



VON VOIGTLANDER
WOMEN'S HOSPITAL
UNIVERSITY OF MICHIGAN HEALTH

Plugged Milk Ducts and Milk Blebs

The goal of our education materials is to provide medically accurate information that is inclusive of all parents and families. We invite you to have a conversation with your provider about the vocabulary and language that is most comfortable for you.

What is a milk bleb?

A **milk bleb**, or nipple bleb, looks like a small white dot on the tip of your nipple. It is a sign of **inflammation** (redness and swelling) in your milk ducts. Milk blebs can happen when inflamed cells from your ducts come up and get stuck at the surface of the nipple. A milk bleb may happen during breastfeeding (chestfeeding), and it can cause a feeling of sharp or shooting pain.

What do I do if I have a milk bleb?

If the milk bleb is not painful, no treatment is necessary. If the milk bleb is painful, try doing the following:

- Before feeding or pumping, apply wet heat to the nipple using a warm compress or soaking in the bath.
- After feeding or pumping, put on 1% hydrocortisone cream (which may help reduce inflammation on the surface of the nipple). This treatment is considered safe to use while breastfeeding (chestfeeding).
- Never try to pop or squeeze a bleb. Avoid picking or poking the bleb with a needle. This can make your symptoms worse.

If the milk bleb does not go away within 24-48 hours (about 2 days), contact the Lactation Help Line at (844) 200-8894 to talk about other treatment options.

What is a plugged milk duct?

A **plugged milk duct** is an area of the breast where there is inflammation, blocking the flow of milk through the ducts.

- A plugged duct is not caused by just one duct having a blockage of dried or jelled milk. It is a whole area of slowed milk flow because of swelling around the ducts.
- When the milk cannot move through the ducts and stays in place for a period of time, the fat particles in the milk can stick to each other, causing plugs.
- A person with a plugged milk duct will notice a tender area of the breast that has not drained after breastfeeding (chestfeeding) or pumping. They may also feel discomfort when directly feeding or pumping.

What might put me at risk for developing plugged milk ducts?

Plugged milk ducts may develop for many different reasons.

- Any time you're producing milk that isn't being removed regularly, or that isn't removed well, milk may build up in the breast. This may cause swelling around the ducts, making it difficult to drain milk through the ducts. When the swelling goes away, the milk can start to flow again.
- Another cause of plugged ducts is a change in the balance of bacteria in the milk-making tissue and the milk. Too much bacteria results in a sticky material which can plug the ducts. It can also cause narrowing of the ducts because of inflammation.

Here are some common conditions which may cause repeat issues with plugged milk ducts:

- **Producing too much milk**, which can cause areas of milk pooling with swelling and clogs around the ducts.
- **Irregular breastfeeding or pumping patterns.** Every lactating person has their own comfort level for how often they need to remove milk. For


some people it's 3 times per day, and for others it's every 2 hours. It's important to remove milk regularly - by breastfeeding (chestfeeding) your baby based on their hunger cues or by using your breast pump based on your personal needs - to avoid engorgement (overfilling of the breasts).

- **Taking herbs or medication to increase your milk production,** especially when you are not able to remove your milk frequently and thoroughly through feeding or pumping.
- **Relying on a breast pump.** Pumping is often less effective at milk removal throughout the breast compared to a baby feeding directly from the breast.
- **Problems with your breast pump or using the wrong flange size.** You may have issues with milk removal if the pump vacuum is too low or the speed is too high, or if the flange size (the part of the pump that you put over your nipple) is too large or too small.
- **Using a nipple shield,** which can make it difficult for your baby to remove milk from all areas of the breast.
- **Diet.** Sometimes people find that eating a diet high in animal fats (like whole milk, cheese, ice cream, and red meat) causes them to get plugged ducts more often.
- **Mastitis,** or inflammation of the breast.

What can I do to treat and prevent plugged milk ducts?

- Continue to remove milk at the rate that has been normal for you when you were not experiencing the plugged ducts. Do not pump or breastfeed more often, since that may increase milk production in the area where there is already milk buildup or swelling.
- Give it time. The plugged area became clogged because of overfilling. Try to be patient as the swelling goes away. Avoid deep massage or squeezing of the breast tissue, which will make the swelling worse and increase your risk of infection.

- **Gentle lymphatic massage** helps your body get rid of swelling. You can do the massage using your hands (no special devices are needed).
 - Scan the QR code or click on the link to see an instructional video about massage to help with lymphatic drainage.

<p>Lymphatic Massage for the Breast During Pregnancy and Lactation (IABLE): youtube.com/watch?v=-0Uwx7L47cg</p>	
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- Use ice packs or cold compresses on the breast to help reduce pain and swelling.
- You can take anti-inflammatory and pain-relieving medications such as ibuprofen (Motrin®) or acetaminophen (Tylenol®) while you are breastfeeding (chestfeeding). Follow the instructions on the package and talk with your healthcare provider if you have specific questions about using these medications.
- **Lecithin** can often help treat and prevent plugs. Lecithin capsules (pills) are typically 1200 milligrams (mg) and may be soy or sunflower-based. The dose is usually 2-3 capsules twice per day when you have plugged ducts, and 1-2 capsules twice a day to prevent plugged ducts.
- If possible, feed your baby at your breast instead of relying on your pump.

What should I avoid doing when I have plugged milk ducts?

- **Avoid heavy massage** which can damage the ducts and breast tissue, make swelling and inflammation worse, and increase your risk for developing more plugged ducts or mastitis.
- **Avoid pumping on higher settings.** This doesn't improve milk removal, and it can cause pain and damage to your nipple, areola, and breast. It's more important to remove milk on your normal, regular schedule.

When should I call my healthcare provider?

Call your provider if:

- Your plugged milk ducts do not get better within 48-72 hours (2-3 days).
- You develop signs or symptoms of a breast infection:
 - Increased redness of the breast
 - Increased pain in the breast
 - Fever higher than 100.4° F (38° C)

If your baby was born within the past 6 weeks, you can call Birth Center Triage at (734) 764-8134.

For general breastfeeding (chestfeeding) questions, please call the **Lactation Help Line at (844) 200-8894**. We will ask you to leave a message, and a lactation consultant will return your call within 24 hours.

For more information, visit the Institute for the Advancement of Breastfeeding and Lactation Education (IABLE) website for information on managing plugged ducts: lacted.org/iable-breastfeeding-education-handouts

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