

Maternal Risk Factors for Lactation Problems

History/social factors

- Primiparity
- Early intention to both breastfeed and bottle- or formula-feed
- Early intention to use pacifiers and/or artificial nipples
- Early intention/necessity to return to work or school
- History of previous breastfeeding problems or breastfed infant with slow weight gain
- History of infertility
- Significant medical problems (eg, untreated hypothyroidism, diabetes, cystic fibrosis)
- Maternal age (eg, adolescent mother or advanced age)
- Psychosocial problems (eg, depression, poor or negative support of breastfeeding)
- Perinatal complications (eg, hemorrhage, hypertension, infection)
- Intended use of any hormonal contraceptives before breastfeeding is well-established
- Perceived inadequate milk supply
- Maternal medication use (inappropriate advice about compatibility with breastfeeding is common)

Anatomic/physiologic factors

- Lack of noticeable breast enlargement during pregnancy
- Flat or inverted nipples
- Variation in breast appearance (marked asymmetry, hypoplastic, tubular)
- Any previous breast surgery, including plastics procedures
- Previous breast abscess
- Maternal obesity (body mass index >29)
- Extremely or persistently sore nipples
- Failure of lactogenesis stage 2 (Milk did not noticeably “come in.” This may be difficult to evaluate prior to discharge that occurs in first 24-48 hours.)
- Mother unable to hand-express colostrum
- Discharge from hospital using a nipple shield or any other “appliance”
- Anatomic mismatch: large nipple with a small baby