What Is Raynaud’s?

Nipple pain is a major reason women stop breastfeeding early. Many people do not know about an illness called Raynaud’s phenomenon (Raynaud’s), which can cause a lot of nipple pain. Raynaud’s happens when blood vessels narrow suddenly and less blood flows to parts of the body, causing pain. Raynaud’s usually happens in the hands and feet, but 20% of breastfeeding mothers get Raynaud’s in the nipple. It causes pain, tingling, and color changes in the fingers, toes, nose, ears, and nipples. Raynaud’s “attacks” are often caused by cold, wetness, or stress. Caffeine, nicotine, and some medications may also cause blood vessels to get narrow, leading to a Raynaud’s attack.

What Are the Signs of Raynaud’s?

- Sharp or throbbing pain before, during, or after breastfeeding.
- Nipple color changes. Sometimes the nipple changes from white to blue to red or from white to blue. When the nipple returns to its normal color, the pain often goes away.
- Nipple numbness, burning, and/or tingling.

If you have nipple pain or color changes, see an International Board Certified Lactation Consultant (IBCLC) and/or health care provider. He or she might think about other reasons for nipple pain. For example, yeast or thrush infections can
cause nipple pain. Women are sometimes diagnosed with a yeast or thrush infection before they get the correct diagnosis of Raynaud’s. Your IBCLC will also look at your baby’s latch and position during breastfeeding. Poor latch and position can also cause nipple damage, pain, and color changes.

How Can I Prevent a Raynaud’s Attack?

• Keep your whole body warm.
  - Wear layers.
  - Cover yourself and baby with a blanket while breastfeeding.
  - Warm the breasts before and after breastfeeding. A heating pad may be helpful.
  - Breastfeed in a warm room.
• Do not let your nipple hit the cold air.
  - Cover your nipple with a free hand when your infant comes off the breast.
  - Replace wet nipple pads with dry ones.
  - Keep warmed towels nearby when leaving the shower.
• Do not use caffeine and nicotine.
• Talk about different medications with your health care provider if the medication you take narrows your blood vessels.
• Relax and take deep breaths to deal with stress and anxiety. It is normal to feel this way for a few weeks or months after having a baby.

How Else Can I Treat Raynaud’s?

There are medications you can take to treat Raynaud’s. One medication, called nifedipine, has been used by many women. Using it for 2 weeks may help you start to feel better, but some women must use it for a longer period of time. Nifedipine is considered safe for breastfeeding. Mothers who take normal amounts of this medication (up to 40 mg each day) have low levels of it in their breast milk, and there have been no bad effects on babies or breast milk. Some women may get the following side effects: flushing, nausea, low blood pressure, headache, increased heart rate, and dizziness.

What Other Illnesses Cause Raynaud’s?

For some women, Raynaud’s may be happening because of another illness. Raynaud’s can be caused by scleroderma, systemic lupus erythematosus, connective tissue disorders, rheumatoid arthritis, hypothyroidism, and more. In these cases, the ideas in this Inside Track for preventing and treating Raynaud’s may not help you. Talk with your health care provider about how treating your illness can help you deal with Raynaud’s.

Helpful Resources

• http://www.raynauds.org/
• http://www.uptodate.com/contents/raynaud-phenomenon-beyond-the-basics
• Other Inside Tracks: “Breastfeeding Was Going Well and Now My Nipples Hurt: Could My Baby or I Have a Yeast Infection?”; “Breastfeeding: Learning the Dance of Latching”