

CONTROLLING OVERSUPPLY | HYPERLACTATION

IS THIS A PROBLEM?

It can be! An oversupply can be normal, especially in the first 1-2 months after birth while your body learns how much milk your baby needs. Hyperlactation is the term used when an oversupply causes issues for the baby and/or the parent. Hyperlactation can happen because of extra milk stimulation (pumping) or other health issues. Its symptoms overlap with other diagnoses, so it should not be overlooked.

BABY

- Weight gain
 - Irregular, may be too high or even too low
- Upset stomach or digestion
 - Spitting up, explosive poops, gassiness
- Temperament
 - Fussy during & after feeds

PARENT

- Nipple concerns
 - Pain, damage, blisters or blebs
- Breast concerns
 - Repeat mastitis, frequent swelling or engorgement, pain, and/or abscess

FEEDING CHALLENGES

- Shallow latch, frequent and short feeds, refusing to latch, coughing/sputtering while feeding

-POSSIBLE SYMPTOMS-

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THINGS TO REMEMBER WITH OVERSUPPLY

1. Postpartum stage matters

- **0-6 weeks:** Oversupply can be normal and exclusively breast/chestfed babies start drinking their maximum daily milk volumes in this time.
- **6+ weeks:** If you still have too much, you may need to actively and carefully bring down oversupply because now we have a good idea of your baby's milk needs.

2. Feed the baby, not the freezer

- Extra pumping tells your body to make more milk. It makes oversupply worse.

3. Check in often

- If you are bringing down your milk supply, check your baby's weight every 1-3 weeks on an infant-sensitive scale, like at a health unit, until your supply is stable.
- Follow up with trained help who know how to guide oversupply, see "Questions" below.

HOW DO I MANAGE AN OVERSUPPLY?

ANY TIME, INCLUDING FIRST 6 WEEKS

Managing discomfort & full breasts

See [our handout on Engorgement](#) for suggestions.

Lean back a little or a lot

Babies are better at latching & swallowing when laying on their stomach. Leaning back may slow your milk flow.

Reduce/stop unnecessary pumping

If you are engorged, do not pump off milk to help with latching. See [our engorgement handout](#) for tips, like using reverse pressure softening. If the engorgement advice is not enough, hand express or pump for 1-2 minutes at a time, just until you are comfortable. Do not use silicone pumps, especially during feeds.

Follow your baby's cues

If you have oversupply and your baby has regained their birth weight, follow your baby's hunger cues to see if they finish a feed on 1 side or if they need to feed on both sides. Check their weight every 1 to 3 weeks. Continue to count their daily pees and poos.

OVER 6 WEEKS POSTPARTUM

Consider a trial of block feeding for 3-5 days

With block feeding, your baby can feed as often as they want but you offer the same side for 3-5 hours at a time. Watch your baby's daily pees and poos. After this, switch to let baby guide their feedings.

Herbs or medications that can bring down production

These options, (like a combined oral contraception), should be discussed with your doctor/a prescribing provider to ensure they are ok for your use.

Questions?

Depending on your concern, you can:

- See an IBCLC® lactation consultant
- Check out a peer-support group (like LLLC.ca)
- Go to HealthyParentsHealthyChildren.ca
- Visit your doctor or primary care provider
- Call 811



This handout was created by the Department of Family Medicine and is provided as an educational tool. It is not intended to replace medical advice. Always consult a healthcare provider for any questions about your health. For breastfeeding or lactation, this may include an International Board-Certified Lactation Consultant® (IBCLC®).