

# MAXIMIZING BREAST MILK AND SUPPORTING RELACTATION

## CARE OF ALL FAMILIES WHO ARE WISHING TO MAXIMIZE THEIR BREAST MILK AND/OR RELACTATE

- Have a sensitive conversation to establish goals and complete a breastfeeding history and assessment.
- Discuss realistic expectations. Maximizing milk production and relactation is easier in the first few months and if breastfeeding was well-established initially.
- Supplementation is essential for the baby's well-being while milk production is being increased or re-established.
- Revisit positioning and attachment.
- Maintain regular clinical assessments of the breastfeeding dyad.
- Monitor baby's stool/ urine output and weight.
- Explain importance of night feeds, keeping baby close, and the impact of pacifiers.
- The breastfeeding peer can be instrumental in providing emotional support during this time.

### BREASTFEEDING PARTIALLY (BP) WISHING TO RETURN TO FULL BREASTFEEDING (BE)

- Increasing production is possible and worth trying.
- Review reason for supplementation (e.g., clinical concern or mother's choice).
- Encourage skin-to-skin, body contact, body wearing, and nuzzling at the breast between feedings.
- Encourage frequent and responsive feeds with breast compression or switch nursing, 8-12 times/24hrs.
- Increase breast stimulation by encouraging breast massage, hand expression, and pumping with a multi-user breast pump 8-12 times/24hrs (power pumping may help).
- Gradually replace infant formula with expressed breast milk or breastfeeding.
- Discuss methods of supplementing (bottle, cup, spoon, supplementer system at the breast).
- If the mother has been giving small amounts of formula, it may be possible to revert to breastfeeding immediately. Let her know that her baby may feed more frequently.

### WISHING TO RELACTATE WHEN BREASTFEEDING HAS STOPPED (NPP)

- Relactation is generally possible and worth trying even if return to full breastfeeding is not always achievable.
- Review reasons breastfeeding was stopped and when (relactation is easier in the first few months, especially if breastfeeding was well-established initially).
- Encourage skin-to-skin, body contact, baby wearing, and nuzzling at the breast between feedings.
- Consider putting baby to breast or skin-to-skin while pumping.
- Increase breast stimulation by encouraging breast massage, hand expression, and pumping with a multi-user breast pump 8-12 times/24hrs (power pumping may help).
- If baby is interested, encourage frequent and responsive feeds with breast compression or switch nursing 8-12 times/24hrs.
- Discuss methods of supplementing (bottle, cup, spoon, supplementer system at the breast).

## RESOURCES

- [CDC: Supporting Families with Relactation](#)
- [Kellymom: Relactation and Induced Lactation Resources](#)
- [La Leche League International](#)
- [Maine WIC Relactation and Post-Partum Parents Training](#)
- [UNICEF: Maximizing Milk and Relactation Guidelines](#)
- Mohrbacher, Nancy. *BREASTFEEDING ANSWERS: A Guide for Helping Families*. Nancy Mohrbacher Solutions, Inc., 2020. Chapter 16: Relactation, Induced Lactation, Emergencies