Reasons for relactation may include medical conditions, changes in work or homelife, disappointment in early weaning, if you can’t find formula, or baby tummy troubles. Rebuilding milk production which has decreased or dried up after weeks or months of not breastfeeding is relactation. It is important to have support while relactating. Your WIC Breastfeeding Peer Counselor (BFPC) and WIC Designated Breastfeeding Expert (DBE) can help.

**Why Do You Want To Relactate?**

Relactation is challenging but doable. Reestablishing milk supply for a younger baby is usually faster. It is easier to relactate for someone who breastfed some and decided to stop than for someone who had low milk production or never started. Talk to your WIC BFPC or DBE to learn more.

**Is It Too Late?**

- Mothers with babies under 3 months old have the fastest results, but older babies can be successful too.
- Babies who have previously breastfed are more willing to return to the breast.

**How Long Will It Take?**

Commit at least 2 weeks of latching baby and/or pumping every 2-3 hours. Expect a few drops in the beginning and a slow increase.

**Changes Moms May Experience During Relactation:**

Breasts may become more full and tender and areolas may get darker. You may experience mood changes due to hormones as well as changes in your menstrual (period) cycle.

FOR MORE INFORMATION
888.942.3663

**Will I Be Able To Make Enough Milk?**

How much milk you produce will depend upon several things:

- Frequency of milk removal
- How happy baby is feeding at the breast
- How well the baby is removing milk
- How often the breast is stimulated

Frequent use of an effective pump can help too. Each person’s response to breast stimulation is unique, so the time needed breastfeeding or expressing milk will vary. Ask about WIC breast pumps!

**Frequent removal + Effective stimulation = More Milk**

**Important Information To Track:**

1. Keep track of how often and how long the baby breastfeeds.
2. Track the amount of formula or expressed breast milk being offered and how it was given.
3. Track wet diapers. Baby should have at least six heavy wet diapers in 24 hours.
4. Track baby’s bowel movements. These get softer, lighter color, and have less odor as the amount of breast milk increases.
5. Have weekly weight and growth checks. You can do this at your WIC clinic or Pediatrician office.
How Should I Start?

There are as many ways to relactate as there are mothers relactating. Here are two examples:

Example A is the most time consuming, but most likely to result in more milk more quickly:

1. Pump eight times a day on both breasts for 15–20 minutes using hands-on pumping techniques. (Visit firstdroplets.com for more information)
2. Hand express before pumping for three to five minutes.
3. Spend some time every day cuddling your baby skin to skin (the amount of time should be what you find enjoyable rather than a certain number of minutes).
4. Offer to latch your baby, as a playful or relaxing activity with no pressure.

A TYPICAL SCHEDULE MIGHT LOOK LIKE THIS:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 a.m.</td>
<td>Pump 15-20 minutes</td>
</tr>
<tr>
<td>8:00 p.m.</td>
<td>Pump 15-20 minutes</td>
</tr>
<tr>
<td>11:00 a.m.</td>
<td>Pump 15-20 minutes</td>
</tr>
<tr>
<td>2:00 p.m.</td>
<td>Pump 15-20 minutes</td>
</tr>
<tr>
<td>5:00 p.m.</td>
<td>Pump 15-20 minutes</td>
</tr>
<tr>
<td>11 p.m.</td>
<td>Pump 15-20 minutes, then go to sleep.</td>
</tr>
</tbody>
</table>

Have a friend or family member give the baby the 11 p.m. bottle while the mother sleeps for the next five hours.

4:00 a.m. to 5:00 a.m.: Pump while someone else gives the baby a bottle.

Example B is easier to work into your regular schedule, but you are likely to produce less milk and it may take longer. Doing some or all of the following should result in milk production:

1. Pump for an hour, or two thirty-minute sessions, whenever you have time during the day, using hands-on pumping techniques.
2. Do not wake up at night specifically to pump, but if you’re up anyway, do some pumping before going back to bed.
3. Hand express whenever you can, such as in the shower; even if you’re not able to collect the milk, you’re sending the signal to the “milk factory” to increase production.
4. Keep your pump within reach to use for when you have 5–10 minutes but not enough time for a full pumping session.
5. Do a full pumping session (15–20 minutes) when you can, as opposed to doing it on a schedule.

Latch your baby as much as she’s willing, and use your pump when you can. If your baby will latch reliably, “parallel pumping” is more efficient than nursing followed by pumping. (Parallel pumping is pumping one side while baby is feeding on the other side.)

FOR MORE INFORMATION

888.942.3663

VAVIC.COM/BREASTFEEDING

This institution is an equal opportunity provider.
What About Bottles And Pacifiers?
Some babies switch to the breast easily, while others need lots of encouragement. Bring the baby to breast for comfort often rather than use a pacifier between feedings to increase breast stimulation and reorient the baby to feeding on the chest.

Practice feeding with a cup and/or paced bottle feeding. (Ask a WIC breastfeeding support person for help.) Liquid flows from a bottle quickly and takes little effort by the baby, if bottle feeding, use slow flow nipples.

Will Herbs Or Foods Help Increase Milk Production?
There are many herbs and foods that some cultures have traditionally used to increase milk production such as oats, fennel, and brewer’s yeast. There is no scientific evidence that these work but there may be a placebo effect. Placebo effect is real, and may help even if you are aware it is a placebo. Do not use Fenugreek, it can have dangerous side effects such as low blood sugar, painful intestinal cramping for both mom and baby, and can reduce milk supply.

What Are My Chances Of Success?
The answer to this question depends on how you define success. We define success as satisfaction with the amount of milk produced without adverse effects on the mother. Most mothers who attempt relactation do produce milk, sometimes a little and sometimes a lot. It is not possible to predict how much an individual mother will produce. You won’t know unless you try.

Factors Associated With Relactation Success Are:
- Shorter time since lactation stopped
- Full milk supply prior to stopping breastfeeding
- Support from family and health care providers
- Infant age (it’s easier with a younger infant)
- Age and health of the mother
- Commitment to the process

When trying to relactate, it is important to cultivate an attitude of acceptance of whatever amount of milk you end up producing. Remember—your worth as a mother is not based on how much milk you make; it is based on your caring and love for your baby.

Ways to encourage baby to take the breast - offer feedings:
- When the baby is not too hungry or too sleepy
- When the baby is asleep or relaxed
- With frequent skin-to-skin contact
- While walking
- In the bathtub
- In a darkened room
- Without distractions for mother and baby
- While swaying (sitting, walking, or standing)
- While soothing music is playing
- In a sling with skin-to-skin contact
- Apply milk to the nipple and areola to encourage latch. (Internet search drip drop breastfeeding and ask a WIC breastfeeding staff for help).
- Supplement at the breast. (Ask a WIC breastfeeding support person for more information).
- Be patient.