

Milk Blisters/Blebs

A nipple bleb, sometimes referred to as milk blister, is a raised white or yellow spot that forms anywhere on the surface of the nipple. A bleb is formed when milk stagnates and clogs inside the milk duct just behind the nipple pore on the surface of the nipple. This is often due to a suboptimal latch. Sometimes a bleb is associated with a blocked duct somewhere in the breast. **If the bleb is not causing any pain, generally it should be left alone.** If the bleb is painful, or if you have a bleb along with a blocked duct, the following strategies will help to release and resolve the bleb. For more information about blocked ducts, see the information sheet “Blocked Ducts and Mastitis” at www.ibconline.ca.

Sometimes a blister filled with clear fluid will form on the nipple – this is usually due to a suboptimal latch. If you have a blister, but not a bleb, follow the directions in #4 (below) to help it resolve.

1. Apply the All Purpose Nipple Ointment (APNO) sparingly after each feeding. APNO with ibuprofen powder mixed in can help to further ease the pain associated with nipple blebs.
2. Apply a warm, wet compress (like a washcloth soaked in clear, warm water) to the nipple before nursing your baby. Keep the compress as warm as you can tolerate without burning the skin. Massage the nipple with coconut oil to try to remove the skin surrounding the blocked pore and then, if possible, nurse your baby. There is no need to remove the coconut oil unless it’s causing baby to slip while trying to latch. If the bleb is not released after nursing, use a warm, damp washcloth and gently rub the bleb to try and release its contents.
3. Some breastfeeding parents report success by soaking the affected nipple in a basin of warm saline solution. The solution should be as warm as tolerated, without burning the skin. Once or twice a day, soak the nipple for five minutes and then try to release the bleb by rubbing the nipple gently with a washcloth. After rinsing the area with clear water, you can also nurse your baby.

To make the solution add $\frac{1}{4}$ to $\frac{1}{2}$ teaspoon of plain salt (fine grain, non-iodized, sea salt is best) to 1 cup (250 mL) of warm water and mix until the salt dissolves. If the solution stings then reduce the amount of salt used.

A mess free way to soak the nipple is by using a shot glass. Fill it almost full with the solution, lean over and place the nipple into the glass. Then, grasp the glass, push it onto the breast and stand up. The glass will be sealed on!

4. Medihoney Wound Gel is a medically prepared honey ointment for the treatment of skin conditions and skin damage. Medihoney promotes the removal of dead tissue by drawing fluid from deeper tissue to the wound surface. It can be used safely on the nipple bleb to try to release the clogged pore without having to wipe off prior to feeding your baby.

After nursing your baby, and if the bleb is large enough, lift the edges with a sterile needle (see #5) and apply Medihoney. If the nipple bleb is not large enough to lift the edges, or if you have a

fluid-filled blister, apply Medihoney to the affected area after each feed. For some the Medihoney honey dressings (verses the wound gel) may be preferred. For more information about Medihoney visit <http://www.dermasciences.com/medihoney>.

5. A sterile needle could be used to gently lift the edges of the bleb, if it is large enough. This is best done at the clinic by a health care provider in order to avoid infection. If done at home make sure to sterilize the needle by flaming it (let it cool before using it) and then apply the APNO afterward.

After lifting the edges of the bleb, try squeezing just behind the area – you might be able to squeeze out some thickened or dry milk. Nursing the baby can also help to clear the bleb.

Questions or concerns? Email Dr. Jack Newman by visiting our website www.ibconline.ca. Click on “Ask a Question” in the drop-down menu under “Info and Videos”.

To make an appointment with our clinic go to www.ibconline.ca, click on “Book an Appointment” in the drop-down menu under “Appointments”.

The information presented here is general and not a substitute for personalized treatment from an International Board Certified Lactation Consultant (IBCLC) or other qualified medical professionals.

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