



Increasing Your Milk



One of the most common reasons mothers give for weaning sooner than they had planned is concern about milk supply. Living in a culture that is used to measuring everything, it can be difficult for mothers to trust the breast when they cannot see how much milk is inside it or going into the baby. When doubts begin to set in, mothers often receive well-intentioned but poor advice that may even make the situation worse. Fortunately, there are ways to know if you are making enough milk and ways to help increase it, if needed. Understanding how milk supply works and the things that can cause problems is key to finding the best way to increase your milk.

How Milk Supply Works

During pregnancy, the breasts build a milk factory in preparation for feeding your baby. Hormones from the placenta aid this process, and for mothers carrying multiple babies, extra hormones create an even bigger milk factory. Once the baby is born and the placenta comes out, the milk factory opens for business and



within two to four days, milk production kicks into high gear. From that time on, the factory—your breasts—determine how much milk to make by how much milk your baby takes out. That puts your baby in charge of your milk supply!

When a full-term, healthy baby is allowed to nurse as often and as long as he needs, a good supply of milk is usually established. Most babies eat 8-12 times a day. If the baby is unable to do the job due to premature birth, separation, illness, or another condition, milk must be removed from your breasts by other means or else the milk factory will begin to shut down. If you and your baby find yourselves in this situation and taking into consideration how many times a day your baby nurses effectively at the breast, pumping up to 8-12 times each 24 hours will help to ensure a good milk supply. If your baby is not feeding directly at the breast, a good goal for the amount of milk you pump per day is at least 25 to 30 ounces (750-900mls).

Your milk factory is always making milk. When your breasts are drained often, they make more milk faster. If milk builds up and isn't removed often or for a while, they make milk more slowly. If your baby decides he wants

to eat more than *your breasts* have stored up at the moment, he will keep nursing and draining your breasts until milk production speeds up to meet his needs. If you are making more than he wants, the leftover milk he leaves inside signals your breast to make less and less until your supply matches what he needs. How often your baby feeds ultimately is determined not by his age but by your milk storage capacity—the size of the warehouse in your milk factory. The babies whose mothers can store lots of milk may take larger feedings less often, while the babies of mothers with less storage space get smaller meals and may feed more often.

How Do You Know if Your Milk Supply is Low?

Baby behaviors like fussing after nursing, feeding often, or feeding for short or long periods of time,

or changes such as softer breasts or less leakage, may or may not indicate a low milk supply. These behaviors are often just part of the normal course of breastfeeding. Whereas in the early weeks the breasts are full and sometimes hard, this is related to additional fluids in the breasts as well as extra milk over and beyond what your baby needs. As the fluid is lost and your breasts settle into milk production that matches your baby's needs, the breasts will feel softer—even though there is plenty of milk in them, and more on the way! Sometimes an increase in frequency of feeding is an indication of an increase in your baby's need for "mommy time," and does not reflect a supply problem. The best way to tell is to look at your baby's diaper output and weight gain. In the first 6-8 weeks, most babies have at least 5-7 good wet diapers and at least 3-4 stools larger than a US quarter (2.5 cm). As they get older, they have fewer but larger bowel movements. From the time their mothers' milk comes in until four to six months of age, the babies should gain around 5-7 ounces (150-210 grams) per week. Weight gain slows down gradually for the rest of the first year. Your baby's health care provider can tell you if he is continuing to gain appropriately or if there is cause for concern.

Fixing a Problem

Understanding the cause of a low milk supply will help you figure out the most effective way to increase it. Any time a baby is nursing less than 8 times per day, offering the breast more frequently sends the message that more milk is needed. If a baby is not draining the breast well because of a poor latch (as may be the case when nursing is painful), correcting the latch will help the baby do his job better and stimulate production in the process. If the problem is the baby's suck, getting help and doing some extra pumping in the meantime can help bring your milk supply back up to where it is needed. Certain medications or hormonal birth control may also decrease milk production. More rarely, there can be problems with mother's breasts or hormones. If it seems like you and your baby have been doing everything right but milk supply still is low, seek help from your local La Leche League Leader or a qualified lactation professional who can help you figure out where the problem lies.

Tips to Make More Milk

- Extra nursings, extra pumping sessions or pumping after nursing to remove any leftover milk is a great place to start. The more milk removed, the more milk your breasts will make.
- Use the best pump that you can afford, preferably a high quality consumer or rental pump. There are many inexpensive pumps on the market that don't remove milk very well or quickly. You want your time and effort to count!
- Encourage your baby to get all of his suckling needs met at the breast. Avoid pacifiers and unnecessary supplements. If the baby has been getting more than two to three ounces of formula daily, reduce the amount gradually while you build up your milk supply.
- Compress your breast with one hand while nursing or pumping to get more milk out and stimulate milk production. Rotate your hand and feel for any firm, undrained areas to compress.
- Hand-expression after pumping will often get milk out that the pump cannot, further stimulating milk production.



- Get your rest. The milk-making hormone prolactin rises naturally when you sleep. Nursing while lying down may help you to get the rest you need.

- Eat lactogenic (milk supportive) foods and spices. Historically, most cultures have special foods for nursing mothers. While there is not a lot of scientific evidence yet, years of experience suggest that certain foods like barley and oatmeal, or cooking spices such as anise, dill, caraway, coriander and fennel, really can help some mothers. For more food ideas, read *Mother Food* by Hilary Jacobson or visit the MOBI Motherhood website: <http://www.mobimotherhood.org/MM/default.aspx>.

- Drink to thirst. More effective milk removal, not increased water consumed, stimulates milk production. As your breasts make more milk, however, you may find yourself becoming thirstier and needing more liquids.

- Is a medicinal herbal galactagogue right for you? There are some herbal preparations that have helped many mothers build a milk supply, including fenugreek. It is important to consult with your doctor before trying any medicinal galactagogue, as even an herb such as fenugreek that is listed in North America as a Generally Recognized As Safe (GRAS) can have serious side effects. Fenugreek is considered a GRAS spice herb, but when taken in larger quantities

it can occasionally cause loose stools and a maple syrup odor in urine and sweat. Mothers who have diabetes or low blood sugar should be especially cautious. There are a number of other good herbal galactagogues, as well. Check with someone with expertise in herbal preparations for suggestions. Your LLL Leader or lactation consultant may be able to provide some more information about specific herbs that you can share with your health care provider to decide what is best for you.

- You may want to discuss prescription galactagogue options with your health care provider. The availability and legality of prescribing and purchasing prescription galactagogues varies from one country to another.

- Acupuncture and chiropractic help are two therapies that have helped some mothers and babies. More information on these and other ideas can be found in *The Breastfeeding Mother's Guide to Making More Milk* by Diana West, IBCLC and Lisa Marasco, MA, IBCLC, available in the LLLI online store at store.llli.org.

- Knowing whether you are making as much milk as your baby needs requires a combination of knowing your baby, trusting your breasts to do their job, and trusting your instincts. If something doesn't seem right, contact your local LLL Leader. She can help you evaluate whether there is a problem and help you work through it if there is.

While other lactation experts and organizations suggest complementary and alternative treatments for a mother's consideration, it always is best to check first with your health care provider.