

Abundant Milk Supply and Fast Letdown



Abundant Milk Supply

Ideally, exclusive breastfeeding results in your milk supply equaling your baby's demand over the course of a week or two. However, some moms can't produce enough milk, while for other moms, milk production becomes excessive. Moms who produce too much milk might switch back and forth between breasts, based on time, not realizing this may excessively increase their milk supply. In response, the mom tries to relieve the fullness by pumping, which increases the supply even more.

At first, you may be pleased to have so much milk, but if the situation isn't managed properly, it can become a problem.

- If you produce more milk than your baby needs, baby may consume too much foremilk and not enough hindmilk. Foremilk is low in fat (skim), so it passes through the stomach quickly and dumps into the intestine. It's also high in lactose (milk sugar) which makes it hard to digest. Too much lactose may cause gassiness, fussiness and mucus-like and/or explosive green, watery stools. Baby may also act hungry all the time. This is because the foremilk is less filling, due to lower fat content.
- It's important for your baby to get some hindmilk. The hindmilk that's behind the foremilk is higher in fat and calories and can help your baby feel full longer.

How to Prevent Abundant Milk Supply Issues

- For the first one to two days, before your milk comes in, nurse from both breasts equally, for as long as baby desires. This will stimulate the hormones needed for the milk to "come in."
- When your milk starts coming in, your baby may cluster feed (feed very often over a period of hours), which helps the milk supply come in and helps prevent engorgement.
- Once your milk is in, emptying the breasts tells the milk cells to make more milk for the next feeding. It now becomes important to empty the first breast before switching to the second.

Watch the Baby, Not the Clock

- Don't use timed feedings. With timed feedings, your baby may not get a balance of hindmilk and foremilk but gets more foremilk when you switch to the second breast. It's better for your baby to stay on the first breast until you can no longer hear or see swallowing, and your breast feels softer.
- Sometimes a baby feeds from only one breast and other times will feed from both.
- If baby feeds from only one breast per session, don't pump the other breast. Leave the milk for the next feeding. Pumping it will put more demand on the breast than what baby needs, and milk production will increase.
- Babies can take anywhere from 5 to 25 minutes to feed on the first breast. If your baby appears to still be hungry, offer the second breast, which could take another 5 to 25 minutes. As breastfeeding progresses, your baby may spend less time feeding.
- If you get engorged, pumping for a few minutes to relieve some pressure may be helpful. Be careful not to stimulate more milk production.

Fast Let Down

Let down is a natural reaction that happens when your baby begins to suck. Some moms have a fast let down, where milk comes out forcefully and quickly. An overactive milk let down may be part of an abundant supply problem but may also be a problem for some moms who don't overproduce. If there's a lot of milk under pressure, it flows out faster than baby can swallow. Some problems your baby may have with fast let down are:

- Gulping, coughing and choking at the breast, which can lead to swallowing more air
- Coming off the breast, backing away, getting sprayed with milk
- Re-latching repeatedly
- Impatient with slower flow
- Fussy at the breast and may even start refusing to feed

To help this problem:

- Lean back while nursing so milk has to flow "uphill" against gravity.
- Nurse from a seated position.
- Catch the first letdown of milk in a towel or container. This milk can be stored and used at another time.
- If you need additional support, contact a lactation consultant.

Breastfeeding Helplines:

- **Mease Countryside Hospital:**
(727) 725-6821
- **Morton Plant Hospital:**
(727) 462-7749
- **St. Joseph's Women's Hospital:**
(813) 872-3932
- **St. Joseph's Hospital-North:**
(813) 443-7350
- **St. Joseph's Hospital-South:**
(813) 302-8338
- **South Florida Baptist Hospital:**
(813) 757-8343
- **Winter Haven Women's Hospital:**
(863) 294-7068

