softer after the feed.
- ✓ Your baby feeds 8 or more times in 24 hours.
- ✓ Your baby is usually content between feeds.
- ✓ Your baby has wet diapers (pee) and bowel movements (poop) each day, and increases over the first week.

	Wet Diaper 	Bowel Movement 
Day 1	1 or more	1 or 2 black or dark green
Day 2	2 or more	
Day 3	3 or more	At least 3 brown, green, or yellow
Day 4	4 or more	
Day 5 +	6 or more	At least 3 large yellow

(As your baby gets older, they might have fewer bowel movements.)

- ✓ Your baby gains weight. Your baby should regain their birth weight by about 2 weeks of age and continue to gain.

If you have concerns about your baby's growth, talk with your healthcare provider.

Did you know?

It is normal for babies to be hungrier than usual for a few days from time to time.

It is also normal for babies to feed very often in the evening.

We call this 'cluster feeding' and it can help to bring in more milk.

How can I increase my milk supply?

- Breastfeed more often using baby's early signs of hunger (about every 1 ½ to 2 hours) during the day and night. Count the time from the *start* of the last feed.
- Before you feed, place your baby safely skin-to-skin, massage your breasts, or do relaxation exercises.
- Latch your baby deeply, not just on the nipple, so it is comfortable for you. This helps with milk flow.
- If your baby's sucking or swallowing slows down, gently compress or massage your breast.
- If you have firm areas of your breast, massage them while breastfeeding or pumping.
- Hold your baby safely skin-to-skin as much as you can.
- Hand express or pump after feeding baby. This helps your breasts make more milk.

Early hunger signs (hunger cues)

- Licking lips
- Sucking tongue
- Sucking on your knuckle
- Turning towards a touch to the face and opening mouth
- Bringing hands to mouth
- Starting to fuss

**More milk out
means more milk made**



For a great video on hand expressing breastmilk, go to healthyfamiliesbc.ca/home/articles/video-hand-expressing-breastmilk or scan this QR code



There might be times when you need to feed your baby away from the breast. Whether it is for a few hours or days, you can protect your milk supply by hand expressing or pumping. Hand express or pump 8 or more times in 24 hours, including 2 to 3 times during the night.

Tips for getting the most breast milk while hand expressing or pumping:

- Gently massage the firm areas of your breast.
- Smell an item of clothing that baby has worn.
- Relax and think about your baby.
- Look at a photo of your baby.
- Watch a video recording of your baby.

Did you know?

Massaging increases milk flow and helps remove any lumps that are small blockages in flow.

What can decrease my milk supply?

Here are some ways your milk supply can decrease:

- skipping feeds
- supplementing* feeding
- feeding on a schedule instead of using hunger cues
- not breastfeeding at night
- using a soother or pacifier
- taking certain medicines (such as birth control pills, some cold medicines, water pills [diuretics])

Did you know?

Using a soother or pacifier can make it harder for your baby to latch on to the breast. It could also delay or shorten feeds.

***What is supplementing?** This is when you give your baby your own expressed milk, donated human milk, or baby formula, as well as breastfeeding.

What if it hurts to breastfeed?

If it hurts to breastfeed, it is a sign your baby might not be getting as much milk as possible. Ask for help.

While in the hospital, talk to your nurse about this. Once you are at home, talk to your healthcare provider or public health nurse at your local public health unit.

I have heard some foods can increase my milk supply. Is it true?

Many cultures around the world have used foods (such as cookies and teas) and herbs (such as fenugreek, milk thistle, and blessed thistle) to try to increase milk supply.

It is not clear from studies if they work or if they are safe for you and your baby. We do not recommend them because we cannot be sure what is in them. Instead, try all of the tips in this pamphlet, and talk with your healthcare provider.

What if I am still concerned about my milk supply?

When you have done everything you can and still not making enough milk, your healthcare provider might suggest you take a medicine to increase your supply.

This medicine is called 'domperidone' (say *dom-pair-id-own*).

Some reasons to use this medicine:

- a decreasing milk supply even with pumping and hand expressing
- not making enough milk
- restarting breastfeeding after weaning
- breastfeeding a baby you did not give birth to (such as adoptive or same sex parent who did not birth the baby but also wishes to breastfeed)

About domperidone

Several small studies have been done on this medicine. The studies included women who gave birth to premature babies. These studies found that taking domperidone (10mg 3 times a day for 7 to 14 days) can modestly increase the amount of breast milk produced. Most of the studies had women start taking the medicine at least 2 weeks after their babies were born.

Very few women reported any side effects from this amount of medicine over this length of time. The most common side effects were headache and stomach upset. When breast milk was checked, only a tiny amount of medicine was found in it.

Note: Health Canada recommends the dose of domperidone to be no higher than 30mg a day. There are concerns about rare abnormal heart rhythms and sudden death with this medication. A woman is more likely to suffer these rare adverse events when she:

- has an existing abnormal heart rhythm or heart disease
- takes other medications that might also cause abnormal heart rhythms
- has abnormal blood levels of electrolytes (for example: can happen from vomiting or diarrhea)

Ask your healthcare provider if domperidone is right for you.

Helpful Websites

Fraser Health - search Breastfeeding

fraserhealth.ca
or tinyurl.com/y6nwkzac



HealthLinkBC – Breastfeeding

healthlinkbc.ca/healthlinkbc-files/breastfeeding
or tinyurl.com/y5n2mjyh



Baby's Best Chance

[healthlinkbc.ca/
babys-best-chance](http://healthlinkbc.ca/babys-best-chance)

LaLeche League

[lllc.ca/
information-sheets](http://lllc.ca/information-sheets)



Government of Canada – search
'Breastfeeding your baby Canada'
tinyurl.com/y25x22kq

Kelly Mom – Parenting
and Breastfeeding

kellymom.com



International Breastfeeding Centre

ibconline.ca



LactMed Drugs and Lactation Database - A medical site about
breastfeeding and medicines

toxnet.nlm.nih.gov/newtoxnet/lactmed.htm
or tinyurl.com/jyy4e9n



For more information, contact your Public Health Unit

Abbotsford	604 864-3400	Mission	604 814-5500
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This information does not replace the advice given to you by your healthcare provider.

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