



This fact sheet is designed to help you understand nipple vasospasm and to help you manage your symptoms. If you have further questions or you feel you are not managing the pain you can contact the services listed for further information or support.

What is vasospasm?

Vasospasm occurs when blood vessels constrict (or tighten). Vasospasm may occur in any blood vessels in the body such as in the heart, brain or eyes. The fingers are most commonly affected. Some people notice that the ends of their fingers turn white in cold situations; also known as Raynaud's phenomenon, where fingers have a tendency to turn white in cold weather. Less commonly, blood vessels in the nipples are affected, causing pain during, immediately after, or between breastfeeds.

Who is likely to have vasospasm?

- Women with a family history of Raynaud's phenomenon.
- Women who tend to have cold fingers or feet or have "poor circulation".
- Women with a low body mass index (i.e. thin people).

What do you notice when you have nipple vasospasm?

- You may feel an intense nipple pain, which is worse when you are cold (or in a cold situation). Some women describe the pain as a burning and throbbing pain.
- You may notice the nipple or the tip of the nipple blanches or turns white.
- You may notice other colour changes of the nipple. The nipples may turn blue or purple or red before returning to their normal colour.

How long does nipple vasospasm last?

You may notice the signs and symptoms for a few seconds, minutes or even longer.

How severe is nipple vasospasm?

Nipple vasospasm pain ranges from minor discomfort to severe pain. Some women may feel that the pain is so severe that they are unable to continue breastfeeding.

How can you manage nipple vasospasm?

Avoiding or reducing known triggers will help reduce nipple vasospasm.

Triggers that may cause an episode of nipple vasospasm include:

- poor attachment to the breast (seek advice from your midwife or lactation consultant)
- nipple damage (e.g. cracked nipple) or an infection (e.g. nipple thrush)
- exposing your nipples to cold air
- some medications or chemicals may worsen nipple spasm, e.g. nicotine (smoking cigarettes).

How can you reduce the severity of episodes?

- Keep your nipples warm – this may help to relieve pain immediately.
- Wear an extra layer of clothing.
- Apply warmth to the nipple, such as a warm pack.
- Use “breast warmers”, e.g. Flectalon (available from the Australian Breastfeeding Association).
- Use large breast pads which will help keep your nipple warmer (available from the Australian Breastfeeding Association).
- Avoid cold exposure (or sudden temperature changes).
- Do not “air” your nipples.
- Warm your bathroom before undressing for showers, etc.

If the pain continues, you may consider taking supplements or medication.

Supplements include:

- fish oil capsules (containing essential fatty acids) or evening primrose oil (gamma linoleic) may improve blood vessel relaxation
- magnesium tablets help to relax the blood vessels (1-2 x 300mg tablets daily)
- medication: prescription medication may be appropriate. Contact a lactation consultant or medical professional for more advice.

For more information and advice

Your local Maternal & Child Health Nurse

Australian Breastfeeding Association

Tel: 1800 686 268 – Breastfeeding Helpline

Web: www.breastfeeding.asn.au

Maternal & Child Health Line (24 hours)

Tel: 13 22 29

For women in Victoria

Breastfeeding Service

Royal Women’s Hospital

Tel: (03) 8345 2400

Women’s Health Information Centre

Royal Women’s Hospital

Tel: (03) 8345 3045 or 1800 442 007 (rural callers)

Email: whic@thewomens.org.au

Reference

Anderson, J. E., Held, N. and Wright, K. (2004).

Raynaud’s phenomenon of the nipple: a treatable cause of painful breastfeeding. *Pediatrics* 113(4): e360-364.