Frequent stimulation of the breasts, by breastfeeding or by using a breast pump, during the first few days and weeks, are essential to establish an abundant breastmilk supply. If you find your milk supply is low, try the following recommendations. If you are consistent you will likely see an improvement within a few days. Although it may take a month or more to bring your supply up to meet your baby’s needs, you will see steady, gradual improvement. You will be glad that you put the time and effort into breastfeeding, and so will your baby!!

More breast stimulation

- Breastfeed more often, at least 8-12 times per 24 hours
- Discontinue the use of a pacifier
- Try to get in “one more feeding” before you go to sleep, even if you have to wake the baby
- Offer both breasts at each feeding
- “Burp & Switch”, using each breast twice or three times, and using different positions
- “Top up feeds” Give a short feeding in 10-20 minutes if baby seems hungry
- Empty your breasts well by massaging while the baby is feeding
- Assure the baby is completely emptying your breasts at each feeding.

Avoid these things that are known to reduce breastmilk supply

- Smoking
- Caffeine
- Birth control pills and injections
- Decongestants, antihistamines
- Severe weight loss diets
- Mints, parsley, sage (excessive amounts)

Use a breast pump

- Use a hospital grade breast pump with a double kit
- Pump after feedings or between feedings
- Rest 10-15 minutes prior to pumping, eat and drink something
- Apply warmth to your breasts and massage before beginning to pump
- Try “power pumping”. Pump for 15 minutes every hour for a day. Or try pumping 10 minutes, resting 10 minutes, pumping 10 minutes and so on, for an hour.

Condition your let-down reflex

- Play relaxing music
- Imagine your baby, look at pictures of your baby, smell baby clothing or baby powder
- Always pump in the same quiet, relaxed place, set up a routine
- Do slow, deep, relaxed breathing, relax your shoulders

Mother care

- Reduce stress and activity, get help
- Increase fluid intake
- Eat nutritious meals, continue to take prenatal vitamins
- Back rubs stimulate nerves that serve the breasts (central part of the spine)
- Increase skin-to-skin holding time with your baby, relax together
- Take a warm, bath, read, meditate, and empty your mind of tasks that need to be done
**Herbs, foods and medications**

- Eat a bowl of cooked oatmeal daily
- Brewer’s yeast 3 T daily, increase by ½ teaspoon daily until results are seen (or equivalent in capsules)
- Fenugreek preparations help many women increase supply. Doses of 3-5 capsules (580-610 mg), three times per day are commonly recommended. Discuss this with your physician. *Avoid fenugreek if you are diabetic, hypoglycemic, asthmatic or allergic to peanuts or other legumes.*
- Fenugreek is available at most vitamin shops or health food stores. Taken as directed, it may cause a faint maple body odor. That is to be expected and means that the herb is doing it’s job. To read more about fenugreek, go to [http://www.breastfeeding.com/all_about/all_about_fenugreek.html](http://www.breastfeeding.com/all_about/all_about_fenugreek.html)
- Blessed thistle or other herbs or beverages such as Mother’s Milk Tea taken as directed on package. A reliable source of herbs and herbal blends is MotherLove Herbals and Gaia Herbs.
- Lactation cookies. By searching the internet and you will find sources for packaged cookies and recipes to make your own.
- Prescription medications sometimes help increase milk supply. Metoclopramide (Reglan) has been used with limited success. Domperidone has been used with more success but is not available in the United States. Discuss the use of prescription medications with your MD.

**Keep records**

- It is important to keep a daily log with the number pumping sessions, amount obtained, amount you are having to supplement your baby and 24 hour totals - this amount is more important than the pumped amount at each session. This will help you see your progress over the days.
- Keep in touch with your health care provider so he can monitor your progress and modify your advice is necessary.

**Retained placenta**

- If you are not seeing improvement and you are still having vaginal bleeding after 2 weeks, discuss the possibility of retained placental fragments with your MD. Small bits of the placenta can secrete enough hormones to prevent the milk from coming in.

**Low thyroid**

- Have your physician check your thyroid levels. Low thyroid can affect milk supply. If you have been taking thyroid, have your levels rechecked after delivery. You may need your thyroid medication adjusted.

**If supplementation is recommended**

- Determine the amount needed with your MD
- Pump after the feeding
- Offer the supplement in a way that won’t interfere with breastfeeding
- First choice method is using a tube or syringe at the breast
- Second choice is a cup, spoon
- Third choice is paced bottle feeding
- Wean your baby off the supplements gradually to challenge your breasts to make more milk

**Other resources**