MODERN MILK

Clogged Ducts & Mastitis

What to do right now.

The 2026 protocol · Mama's Milk Mastery

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Clogged Ducts and Mastitis

What to do right now. Print this one — you will want it at 2am, not in a video.

If you have read anything else about this online, it is probably out of date

The guidance changed in 2022, when the Academy of Breastfeeding Medicine published a full revision of its protocol. Almost everything published before then — and a great deal published since — still says heat, massage, and empty the breast. **All three now appear on the list of things that make it worse.**

It is one spectrum, not two conditions

A clogged duct and mastitis used to be taught as separate problems. They're now understood as one continuum, and where you are on it determines what you do.

STAGE	WHAT IT FEELS LIKE	WHAT IT MEANS
Ductal narrowing	Firm, tender area; often a lump; no fever	Inflammation is narrowing the duct. Not a solid plug of milk.
Inflammatory mastitis	Red, hot, painful wedge; feeling unwell; may have fever	Inflammation has escalated. Antibiotics usually not needed yet.
Bacterial mastitis	Worsening after 24h of good care; persistent fever; flu-like	Now needs antibiotics. Call your provider.
Phlegmon or abscess	Hard mass; not improving on antibiotics	Needs imaging and often drainage. Keep breastfeeding.

There is no "plug" to push out

This is the mental model that changed. It is not physiologically possible for a duct to become blocked by a solid lump of milk you can squeeze out. What you're feeling is inflammation and swelling narrowing the duct from the outside. That's why squeezing, digging and deep massage make it worse — you are adding injury to tissue that is already inflamed.

Do this

- **ICE.** Frequently — hourly or more. Cold reduces inflammation and swelling.
- **Ibuprofen 800 mg every 8 hours** and/or acetaminophen 1,000 mg every 8 hours, if cleared by your provider. This is treating the inflammation, not just the pain.
- **Feed on demand, normally.** Start on the less affected side so you're not overstimulating the sore one.
- **Hand express small amounts for comfort only** — enough to take the edge off, not to drain.
- **Gentle lymphatic drainage** — light stroking from the sore area toward your armpit and collarbone. Skin-level pressure only. You are moving fluid just under the skin, not massaging muscle.
- **Sunflower or soy lecithin**, 5 to 10 g daily.
- **Rest.** Get horizontal. This is a real illness, not an inconvenience.
- **A well-fitting, non-compressive bra.** Nothing tight, no underwire digging in.

Do not do this

- **No heat.** Not heating pads, not hot compresses, not warm soaks.
- **No deep massage.** No electric toothbrushes, no vibrating devices, no digging at the lump.
- **No trying to empty the breast.** No extra pumping sessions.
- **No dangle feeding** or other contorted positions.
- **No castor oil, no saline or Epsom soaks.**
- **Don't unroof a bleb.**
- **No routine sterilizing of pump parts.** Mastitis is not caused by poor hygiene, and it is not contagious.

Why the reversal

Deep massage causes tissue swelling and microvascular injury — it inflames tissue that is already inflamed. Heat dilates blood vessels and increases swelling. And over-removing milk drives your body to make more, which is often what caused the problem in the first place.

The old approach treated this as a mechanical blockage to be forced out. It is an inflammatory condition to be calmed down.

Call your provider if

- Fever persists beyond 24 hours of good supportive care
- You feel significantly unwell, flu-like, or are getting worse rather than better
- You see red streaking, or pus from the nipple
- There's a hard mass that isn't improving — this may need imaging
- You have recurrent episodes — something underlying needs addressing

> Antibiotics are for **bacterial** mastitis. Taken for inflammatory mastitis they disrupt the breast microbiome and increase the risk of progressing to a bacterial infection. It is entirely reasonable to ask your provider where on the spectrum they think you are.

Keep feeding

Through all of it. Your milk is safe for your baby at every stage of the mastitis spectrum, including bacterial mastitis, including while you're on antibiotics, and including with an abscess. Stopping abruptly makes everything worse.