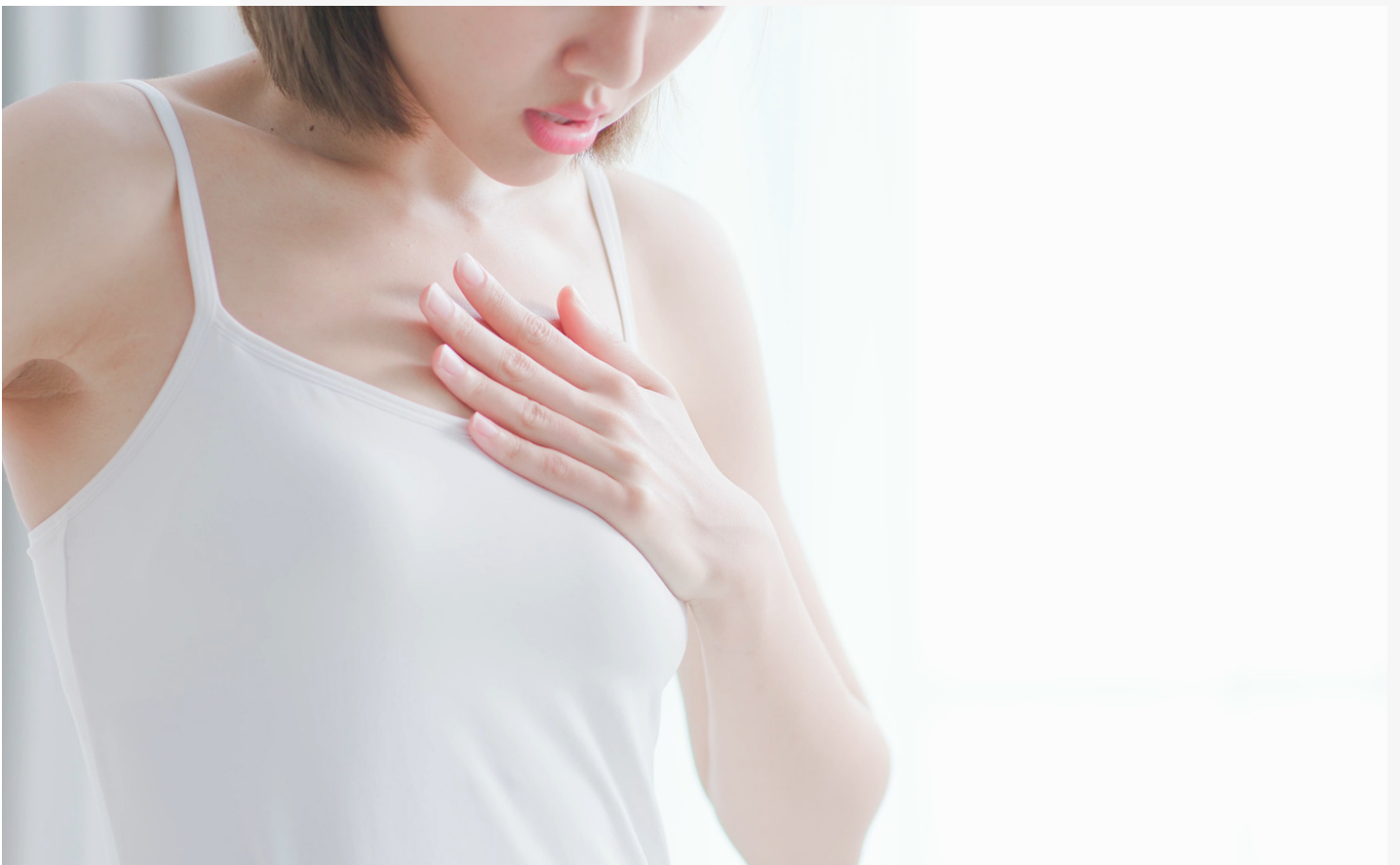


NOURISH LACTATION

VASOSPASM

INFORMATION PACKAGE



NICOLE WYBORN
IBCLC

WHAT IS VASOSPASM?

Vasospasm is a blanching or whiteing of the nipple after a breastfeed.

This occurs due to reduced or no blood supply to the area.

There is usually a burning or shooting like pain that occurs which varies in severity.

The colour changes to the nipple appear as:

White

- Limited blood flow

Blue

- Limited oxygen

Red

-Nipple reperfusion (return of blood flow)

WHAT CAUSES VASOSPASM?

NIPPLE COMPRESSION

NIPPLE TRAUMA

RAYNAUD'S PHENOMENON

CAUSES OF NIPPLE COMPRESSION:

- SHALLOW ATTACHMENT
- POOR SUCK
- TONGUE TIE
- CLAMPING DOWN OF THE BABY'S MOUTH DUE TO OVERSUPPLY AND FAST LETDOWN
- STRONG CLAMP DOWN REFLEX
- STRUCTURAL ISSUES WITH THE BABY'S MOUTH
- INCORRECT NIPPLE SHIELD USE

The nipple can appear ridged, creased or a white stripe may appear as the baby detaches from the breast.

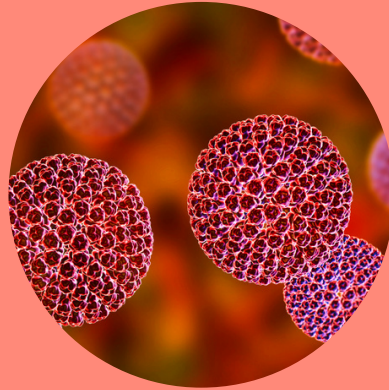
The pain may start after the breastfeed as the blood circulation begins to circulate to the nipple again.

On occasion women may not experience any pain.

The main reason for compression vasospasm is shallow attachment. This is resolved by correcting to a deep attachment and addressing the other underlying causes.



INCORRECT
POSITION



INFECTION



RAYNAUDS
PHENOMENON

NIPPLE TRAUMA

This type of vasospasm is more intense than compression vasospasm.

The pain is acute and can occur after and in between breastfeeds due to the sudden constriction of blood circulation in the nipple.

This is a secondary response to the nipple trauma or infection (e.g. thrush).

Your baby may have correct position and attachment, but the underlying cause is trauma or infection and sometimes both.

The aim is to correct the infection and heal the nipple trauma.

RAYNAUD'S PHENOMENON

Is a phenomenon that both men and women can experience, but more common in women with a ratio of 9 : 1.

It effects the blood vessels by constriction and typically is seen by a white colour in the hands and feet and a sensitivity to cold temperatures.

It is also associated with migraine headaches.

This impacts breastfeeding by causing the blood vessels in the nipple to constrict.

It can cause sharp, shooting, burning pain and usually occurs in both nipples. Conversely, vasospasm from compression or trauma can occur in one nipple only.

This is not caused by breastfeeding but is a pre existing condition.

There is association of Raynaud's phenomenon with the following medial issues and medication:

- oral contraceptive pill containing oestrogen
- rheumatoid diseases
- endocrine diseases such as hypothyroidism
- prior breast surgery

NOTE - Vasospasm can be confused with nipple thrush due to the similar pain experinced.

**RAYNAUD'S PHENOMENON
AFFECTS 20-30% OF WOMEN**

LACTATION CONSULTATION

During a consultation we assess:

- breast tissue, size, shape, areola, and nipple
- baby's head, mouth, palate, and tongue
- comprehensive medical and family history
- fertility, pregnancy, and birth history
- observation of current feeding position and attachment
- education and guidance for optimum positioning and attachment
- diagnosing between types of vasospasm and differentiation between this and thrush
- planning for ongoing breastfeeding and treatment
- support as this heals and troubleshooting if different issues arise.

TREATMENT

AFTER ASSESSMENT AND DIAGNOSIS WITH A LACTATION CONSULTANT YOU MAY BE ADVISED TO:

AVOID COLD TO THE BREAST

KEEP THE BREASTS WARM

OPTIMUM POSITION AND ATTACHMENT

SUCKING AND MOUTH EXERCISES

REST/EXPRESS FOR NIPPLE HEALING OR PAIN

CORRECT USE AND SIZE OF NIPPLE SHIELD AND WEANING BACK TO BREAST

COVER THE NIPPLE AS SOON AS BABY COMES OFF THE BREAST

MASSAGE OLIVE OIL TO THE NIPPLE

NO CAFFEINE - EG COFFEE, TEA, SOFT DRINKS

DIET SUPPLEMENTATION WITH CALCIUM, MAGNESIUM, B6 AND NIACIN

FISH OIL SUPPLEMENTATION

SEEK MEDICAL ADVICE FOR:

- INFECTION
- ACUTE RAYNAUD'S PHENOMENON
- STRUCTURAL ISSUES WITH BABY'S MOUTH



MEDICATION

ANY MEDICATION TREATMENT IS TO BE DONE IN CONSULTATION WITH A MEDICAL DOCTOR.

There are medications for severe cases of vasospasm that can dilate the blood vessels - this is called nifipidine.

It is only available on prescription and taken under medical supervision.

Medications to avoid are:

- the oral contraceptive pill that contain oestrogen - this would be unusual to take during breastfeeding as it can lower breastmilk supply.
- cold and flu tablets and other vasoconstrictive drugs.

DO NOT discontinue any medication without medical advice.

CHECKLIST

Do I experience cold and white hands and feet when I am not pregnant?

Do I have nipple sensitivity when I am not pregnant and breastfeeding?

Am I latching my baby with optimum position and deep attachment?

When my baby detaches is there a white patch over the nipple?

Do I have shooting and burning pain upon baby detaching and/or in-between breastfeeding?

Does my baby have a tongue tie?

Am I using a nipple shield?

Have I had a nipple infection or damage?

Do I have an oversupply and my baby clamps down?

Does my baby have structural mouth issues?

Do I drink more than one or two cups of tea/coffee or caffeinated drinks per day?

This information package is designed for education - for individual cause and treatment

please see a qualified health professional

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Lawrence, R.A., Lawrence, R.M. (2016). Breastfeeding a guide for the medical profession (8thEd). Elsevier: United States of America

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