



Australian
Breastfeeding
Association

BREASTFEEDING: weaning

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Australian
Breastfeeding
Association

The Australian Breastfeeding Association is Australia's leading authority on breastfeeding: supporting, educating and advocating for families and a breastfeeding inclusive society.

Guided by the latest evidence-based information, ABA exists to support women and families through their breastfeeding journey – wherever it may take them.

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ABN: 64 005 081 523 // RTO: 21659

PO Box 33221, Melbourne VIC 3004

Telephone: (03) 9690 4620

Email: info@breastfeeding.asn.au

Website: breastfeeding.asn.au

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BREASTFEEDING: weaning

Introduction

Every breastfeeding mum and baby wean, though the timing and reasons vary. Weaning starts as soon as you give your baby any food or drinks other than breastmilk, including cooled boiled water, solid foods or other milks. It ends when your child is no longer having any breastfeeds. In this booklet, weaning refers to the period when babies have fewer and fewer breastfeeds until they are no longer breastfeeding.

The World Health Organization (WHO) recommends that babies receive only breastmilk for the first 6 months of life, that they continue to be breastfed while family foods are added to their diet and that breastfeeding continues until the end of the second year or beyond.¹

Breastmilk by itself contains everything needed for healthy growth and development of full-term babies for about the first 6 months. Babies need at least 8 to 12 breastfeeds per day until after 6 months, when this will start to reduce as they begin to eat enough solids to replace breastfeeds (roughly around 8 to 9 months). **Breastmilk is the most important part of your growing baby's diet for the first 12 months of life.**^{2,3}

No matter how long you continue to breastfeed, your milk is always nutritious and right for your child's stage of

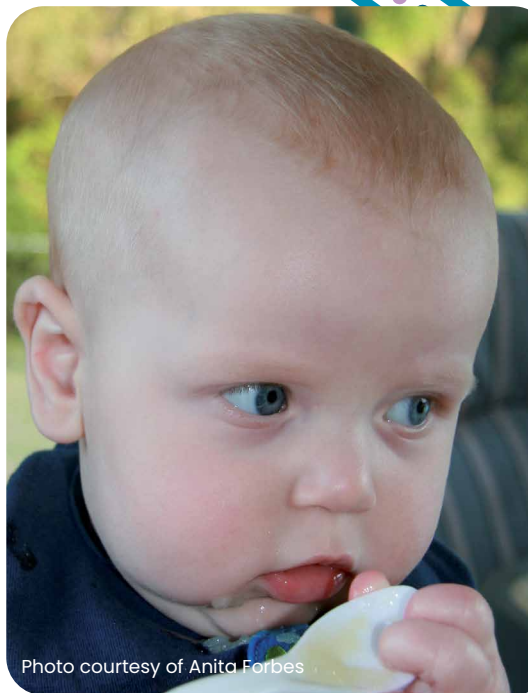


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development. By cutting down the number of breastfeeds slowly over a longer time, you will help protect your child from illness during the weaning period. As the volume drops, the concentration of anti-infective factors in your breastmilk rises. These protect your baby from illness that you and your family may be exposed to in your daily lives. You are giving them a final boost to their immune system before they are fully weaned.⁴

Only you and your baby can decide the right time for weaning. Unless you really need to, it is best not to set a deadline for weaning. This allows both you and your child the chance to enjoy a happy and relaxed breastfeeding time together while weaning.

Mutual weaning

Most toddlers slowly lose interest in breastfeeds, one by one, as they come to prefer eating with the family and drinking from a cup. For a time, they may only want to breastfeed on waking and going to sleep and perhaps if upset or unwell.

If you don't refuse a breastfeed, but also don't offer one, your child may have fewer feeds. Once they have stopped having any breastfeeds, they will be fully weaned. Many mothers whose children wean in this gradual way say they cannot recall the time when the last feed took place. Weaning in this way has many good points.

Physical

After 6 months, breastmilk will still protect your baby and provide them with food, even though they may also be having other foods. The number of feeds should remain the same until at least around 8 to 9 months. Breastmilk will still be a major part of your baby's diet until their first birthday. Australian guidelines recommend that any feeds dropped before 12 months are replaced with formula or donor milk.^{2,3} International guidelines suggest that pasteurised animal milk, such as full fat cows' milk, may also be a suitable option.³

Slow weaning helps you to avoid painful full breasts. If your breasts do become very full between feed times, let your baby have a short feed or express some milk, but only enough for you to feel comfortable. You could hand express in the shower if you



Photo courtesy of Rebecca Lush

feel very full. The Australian Breastfeeding Association's booklet ***Breastfeeding: expressing and storing breastmilk*** has more information.

Emotional

A baby who weans slowly can move at their own pace beyond the close bond of breastfeeding. As they start crawling, walking and talking, their world expands to include people and places outside their family. Then they will lose interest in breastfeeding when they are ready.

Many mothers are happy to keep breastfeeding into the second year or beyond because their child is so content. They also enjoy the close bond, the warmth and the relaxed feeling they have while breastfeeding. A sudden change in hormones takes place if a mother stops breastfeeding over a very short period. Slow weaning helps to avoid the emotional upset that this sudden change can cause.

Convenience

Weaning slowly means you can be flexible. Your baby may become ill, be upset while teething or have some other problem. If so, you can go back to full, or almost full, breastfeeding until that time passes. Breastfeeding is also a very good way to soothe and comfort an upset child.

Weaning led by the child

Sometimes, without warning, your child may decide for themselves that they have had enough. In some cases, this may happen even before 12 months of age. Depending on the age of your baby and the number of feeds they were having, you can feel very disappointed, sad and even rejected. You may have been looking forward to many more months of breastfeeding. It may be helpful for you to talk over your feelings with an Australian Breastfeeding Association counsellor.

Sometimes this may not be weaning, but a case of breast refusal (see [page 10](#)). If your baby is less than 12 months old, this is often the case, although there are some babies who never return to the breast. The Australian Breastfeeding Association's booklet **Breastfeeding: when your baby refuses the breast** may help you work out whether your baby is really ready to wean.

Some babies wean themselves quite quickly while others take their time. If your baby has weaned quickly, your milk supply may take some time to reduce. If you express only for comfort, your supply will naturally drop. Check each day for lumps. If you feel a sore lump, expressing a little can keep your milk moving and help avoid mastitis. For more about this, see [page 16](#).

If your baby does wean sooner than you would have liked, you can still cherish the time you did have breastfeeding them. You will know that you have given them the great start to life that breastfeeding provides.



Photo courtesy of Susan D'Arcy

When Lucy was 13 months old and having only two feeds a day, we went on a 3-week holiday. She is a cautious, shy child and we found that the strange surroundings unsettled her so that she needed the comfort of frequent feeds. She seemed to feed all the time! The day we drove home, she fed as usual but refused to feed as soon as we arrived home. She never went back to the breast.

Because of the sudden weaning and the hot weather, I found that Lucy needed lots of drinks. I also made a point of giving her lots of cuddles to make up for not having the closeness of breastfeeding. The speed of her weaning was a real shock to me, but Lucy has never shown any desire to feed from the breast again, nor does she want it when she sees other children being breastfed.

Weaning led by the mother

Sometimes mothers wish to wean for their own health and wellbeing.

- You may wish to become pregnant and think that breastfeeding is stopping this. The effect of breastfeeding on fertility varies a lot between women. You may not need to fully wean. It may be enough to reduce the number of breastfeeds. However, some women may not get pregnant straight away, even with complete weaning. If you are trying for another baby using IVF, your medical team may advise you to wean your child to give you the best chance of getting pregnant.
- When you are pregnant, you may choose either to keep breastfeeding or to wean. Many older babies wean themselves at this time, as the hormone changes in pregnancy cause the milk supply to drop and the taste of the milk becomes more salty. The Australian Breastfeeding Association's webpage [**Breastfeeding through pregnancy**](#) has more about this.
- You may have been advised to wean for medical reasons. If you are not keen to wean, let your doctor know how you feel. Sometimes there may be other options. The next section may help you work out if you need to wean. If you find that you do not have other options, see 'When weaning is necessary' on [**page 13**](#).
- If you are feeling very stressed due to ongoing problems with breastfeeding, then maybe the time has come to wean. You need to be able to enjoy your baby. Sometimes mothers of older babies and toddlers get to the stage where they feel like they have had enough and would like to limit the number of feeds. This may be with a child who loves to feed a lot at night. Cutting out some breastfeeds may allow you to feel less stressed and enjoy the feeds that you do give.



Photo courtesy of Helen Gifford-Cock

Do I need to wean?

Sometimes mums are told to wean, even though there are other options. If you and your baby are happy to keep breastfeeding, here are some ideas to manage these common situations.

Milk quality or supply

You may have heard talk of milk 'drying up' or milk not being 'rich enough' or becoming 'thin and watery'. If you are healthy and eat well, your own breastmilk is always just right for your baby's needs. Mature human milk is often bluish in colour and looks quite different to other milks. Babies cry for many reasons, not just because they are hungry. There is no need to wean if your young baby is fussy.

Low milk supply can usually be increased. If you are worried you are not making enough milk, check that you are feeding your baby when they seem to want or need it. Young babies fed only breastmilk need at least 8 to 12 feeds in a 24-hour-period. Many babies have more. Make sure they are attached to the breast well so they can get plenty of milk.

Here are some ideas to help your milk flow:

- Make yourself comfortable. Use any special ways you have learnt to relax, or listen to calming, pleasant music. Take some slow, deep breaths and relax your shoulders.
- Place a warm face washer on your breast.
- Gently massage from the outer part of the breast towards the nipple.
- Think about how much you love your baby.
- Imagine the milk flowing to your baby.
- Have a drink and/or snack.

The more often milk is removed from your breasts, the more milk they will make. Your breasts are making milk all the time, even while your baby feeds, so relax to help your milk flow as your baby sucks. The Australian Breastfeeding Association's booklet **Breastfeeding: and your supply** will give you more information. If you are worried about your milk supply, it may help to talk to a trained Australian Breastfeeding Association volunteer on the National Breastfeeding Helpline or on LiveChat (see **page 30**).

A small number of women cannot produce enough milk even with good attachment and frequent feeding. In these cases, a mother can consult her doctor as there may be a medical reason. A mother who has too little milk can still breastfeed her baby, along with extra formula or donor milk. There is no need to fully wean.

Your exclusively breastfed baby is receiving enough milk if they have:

- at least 5 heavily-wet single-use nappies or at least 6 pale, very wet cloth nappies in 24 hours.
- soft or runny bowel movements. A very young baby will usually have 3 or more soft bowel movements a day for several weeks. An older baby may have fewer than this.
- some weight gain and growth in length and head circumference as guided by your child health nurse. The Australian Breastfeeding Association webpage **Understanding growth charts** has links to the WHO growth charts.

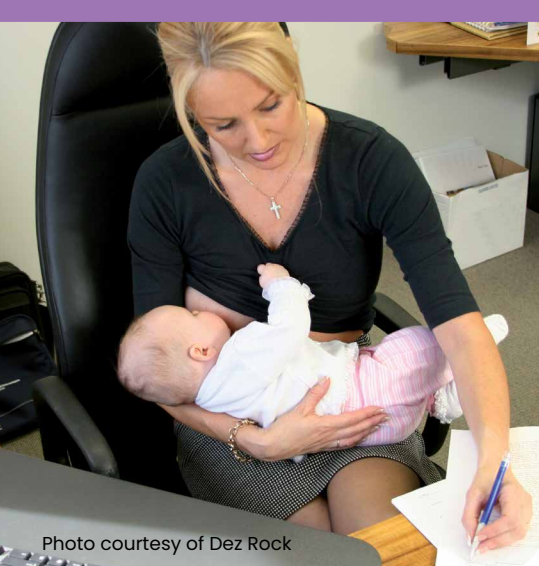


Photo courtesy of Dez Rock

You are unwell

If you are sick, take your baby to bed with you and rest while you breastfeed them. If possible, call on your support people to help mind other children and/or help with other tasks while you are unwell. If your baby is older, you may find that you feed less for a short while. When you are feeling better, you will be able to build up your milk supply again by feeding more often.

Drugs taken while breastfeeding will appear in your breastmilk but the amount varies. There are only a very few that cannot be taken while breastfeeding. Some health workers may not know how important breastfeeding is for many mothers and babies and do not realise that advice to wean may upset them. Tell your doctor how you feel. Ask whether the drugs are really needed and if they are likely to have any harmful effects on your baby or your milk supply. There may be other treatments that will allow you to keep breastfeeding.

You can contact drug information lines for advice about the medicine you have been prescribed. Both health workers and the general public can call these information lines. They can help you to choose medicines that are safe for your baby and time your doses so there is less in the milk your baby receives. Current numbers are listed on the Association's webpage, ***Breastfeeding and medications***. There are also links to other websites about medications and breastfeeding. Should your doctor advise weaning because of your treatment, you may like to ask for a second opinion from another doctor.

Going back to work

Many women return to work and continue to breastfeed in part or in full. It is possible to express and store breastmilk so that your baby can still receive your milk while you are apart. For further options, read the Australian Breastfeeding Association's booklet ***Breastfeeding: women and work*** and the ***Carer's guide to the breastfed baby***, available as a PDF from the Association's website.

Baby is unwell

When babies are sick, breastmilk is fluid, food and medicine and is gentle on the stomach. Your breastmilk contains protective factors that help your baby fight illness. Breastfeeding also comforts a sick or distressed child. It is good for the mother too, as she knows that she is helping her baby. Sick babies may want to feed more often than usual. When the illness or distress has passed, most babies settle back into their normal feeding pattern.

If you have an infection, it is rare to have to wean to protect your baby. They were exposed before you realised you were ill. Your breastmilk will pass on your antibodies and help to protect your baby. The Australian Breastfeeding Association's webpage ***When you or your baby needs to go to hospital*** has more information.

Troubles with biting

Most babies get their first teeth between 6 and 9 months of age. You do not have to wean once teeth appear. They should not cause any problems while your baby is sucking. Their tongue covers their bottom teeth as they feed and you will find that they are good at keeping their top teeth from clamping down on the breast or nipple. Sometimes an older, heavy baby may 'drag' on the nipple causing a sore patch on the breast where the top teeth rub. Changing feeding positions so that the teeth are resting on a different spot may help avoid soreness. It may help to hold your baby up, perhaps using pillows, with their body tucked in close to and facing you.

Sometimes a baby may bite on purpose and this can be very painful. It usually happens when the baby does not want to feed at that time, has sore gums when teething or has found a new game!

To avoid being bitten:

- Watch your baby during a feed. If you think they may bite, quickly take them off, saying 'No!' very firmly, making sure that they know you do not approve. If you can manage it, a firm 'No' is better than a loud 'Ouch!', as the baby may find this amusing and try it again. Most babies don't like being taken off the breast. They will soon get the message that biting is not a good game. After a minute or so you can put your baby back to the breast. You may need to soothe or calm them first if they were frightened by your 'No!'. If your nipple becomes sore or damaged, see the Australian Breastfeeding Association's booklet ***Breastfeeding: breast and nipple care***.
- If you feel your baby has fed long enough at one breast, change sides or end the feed.
- Offer a teething baby something cold or hard to bite on for a few minutes just before the feed (make sure it is safe and that baby can't choke on it) or rub their gums. If their gums seem to be quite sore, consult your doctor or pharmacist.

Sore nipples or mastitis

There is no need to wean. Many mothers keep feeding through these problems and go on to breastfeed for much longer. Good attachment can help ease sore nipples. In the case of mastitis, breastfeeding keeps the milk moving, helps clear the inflammation and is safe for the baby. However, both sore nipples and mastitis are painful. An Australian Breastfeeding Association counsellor, your doctor or the booklet **Breastfeeding: breast and nipple care** will provide you with more ideas.

Holidays or other travel

If you are going on holidays or need to travel away from home, breastfeeding is easy, convenient and the safest way to feed your baby. Even if delays occur, you will always have food for them. Few people will notice your calmly breastfeeding baby. If you need to travel long distances or go overseas, breastfeeding helps to protect your baby against any illness you may come into contact with. Make sure you and your baby have had any needed vaccinations for places you will be going to. While away, ensure that the water you drink is safe. When flying, breastfeed your baby during take-offs and landings to help prevent ear pain. It comforts them at any time. If you are thinking of weaning, it may be better to wait until you are home again.

Breast refusal

Some babies pass through a stage when they refuse the breast. This may be due to teething pain, a cold or a sore throat, or your baby just not wanting the breast as often as you expect. Their feeding pattern



Photo courtesy of Rachael Todd

may be changing as they are growing older. Do not force them to feed. As your baby grows, they can empty the breast very quickly, often in just a few minutes.

If, however, your baby seems to refuse every feed, it is important to remain calm and to be patient. Their desire to suck will most likely return in a few days.

Here are some things to do:

- Ask your doctor to check your baby.
- Put your baby to the breast when they are asleep (in the active phase, not a deep sleep) and they may just start sucking or try feeding just as they begin to stir from a sleep.

- Give them lots of cuddling time, especially skin-to-skin.
- Try bathing or sleeping together without any clothing over the breast. Some babies will start feeding again. (If sleeping together, check the Australian Breastfeeding Association's website article ***Breastfeeding and co-sleeping*** for guidelines for safe bed-sharing.)

There are many reasons for breast refusal, so it helps to discuss the problem with an Australian Breastfeeding Association counsellor on the National Breastfeeding Helpline 1800 686 268. Read the Association's booklet ***Breastfeeding: when your baby refuses the breast*** for more ideas.

Return of periods

There is no need to wean because of the return of your periods. If they have not already started again, they will most likely return after weaning. The timing of the return of fertility varies greatly between mothers. Periods can start again at any time from a few weeks after the birth of your baby to many months or even years later.

Some mothers notice that their babies seem fussy a few days before their period starts and for the first couple of days of the cycle or around the time of ovulation. This may be due to changing hormone levels, or a change in the amount or taste of the milk. If you give them extra feeds and cuddles at this time, most will settle down quickly.

Pregnancy

If you become pregnant again, it is common for hormone changes to cause sore nipples and a decrease in your milk supply. Your child may begin to wean themselves. However, if they still want to breastfeed and you are feeling well and are happy to keep going, then this is OK. Some mothers keep breastfeeding while pregnant and then feed both children (tandem feed) after the new baby is born. If you choose to do this, it is good to eat well, so that all three of you will receive the nutrients you need. The Australian Breastfeeding Association's webpages ***Breastfeeding through pregnancy*** and ***Tandem feeding*** cover this in more detail.

If you are pregnant, it is important to look after yourself as well as your breastfed child. It is a good idea to let your medical team know that you are still breastfeeding. While pregnancy itself is not a reason to wean, they may suggest that you do so if you are feeling very tired or ill. You can usually still take the time to wean slowly. You may also think about weaning if you find that you have started to resent your child's demands for breastfeeds. Some pregnant women feel like this and it can put pressure on you both, as a child can often sense their mother's feelings. It may help to discuss what is happening with your doctor or an Australian Breastfeeding Association counsellor.



Photo courtesy of Vicky Leon

Both times I have been breastfeeding, I have become pregnant again (my children were aged 21 months and 18 months) and both times I felt a strong feeling of 'not wanting to feed the baby'. It was almost a feeling of rejecting them as far as breastfeeding was concerned. This was a feeling I could not control. In my case, I found there could be no slow weaning. I just had to do it over 3 to 4 weeks. As well, my nipples became very tender and my milk supply dropped quite a lot. I felt very guilty about my feelings of rejection but talking to other Australian Breastfeeding Association mothers with similar feelings helped me a lot. I did not feel so bad when it happened to me with my second child.

Outside pressure

As your baby grows older, you may find that family, friends or neighbours seem less willing to accept your breastfeeding.

You may feel under pressure to wean. If you choose to keep breastfeeding, the moral support of other mothers of older breastfeeding babies is a great help. You can find this at Australian Breastfeeding Association group meet-ups. If you become a member of the Australian Breastfeeding Association, you will receive the regular magazine, **Essence**, which includes articles about many aspects of breastfeeding and parenting.

You may also feel pressure from other people when you breastfeed your baby away from home, perhaps at a café or in another public place. While most people think breastfeeding a young baby is quite normal, they may not think the same as your child gets older. If you are happy to feed your toddler while out and about, feel free to do so. You have the right to breastfeed your child wherever you both are allowed to be. Feeding an older child in

public is also a great way to help show other people that breastfeeding is normal for older babies and not just newborns.

It is also fine for you to set limits on your older child's breastfeeds just as you would with other behaviours. If you are slowly weaning but your child asks for extra feeds when you are away from home, here are some ideas for putting off a feed at this time:

- Distract your child from their desire for a breastfeed, for example with toys, a singing game, talking to other people or looking at sights.
- Take water and/or snacks with you when you go out. They may enjoy having their own special drink bottle.
- Ask them to wait until you get home.
- Avoid talking about breastfeeding while you are out.
- Teach your child to use a word for breastfeeding that is not obvious. If a child asks for a 'drink' when out, you may be able to talk them into having water instead of a breastfeed.

When weaning is necessary

It is rare for a woman not to be able to produce milk. However, you may find breastfeeding hard if you have a baby who is very premature or ill for a long time, or who does not suck well over a long period. Breastfeeding may also seem very hard if you suffer with tension, fatigue, depression or other medical issues.

Patience, persistence and family support will help many mothers solve any problems. Sometimes, however, despite the best efforts of a mother and the people who are helping her, this may not happen. A phone call with an Australian Breastfeeding Association counsellor can help, whether it is to solve a breastfeeding problem, or to come to terms with having to stop breastfeeding. Breastfeeding is just one part of being a loving mother. You and your baby can still enjoy lots of skin-to-skin contact, rocking and cuddling. Knowing this may help you to be able to give them and the rest of your family the best of yourself and be a relaxed and loving mother. Your milk supply will slowly reduce as milk is removed less often. Allow several weeks to wean your baby if you can. See the next section if you need to do it faster than this.

- To begin, try dropping one feed a day, waiting a few days before dropping the next feed. You could first cut out the feed in the middle of the day, then mid-afternoon, mid-morning, then the evening or early morning feed. How fast you drop feeds will depend on your own comfort and your baby's response. When going from one feed a day to none, be prepared to breastfeed or express every second or third day so that your breasts do not become too full.
- Whether you replace the missed feeds with formula, cows' milk or water will depend on the age of your baby and the other food and drink they are having. Australian guidelines recommend that babies only receive breastmilk or formula as a drink until 12 months.^{2,3} The World Health

Organizations suggest that pasteurised animal milks, such as full fat cows' milk, may also be suitable after 6 months.¹ A baby who has animal milk may be at greater risk of anaemia if they don't receive enough iron from other foods. Talk to your healthcare provider if you are unsure which option is best for your baby

- Milk is still a major part of a baby's diet throughout their first year. For example, a baby who is fully weaned onto formula will need about 600 mL of formula per day until 12 months.^{2,3} Toddler formulas are not recommended or needed.^{1,3}
- Depending on your baby's age and need for sucking, you can wean to a cup or a bottle. Keep in mind that at some stage they will have to wean from the bottle. For children over 12 months, drinks (water and milk) should be offered in a cup rather than a bottle.³
- Make sure you are still giving your baby lots of cuddles and time with you.

Leaving milk in your breasts will help to reduce your milk supply. Although it may drop fairly quickly, you may still make some milk for quite a long time. You may need to express from time to time if you seem to be getting very full. You could do this in the shower. Only express enough milk to relieve the full feeling. Giving your baby a short feed will also help if you become too full, as long as your baby does not take this as a signal to start feeding more often again.

Check every day for lumps. If you find some, express to remove these, so your breast does not become inflamed. Expressing small amounts for a short period to relieve overfull breasts or clear lumps will not make your supply increase again. This will only happen if you express large amounts and keep doing that.

If your baby is not keen to follow your lead, here are some further ideas, which will also help to reduce your milk supply:

- Give your baby a dummy for extra sucking.
- Give formula or other milks before a breastfeed, if doing both at the same feed.
- Only offer one breast at a time and ensure that your baby has plenty of other drinks.
- Feed to a routine where possible.
- Be out of bed and dressed, with the bed made, before your baby gets up in the morning. This is harder if you have an early riser!
- Change your daily routine. Try to be out at times when your baby would normally be having a breastfeed. They may accept a cup or bottle if they are not at home.
- Go to a playgroup or visit friends with young children (who are not still breastfed).

- Get someone else, such as your partner, a friend or family member to attend to your baby if they wake at night.
- Get your partner or someone else to give your baby their bottle or cup during the day.

Weaning when exclusively expressing

If you are expressing all your milk for your baby, reducing how much you express will reduce your supply. Dropping an expression every 3 to 4 days may work for you, while you replace the missed expressed breastmilk with another suitable option. However, if you find this leads to overfull breasts or sore lumps, there are ways to reduce your milk supply more slowly:

- Extend the time between expressing sessions.
- Express less milk at each session. Leaving more milk in the breasts will help signal your body to make less for next time.
- If you have dropped the number of expressing sessions per day but still get overfull, express in between main sessions, but just enough to be comfortable. You may find that you need to express once every few days towards the end.

Rapid weaning (lactation suppression)

Sometimes a mother may need to stop breastfeeding straight away, often in the early days after the baby was born. Some reasons may be:

- You need to wean for medical or personal reasons.
- Your baby will be fed by someone else. This may happen if you are giving up the baby for adoption, you are a surrogate mother, your baby is being removed by child protection authorities, or a same-sex partner is to feed the baby.
- Your breastfed baby has died, or your baby died during pregnancy or at birth. (Please see the Australian Breastfeeding Association's webpage [Lactation after your baby dies](#).)

If your breasts are firmly supported and you don't express more milk than needed for comfort, your milk supply will gradually decrease.

- Wear a firm, well-fitting bra both day and night to support your breasts and keep you comfortable. You may need a larger size bra for a while.
- Use breast pads to soak up leaking milk. Single-use or washable ones both work well. Change them as they become wet.
- Sometimes a bra feels too tight when your breasts get very full. Instead of a

bra, you can use a length of soft fabric, such as towelling or stretch cotton. Wrap this around your chest just tightly enough for firm support. Your breasts should be lifted up and in. The wrap should support your breasts but not be too tight. This is different from the 'breast binders' used in the past. These were wrapped very tightly around the chest, to put pressure on the breasts. However, it is now known that extra pressure does not help stop the milk.⁵

- Relieve pain and swelling by putting cool packs in your bra or inside a wrap, or use cool compresses after a shower or bath.⁶
- Handle your breasts very gently as they can bruise easily.
- If your breasts feel too full, express a little milk. **Express only enough to make yourself comfortable.**

When my baby was 9 months old I needed to wean immediately for medical reasons. I didn't have any options but to wean. I expressed just enough to stop my breasts being painful and noticed after a few days my breasts were no longer getting painfully overfull. I was very sad to wean my baby so suddenly and cried each time I gave her a bottle.

- If your breasts are sore and full, have a warm shower or bath, or dangle your breasts in two bowls of warm water. This may be enough for some milk to leak out. In the shower, start with lukewarm water and slowly make it warmer. Take care as it is easy to burn yourself, especially when the skin is stretched tight. Use a plastic chair or

stool in the shower if you cannot stand for long.

- Drink when you are thirsty. Cutting down fluids will not help reduce your milk supply.
- For the first few days, full breasts may make lying in bed uncomfortable. Try lying on your back or on one side with an extra pillow to support your breasts. If you like to lie on your front, place a pillow under your hips and stomach to ease the pressure on your breasts. Place a soft towel or old-style cloth nappy across your breasts to soak up any leaking milk.
- If your breasts hurt, speak to your doctor about pain medicine.
- Most prescribed drugs used to dry up milk work by blocking prolactin, the hormone involved in making milk. They work best in the early stages of lactation when prolactin levels are high. They don't work as well if used after weeks or months of breastfeeding when prolactin levels are much lower. Talk over the pros and cons of these types of drugs with your doctor before you decide whether or not to use them.

Most mothers will be able to stop their milk by taking out as little milk as possible, wearing a firm bra, using cool packs, and taking medicine for pain and inflammation if required.

Engorgement (swollen, painful breasts)

Engorgement can happen in the first 1 to 4 days after a baby's birth when extra fluids,



Photo courtesy of Elysia Venner

as well as milk, build up in the breasts as they start making milk. Engorged breasts become very swollen, tender and hard. If you are trying to dry up your milk, leaking, engorgement and breast pain usually peak at 3 to 5 days after the birth⁷ and stop within 10 days.⁵

If the ideas above do not ease your pain, it may help to express your breasts fully, just once, with an electric breast pump. This can relieve the pressure and from then on, you may be able to stop it building up to that point again. Wear a firm bra and from then on **express only for comfort**.

I had a sudden increase in milk on day 3 even though I didn't put my baby to my breast. I didn't expect my breasts to be so sore and uncomfortable. I was told to express for comfort but I didn't want to do this. I needed painkillers and used towels to soak up the leaking milk and cold packs to help relieve the tightness from my enlarged breasts. After about 5 days my breasts were no longer sore.

Localised breast inflammation and mastitis

When breasts are left very full, there is a risk that part of the breast can become inflamed. A lump forms and the breast begins to feel sore. Sometimes there is a red patch on the skin or the breast may feel hot. Treating this inflammation early can help prevent mastitis. If you develop mastitis you may get the shivers and aches and feel like you are getting the flu. This can come on very quickly. **If you try the ideas below and do not feel better in 1 to 2 days, consult your doctor.⁸ If you feel very unwell, see your doctor sooner.** If mastitis is not treated, there is a risk that a breast abscess may form. Fortunately, these are quite rare.⁹

Treat localised breast inflammation and mastitis quickly to prevent further problems.

- Encourage your milk to flow by stroking your breast towards the nipple and rolling your nipple between your fingers. Try to relax.

- Apply warmth to the sore area for just a few minutes, then express your milk. Use a well-wrapped hot-water bottle, warm face washer, heat pack or wheat bag. Take care not to burn yourself.
- Express every few hours to keep the milk moving. When the mastitis has passed, you can go back to drying up your milk.
- If you can hand express, you may find it easier under the shower or in a deep warm bath with your breasts floating in the water.
- Between expressing sessions, use well-wrapped cool packs (a wet face washer cooled in the freezer, a frozen nappy wet with water or a first-aid cold pack) to reduce swelling and relieve pain.
- An anti-inflammatory painkiller may also help. Speak to your doctor or a pharmacist about this or call a drug information service (see the Australian Breastfeeding Association's webpage, ***Breastfeeding and medications***, for numbers).

Be prepared for leaking milk

- Choose breast pads that absorb well, so that leaking milk is less likely to show on your clothing. Avoid types that hold moisture against the skin. With some types of pads, you may need several layers if you can fit them inside your bra. Carry spare breast pads with you when you go out.
- If you wear a bra to bed, take care it doesn't dig in when you are lying down,

as this may lead to breast inflammation. A soft sleep bra or sports bra, or even a firm singlet or crop top, can be used to hold breast pads in place instead of a bra.

- If possible, wear a dark patterned top. Wet patches are likely to show less on matt than on shiny fabrics. A jacket, wrap, scarf or other loose, outer layer of clothing may help hide wet spots.
- Express a little milk before you go out. Make sure to express only enough for comfort. The more milk you express, the more you will make.
- If you feel your milk leaking or letting down, you can stop the flow by pressing firmly on your nipples with your hands or forearms, or cross your arms and press against your nipples.
- Take a spare set of clothes if you will be away from home for a while.

How long will the milk take to stop?

This can vary and depends on a few things:

- How old your baby is/was and how much milk you were making, or your stage of pregnancy if you had not yet given birth.
- How much milk has been taken from your breasts through expressing and leaking.
- If you are pregnant again.

Some mothers find it takes weeks for the milk to stop fully while others find it takes only days. After the milk seems to have

stopped, you may see milk stains on your bra, or you may leak during or after a shower. Every mother will have their own experience.

Weaning a toddler

Studies have shown that the natural age of weaning for humans is between 2½ and 7 years.¹⁰ While breastmilk still gives toddlers and older children food and protects them from disease, many mothers believe a sense of security is the most important aspect of breastfeeding for a child who is over 12 months.

Reasons for feeding the older baby and weaning slowly:

- Being able to find comfort at their mother's breast is very important to many toddlers. They feel secure because they trust that you will know and respond to their needs.
- Breastfeeding is a great standby if a toddler refuses food due to teething or illness.
- An older child shows their love of breastfeeding with pats on the breast, laughs and cuddles. A child who can talk will tell you how they feel about 'their milk'. Some have said, 'As good as chocolate' and 'better than ice cream'.¹¹
- A child can be weaned to a cup instead of a bottle, so there is no need for bottles and no need for a second weaning from a bottle.



Photo courtesy of Danielle Chan

Two mothers share their feelings on breastfeeding a toddler:

I can honestly say that to breastfeed a baby is a marvellous experience, but to breastfeed a toddler with thoughts and words of his own is a truly wonderful bonus.

My daughter Alissa is 2½ and still breastfeeding. I feel proud I have been able to keep going for so long. Being a wakeful baby (she still is), the breast has been the best comforter and settler for her at night. We have a very special bond and I will miss the times she feeds from me when she weans. I know many times I have little or no milk (she tells me), but she enjoys a suck and a cuddle.

Ideas on how to start weaning toddlers

When you are breastfeeding a toddler or older child it is okay to set limits on feeding that take into account your needs as well as those of your child. One way to start weaning your toddler or older child is to work with the idea of 'don't offer but don't refuse'. Some or all of the following ideas may help you do this.

Allow time

Weaning slowly can help both you and your child adjust to the change. As you wean, you may still make milk for quite some time. If your breasts begin to feel full, express just enough to make your breasts feel comfortable. If you are feeding to a routine, try to reduce one feed at a time, allowing a few days or more before dropping the next feed. It may take several months before they stop breastfeeding at all. It could take even longer if your child is still always feeding when they want to.

Talk to your toddler

Toddlers can often understand more than they can say. Prepare them by talking about what will happen so they know that breastfeeding will stop soon. You can point out older friends who are weaned and tell them that one day they will be big like that and not need your milk anymore. Praise them by saying something like 'Aren't you growing up! You went all morning without a breastfeed!' If you are pregnant and your nipples are sore, tell them. Many toddlers will agree to just a few sucks and a cuddle, with a book and something to eat or drink afterwards. This may help teach them to delay a feed until 'later' and can help you in awkward situations too.

Morning feeds

If you share your bed with your toddler and they usually have an early morning feed, you could try getting up before they wake. If you are already dressed and have their breakfast ready when they wake, they may eat, then start to play and forget about their breastfeed. Older children or your partner can help distract them.

Daytime feeds

Try to get your child to do something else instead. If your child has always had free access to the breast, try to introduce some kind of routine. Have set times for feeds, such as only at home, only after lunch, or not between meals. Have plenty of healthy snacks and drinks available. Toddlers who can understand seem to be able to cope with this. Watch your toddler closely and avoid situations where they would normally look for a breastfeed. Be ready with a change of activity before they get bored, tired or restless. You could offer something new, such as frozen yoghurt, drinks or favourite snacks to help distract them.

Having decided to fully wean our son, I enlisted my husband's help to divert our child's attention from his only remaining feed, early in the morning. My husband answered our son's early morning calls, changed him and took him to the kitchen whilst I showered. I then appeared dressed and so, together, we finally weaned our son with no trauma.

Reduce long feeds

If you have always left your child at the breast until they have finished or fallen asleep, it may take a while for them to accept that you are now in charge of their feeds. Try to shorten long feeds with something they may like. Some ideas of what to say: 'Time to finish now, let's go for a walk.' or 'We will just have a little feed and then we will go and see if Grandma is home.' An older toddler may like to count the sucks.





Photo courtesy of Vicky Leon

Reduce the need to feed to sleep

These feeds can be hard to drop as they may be the only way your toddler will have a nap, go to sleep at night or settle again in the middle of the night. Slowly increase the time between their sleep-time feed and putting them to bed, so that the two events are no longer linked. Work on building a new bedtime routine where you are not feeding to sleep (perhaps feed in another room), but give as much time, love and comfort as you can to help them fall asleep. Singing, rocking, reading a story and patting can help. Slowly reduce the time at the breast to just long enough to relax them, making the story, song etc the main part of the routine rather than the breastfeed.

If your toddler wakes during the night and wants a feed to get back to sleep, see if your partner may be able to settle them, perhaps with a cuddle and a drink of water.

Sometimes toddlers will accept this, as your partner does not remind them of breastfeeds. Even if you still take your toddler into bed with you during the night, try to comfort them in other ways before offering a breastfeed. In time, a cuddle may replace feeding for comfort.

Wear different clothes

When you go out with your toddler avoid wearing clothes that allow easy access to the breasts. Avoid taking off your clothes in front of your child, as this may remind them to ask for a feed.

Change the routine

Having friends or family members look after a toddler during the day may help change

the routine. You can stay close by at first, in case you are needed. A child usually reacts differently with people they know well. They may take other drinks and food and forget to ask for a breastfeed.

Aaron always needed a breastfeed to settle during the night and I thought it would be very difficult to change. However, after he had weaned during the day, it was easier to remind him quietly that he wasn't having Mummy's milk anymore and that he could have a back rub to help him sleep again. Soon, a few gentle pats would settle him back to sleep when he woke.

Consider your child's sucking need

If your child seems to have a strong need to suck, weaning to a bottle may be better than going straight to a cup. Give a short breastfeed, then the bottle. Take it slowly, at the child's pace.

Dropping final feeds

Some toddlers can still ask for lots of breastfeeds. Mothers find different ways to remind their children that it is time to wean. Sticky bandages can be used to remind a toddler that 'Mummy has sore nipples' as they often know about using these for sore knees or fingers.

Your partner or another family member can help care for your child. Grandparents, or other close family members, can also help by minding them for a weekend. Your child must feel secure and see their special weekend as a holiday. Often they will forget the last feed without any trauma. Some families have a 'weaning' party to celebrate this new stage in their child's life.

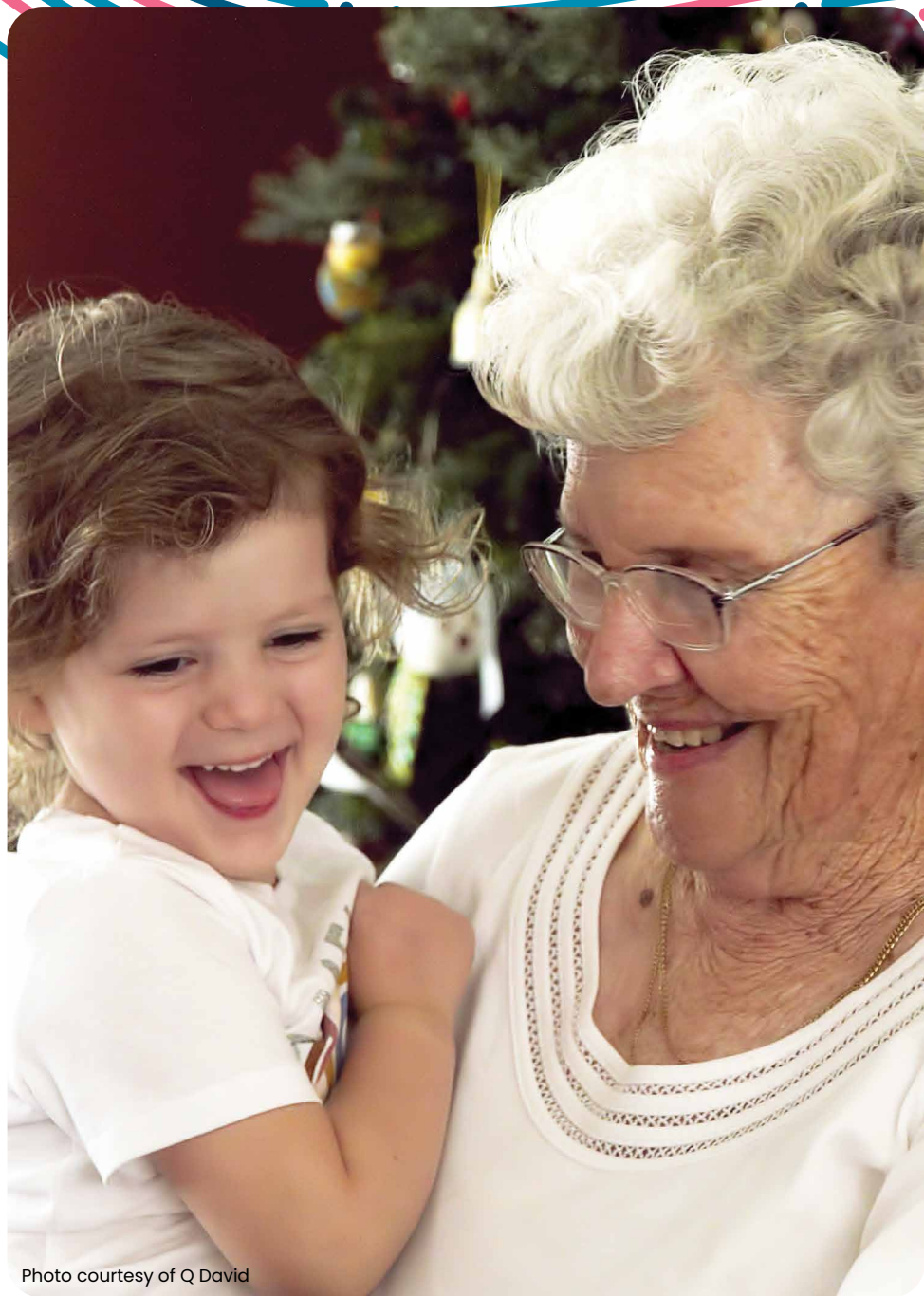


Photo courtesy of Q David

When your child resists weaning

If you are weaning because you have had enough, but your toddler is not keen, you are likely to have times when you feel very tense and even angry about feeding them. Your toddler may sense this and worry about it. They may ask for even more feeds to help them feel secure. This can become a downward spiral. They become more anxious and more demanding and you then become more upset and angry.

Think about what is going on. What are the things that prevent you being happy to breastfeed your child? Are there certain times when you resent breastfeeding? Perhaps you can't sit down with your phone or a book without them helping themselves. Perhaps you are feeling pressure to wean from those close to you. Or is your sleep being disturbed by frequent night feeds? These are the things to tackle first. It may help to talk to someone else (for example, an Australian Breastfeeding Association counsellor) about what is going on. Perhaps share your feelings with your partner or a good friend who may help you think of ways to solve these problems.

One mother wrote:

With Jessie, 3 and still feeding freely, I began to feel less comfortable about feeding her in public and decided that I would no longer do so. I explained to her that now she was a big girl, she could have breastfeeds at home, at the houses of certain friends and family members but that when we were out she would have other drinks from a cup or a water bottle like her older sisters.

I tried to make our first such outings fun, to provide extra food and drink to distract her and to choose places to go where I would feel most comfortable if she became angry. But of course it wasn't easy. She had a few tantrums. I tried to remain calm and show her I understood. 'You're tired and cross', I would say. 'You want a breastfeed, but we only have breastfeeds at home now. You can have a cuddle and a drink of water and we'll have a breastfeed when we get home.' I would make sure that I remembered to offer her the feed when we got home.

Her need to continue breastfeeding was obviously strong and sometimes she became very angry with me, but I felt that if I was to continue feeding her and not resent it, I had to stick it out. It upset both of us for a while, but I tried to be consistent. It helped when a close friend whom she knew well was with us, because Jess would often accept comfort from her when she was angry with me.

If we were going out for a long time, I would wear a dress that opened at the back or just pulled on over my head. I explained that this was to make it easier for her to remember that there would be no breastfeeds.

I was surprised really, how quickly she adjusted. We had a stormy couple of weeks, but after that she accepted the new regime quite cheerfully. One day she looked me over before we went out and said, 'Oh, a not-feeding dress. No breastfeeds today.' We had no further problems.

She kept feeding for another year before finally weaning herself. I enjoyed the last months of our feeding relationship more, I think, because I felt that I was in control of the situation.

How weaning affects you

You may feel sad, weepy or depressed after the last feed or expression, even if you really wanted to wean and it all went smoothly and calmly. These are very normal feelings. Some mothers feel especially sad when weaning their last baby. Others may feel relieved if they wanted or needed to wean and it has gone well.

Your hormones take some time to return to normal, more so if you have had to wean quickly. Often women do not get their periods back straight away. For some, periods and ovulation are delayed for many months.

You may feel you will never be as close to your weaned child as you were while breastfeeding. Talk over your feelings with an Australian Breastfeeding Association counsellor, or a friend who has breastfed. They will reassure you that you will find new ways of being close as your child grows.

You may be surprised to find that your newly-weaned older baby or toddler behaves differently for a while. Even if they have weaned themselves, they still may take a little time to get used to the idea. Sometimes they may be clingy or

sad, or perhaps push you away for a short time as they waver between wanting to be a baby again and wanting to grow up.

Conclusion

The time to wean your child is when you or your child decides that it is right, taking into account the needs of both of you, as well as your home and family situation. Try not to be pressured into weaning by well-meaning friends and family, before you feel ready. If you are not sure what to do, then perhaps a chat with an Australian Breastfeeding Association counsellor may help.

The World Health Organization recommends breastfeeding to 2 years and beyond.¹ Some mothers feel that their child will be too dependent upon them if they breastfeed that long. However, there is no evidence to support this. In fact, many mothers say that the opposite is true.

Gradual weaning at whatever age you or your child chooses is best, both physically and emotionally. Even when weaning is gradual, some mothers feel sad, even a little depressed, when breastfeeding stops, as if they are no longer so important or needed so much by their child. This is a normal reaction and usually passes in time.



Image: Pixabay

The following story sums up the feeling of many mothers:

I have just completed 2½ years of breastfeeding. With the Australian Breastfeeding Association's help at the start, I persevered. I wondered when Tobie would start to wean himself. I thought perhaps at 10 months he would start, but he just wasn't going to be hurried. When he got to 12 months, the outside pressure started from uninformed friends and family members. Then we got to 18 months. Well, I was told that wasn't normal. He was still having 'suckies' when he felt like it or when he was sick or hurt. It seemed as if it was a wonderful comfort for him to know Mummy was there, willing and able.

So here I am now with a confident and secure child whom I feel is more independent than many of those toddlers the same age who were weaned earlier. Many people believe that child-led weaning results in children over-dependent on their mothers. This is an unnecessary worry. It is generally accepted these days that a child who is allowed to outgrow infancy at his own pace has a more solid foundation than one who is pushed away before he is ready.

A factor often raised is that prolonged breastfeeding restricts a mother and is a burden on her. I suppose it depends on what one wishes to do, but breastfeeding mothers seem to lead lives just as involved as other mums. During the time I was breastfeeding I ran a business, completed a counselling course and kept up yoga

classes. I don't feel breastfeeding restricted me in any way. Finally, just a note to anyone finding it hard to wean a child: try a change of routine and let your partner take over feeding, bathing and putting to bed. It can work wonders.

I hope to encourage more mothers to let their babies wean themselves when they are ready. It may take longer but I have found the enjoyment from this little toddler is worth every minute of it.

Resources

ABA website

Use the search function of the Australian Breastfeeding Association's website breastfeeding.asn.au to find more information on the topics covered in this booklet. You can also access support, find local and online events, and explore the full range of ABA resources and services.

Books:

- ***Breastfeeding: a practical guide*** (4th edition) Australian Breastfeeding Association
- *The No-Cry Sleep Solution for Toddlers and Preschoolers* Elizabeth Pantley
- *Toddler Tactics* Pinky McKay
- *The Happiest Toddler on the Block* Harvey Karp

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The Australian Breastfeeding Association

The Association's website **breastfeeding.asn.au** has information about many aspects of breastfeeding.

Problems or concerns with breastfeeding?

- Free telephone help is available to all callers from within Australia from the **National Breastfeeding Helpline** 1800 mum 2 mum (1800 686 268) 24 hours a day, 7 days a week.
- Hearing or speech impaired? Call the National Relay Service on 1300 555 727 or go to **accesshub.gov.au/about-the-nrs** and ask them to connect you to the Breastfeeding Helpline 1800 686 268.
- Need an interpreter? Call the Translating and Interpreter Service (TIS National) on 131 450 and then ask them to phone the Breastfeeding Helpline 1800 686 268 or book a call via **tisnational.gov.au**
- **LiveChat** is available via our website at various times during the week. See our website for current availability.
- The Association's **mum2mum app** is available in iOS and Android formats. Members also receive premium breastfeeding content tailored to their baby's age and stage. See: **breastfeeding.asn.au/mum2mum-app**
- The **Breastfeeding ... with ABA podcast** and blog is filled with information and stories for every step of your journey. Learn more at **breastfeeding.asn.au/breastfeedingwithABA**

Peer support

- To find your local group, go to: **breastfeeding.asn.au/connect-your-local-group** and type in your postcode. There is a link to a calendar of events on this page.
- Many Association groups have a Facebook page or group. Check with your local group to gain access.

Electric breast pumps

Electric breast pumps are available for hire through many Association groups. Go to: **breastfeeding.asn.au/hire-breast-pump**, or contact your local group or the National Breastfeeding Helpline 1800 686 268 for more details. A discount applies for members of the Association.

Join the Australian Breastfeeding Association

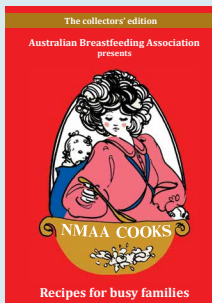
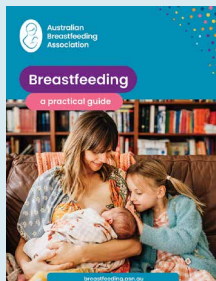
Becoming a member of the Australian Breastfeeding Association can help you gain skills, confidence and overcome challenges so you can reach your breastfeeding goals **breastfeeding.asn.au/memberships**



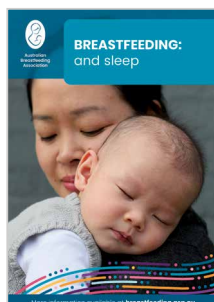
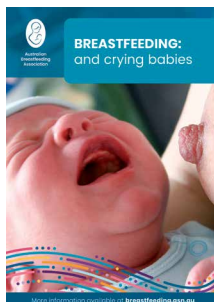
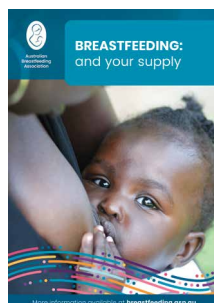
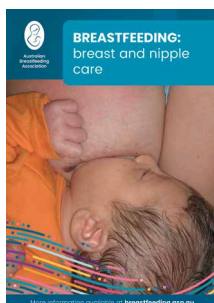
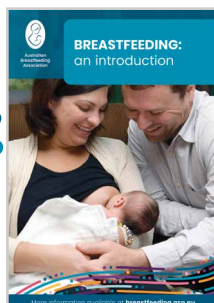
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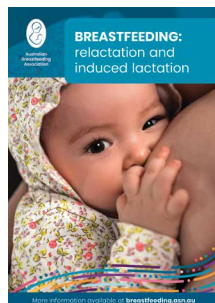
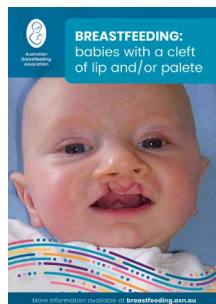
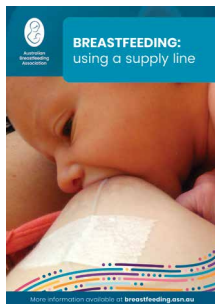
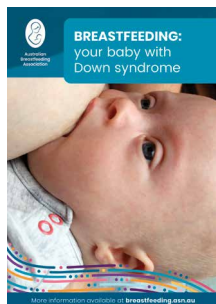
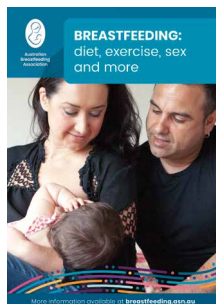
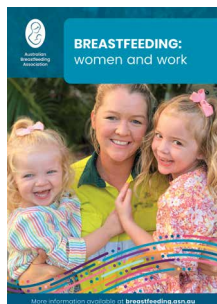
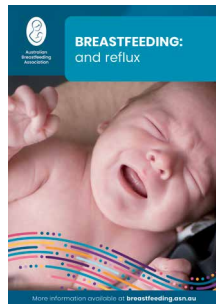
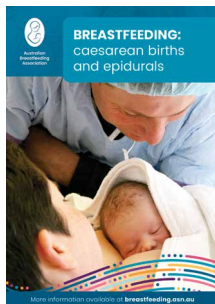
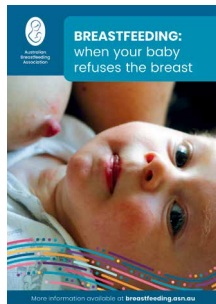
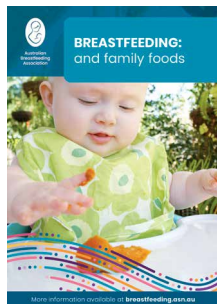
Visit **breastfeeding.asn.au/products** to purchase digital and hard copies of our booklets and other products, as well as membership bundles, gifts and workshops.

Books



Booklet series







Australian
Breastfeeding
Association

What we offer

Reliable breastfeeding information

Receive current and research-based information that's high quality, accurate and free from commercial influence. Let straightforward and practical information guide the choices you make for you and your family.

Local support groups

Delivered by our qualified breastfeeding counsellors and educators, local groups offer quality breastfeeding information, support and social connection. Local groups host in-person events where you can meet other families, share experiences, and ask questions. Pregnant women are encouraged to connect with a local group while they're pregnant, to gain tips and techniques to smooth those newborn weeks, and to powerfully build their parenting village. See our website for local group contact details and event info.

Online support (free for members)

Two series of 5 live webinars, offering information and support: Newborn Virtual Village, for the first 8 weeks; and Connect & Share, for beyond the newborn stage.

Additional member benefits

- Essence magazine. Quarterly publication with informative articles and member news.
- Priority LiveChat support
- Many extra mum2mum app features.
- Discounts on breastfeeding education, breast pump hire and products.

Resources for parents and health professionals

A wide range of handout literature and education aids, books and more are available at breastfeeding.asn.au/products

By **joining** the Australian Breastfeeding Association, you will gain access to our full, wrap-around services. As a volunteer organisation, becoming a member also helps us to continue our important work in the community. If you would like to support the Association, you can also make a tax-deductible donation by contacting our National Support Office or at breastfeeding.asn.au/donate

Breastfeeding help

Free to all within Australia 24 hours a day,
7 days a week.



1800mum2mum
Breastfeeding Helpline 1800 686 268

The National Breastfeeding Helpline is supported by
funding from the Australian Government

LiveChat with our qualified breastfeeding
educators and counsellors. See
breastfeeding.asn.au/livechat for
available times and to log on.



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