Lactation after loss



Experiencing the loss of a baby is life changing. The hours, days, and months following a stillbirth or newborn loss can be especially difficult. It is important to care for yourself despite your grief. Managing your breast milk will help you feel comfortable.

Throughout your pregnancy, your breasts grow and change to prepare to feed your baby. This may begin as early as 12 weeks of pregnancy. Even though your baby has died, your hormones continue to signal to your body to produce milk; initially your breasts will produce colostrum or early milk which is usually yellow in colour. Then, about 2 to 5 days after giving birth (unless you dry up your milk), your breasts will produce milk that looks bluish white and increases in volume.

This milk usually comes in after you have left the hospital. When your milk comes in, your breasts will feel very full, and the pressure in your breasts will become uncomfortable. Some bereaved parents find the presence of milk upsetting and want to dry it up as quickly as possible, while others find it to be a comforting reminder of their ability to care for the baby they so loved and wished for. There is no right or wrong way to feel and it is your choice whether to donate your milk or dry it up.

Donating Milk

"These are my white tears. Every drop I pumped in the hope that Jamie would be able to come home one day and I could feed her a long time. Since she is at rest in eternity, these tears can go on to bless other babies who need a fighting chance with the gentlest food source they can have. There is so much love put into this. This is in honour of her". ~ Sarah

Some people find that donating their baby's milk to a milk bank helps their grieving process. Donated milk may be life saving for other fragile and ill infants.

How to start

After you give birth, begin expressing milk by hand about every 2-3 hours during the day and at least once at night. Use a pump once your milk production moves beyond a few drops. Collect each milk expression in a separate container – either hospital containers or milk storage bags. If you need milk bags call the **Provincial Milk Bank at 604-875-3743**. Ask your nurse to show you how to use a breast pump.

If your milk supply is already established when your baby dies, continue pumping 6-8 times each 24 hours to maintain milk production. Expressing milk increases oxytocin levels in the early weeks which can help with your mood and decrease your risk for depression.

Screening for milk donation

All donors, including bereaved donors, are screened to ensure suitability for donation. You will be asked verbal and written questions and have some blood tests. Visit **bcwomens.ca** Provincial Milk Bank and complete the **Donor Expression of Interest** form. You can also ask for the form before you leave the hospital. Keep in mind that most medications given at the time of birth do not prevent you from donating milk but check with the Milk Bank before using any herbal remedies, over-the-counter medications or dietary supplements to find out if they are ok to use while donating milk. Once screening is completed, any amount of milk that you wish to donate is accepted with gratitude.

Delivering your milk to the milk bank

Once your screening is complete, the milk bank will call you to discuss where the closest drop-off depot is. If your milk is in storage at a BC hospital NICU, it can be sent directly to the milk bank by that hospital.

How to stop lactating or donating?

How long you continue to express and donate milk is up to you. Some people prefer to donate only once, others donate for a period of time. Once you decide to stop donating, you need to slowly reduce your milk production by decreasing the number of times you pump each day. To do this naturally, following the instructions in Drying Up Your Milk.

Drying up your milk

You may wish to dry up your milk supply. The most comfortable and low risk method is to allow your milk to dry up over a period of time.

Natural method

When your baby is stillborn, here are some suggestions:

- Wear a sports bra (stretchy material) to provide support. Binding your breasts is not recommended and is very uncomfortable as your breasts will get very full and often hard. Binding can also lead to a breast infection.
- Let the milk leak into your bra use breast pads to absorb the leaking milk. Change the pads once they become wet.
- If your breasts are very full, express only enough milk to be comfortable.
- Use warm or cold compresses for comfort. Cold reduces swelling of overly-full breasts
- Take pain medication such as ibuprofen
- Check your breasts for signs of infection (redness, tender areas) and call your healthcare provider if you develop flu-like symptoms
- Drink when you are thirsty; restricting fluids does not decrease milk production

If your baby dies after you have established a milk supply, you need to gradually decrease expressing or pumping until lactation ends on its own. This may take a week or so. Leaving milk in the breasts causes milk production to slow and eventually stop. Use these steps as a guide to reduce your pumping sessions:

1. Start by dropping one pumping session in the middle of the day

- 2. Continue to reduce the number of pumping sessions until you are only pumping once in the morning and once at night.
- 3. The evening pumping session is usually the last one you will stop.

If you have a lot of milk you may find that gradually shortening pumping sessions before dropping them will allow you to feel more comfortable and reduce pain in your breasts. Pay attention to how full your breasts are and pace your expressing or pumping so that you are comfortable.

Stopping milk expression abruptly is very uncomfortable and can lead to blocked ducts. If you have flu-like symptoms or reddened painful breasts, you may have a breast infection (mastitis), contact your healthcare provider to confirm and get help.

Using medication

Using medication especially in the first few days after birth, means you will not have to deal with ongoing milk production. Prescription medication used to dry up breast milk works by interfering with the production of prolactin, the hormone that causes milk production. Some mothers experience 'rebound lactation' or return of milk production after the initial drying up period. The medication, Cabergoline, is currently prescribed. Possible side effects from Cabergoline include nausea, vomiting, headache, dizziness, and nosebleeds. Talk to your healthcare provider for guidance about using medication to stop milk production.

Herbal remedies

Ingestion of herbs such as jasmine flowers, sage, peppermint, lemon balm, and oregano has been promoted to stop milk production. Unfortunately, reliable studies have not yet been done to determine whether they work, or in what dosage. There are also concerns about additional ingredients in certain supplements that may be harmful.

Talk with your healthcare provider about traditional remedies for stopping milk production and work together to make a plan that is best for you.