Sore and Cracked Nipples

Some nipple tenderness is common in the early days of breastfeeding. With help, problems can be quickly overcome.

To help relieve sore nipples

• Feed your baby often. Avoid putting off feeds. Frequent feeding helps because the baby is less impatient at feed times and therefore sucks more gently.

Before feeds:

• Make yourself comfortable and relax. Breathe deeply.
• Massage breasts gently.
• Apply heat — warm shower, warm face washer.
• Express some milk to soften the areola (the darker skin around the nipple), to get the milk flowing and to lubricate the nipple.

If pain is making it hard to relax, ask your medical adviser for help.

During feeds:

• Offer less sore side first.
• Make sure baby is properly positioned at the breast — chest to chest, chin to breast (see Fact Sheet Putting Your Baby to the Breast). Incorrect positioning and attachment are the most common causes of nipple soreness.
• Limit comfort sucking while nipples are tender.

Gently break suction with clean finger before removing baby from the breast.

After feeds:

• Check nipples after each feed.
• Express a few drops of milk and smear on the nipple and areola.
• Keep nipples dry — expose them to air till dry and change nursing pads frequently.
• Use nipple protectors to stop clothes rubbing your sore nipples and allow air to circulate.

To prevent sore nipples

• Avoid anything drying or damaging on nipples (eg methylated spirits, soap, shampoo, harsh towels, toothbrushes).
• Wear correctly fitted bras and do not use nursing pads that hold moisture against your skin.
Fact Sheet *Sore and Cracked Nipples*  

- Use breast pumps correctly.
- Use nipple shields only with assistance from a lactation consultant or breastfeeding counsellor.

See your medical adviser if your nipples remain sore.

**To help relieve cracked nipples**
- Find the cause — incorrect attachment, an infection or damage from breast pumps.
- Follow the suggestions for sore nipples. Pay special attention to correct positioning and attachment. Allow air to circulate around nipples after feeds.
- If feeding is too painful, take baby off the breast temporarily to rest the nipple and allow healing to occur.
- Express by hand or with a suitable breast pump (see Fact Sheet *Expressing Breastmilk*).
- Feed expressed milk to your baby.
- Start feeding again gradually.
- See your medical adviser if healing is slow or you need pain relief.
- Discuss the use of a nipple shield with hospital staff, a lactation consultant, child health nurse or Australian Breastfeeding Association counsellor.
- Ask hospital staff, child health nurse or ABA counsellor for further help.

**REMEMBER:** BREASTFEEDING SHOULD NOT HURT. IF IT DOES, ASK FOR HELP!

**Further Reading**
- Fact Sheet *Putting Your Baby to the Breast*
- Fact Sheet *Expressing Breastmilk*

For more information contact your Child Health Centre or the Australian Breastfeeding Association (ABA).

![Breastfeeding Helpline](image)

The ABA Breastfeeding Helpline is available 7 days a week and is staffed by trained volunteer breastfeeding counsellors.

If you need help making phone calls in English, ring the Translating and Interpreting Service (TIS) on 131 450.

Email counselling and more information is available at [www.breastfeeding.asn.au](http://www.breastfeeding.asn.au)