

Flat or Inverted Nipples

My nipples don't stick out as much as I think they should. Will I be able to breastfeed successfully?

Yes, you can breastfeed even if your nipples are flat or inverted. Babies feed on areolas, not nipples. When babies latch on and suck, they draw the nipple out, making it just the right size and shape for effective breastfeeding.

If you're wondering about whether or not your nipples are inverted, gently compress the areola (the pigmented area around the nipple) between your thumb and forefinger. Most nipples will protrude. Flat nipples don't do anything at all. Inverted nipples will retract. It's not unusual to have one nipple that is flat or inverted and one that is not.

It used to be common practice to treat flat or inverted nipples prenatally with nipple-stretching exercises and/or breast shells (plastic cups worn inside the bra that press on the areola, forcing the nipple out). Yet studies comparing treated with untreated groups showed the treated groups actually were less successful at breastfeeding. **Most breastfeeding specialists no longer recommend prenatal nipple treatment.** They believe that all the attention given to nipples prenatally makes the mother feel that her breasts are inadequate, setting her up for breastfeeding failure.

GETTING BABY STARTED AT THE BREAST

An alert newborn who latches on and sucks well is the best remedy for flat or inverted nipples. It's easiest for baby to learn to latch on in the first day or two after birth, before your milk comes in. Engorgement tends to make flat nipples flatter, which makes learning to latch-on more difficult. Plan on rooming-in with your baby right from the start, so that the two of you can have lots of practice with breastfeeding.

If you are having difficulties latching your baby on because of flat or inverted nipples try these suggestions:

- **Pay close attention to how baby takes the breast.** Review Latch-on basics and get hands-on help from a lactation consultant. Baby should grasp the breast with a wide-open mouth.
- **“Make” a nipple.** Use the “breast-sandwich” technique to get more breast tissue into baby's mouth. Hold your breast well back on the areola, with your fingers underneath and thumb on top. Press in with thumb and fingers while at the same time pushing back toward your chest wall. This elongates and narrows the areola, which enables baby to latch on more easily.
- **Use a breast pump to draw out your nipples before feedings.** The high-quality electric pumps available on hospital maternity wards will do the best job of drawing out the nipple without damaging it. You can also purchase a device specially designed to draw out an inverted nipple

before feeding the Evert-It Nipple Enhancer , or ask a nurse or LC to help you make your own with a 10 cc disposable syringe. Remove the plunger, and with a sharp knife cut off a half inch from the nozzle end. Insert the plunger into the cut end of the syringe. Place the uncut open end of the syringe over your nipple so it rests up against your areola. Gently pull on the plunger to draw out your nipple just before putting baby to the breast.

- **Try wearing breast shells designed for flat or inverted nipples between feedings or for thirty minutes before feedings.** Breast shells are made of plastic. They have two parts: a back with a hole through which the nipple can protrude and a rounded dome that fits inside your bra. Pressure on the shell from your bra against the areola gradually stretches out adhesions and allows the nipple to protrude. Be sure to wash these shells with soap and hot water between feedings and discard any milk that collects in them while you wear them in your bra. Note that shells come with two types of backs; the one with the larger hole is meant for treatment of sore nipples. Be sure to use the back with the small hole, which fits close to the nipple base.
- **If baby continues to have difficulty latching on, try a nipple shield.** You can get these from a lactation consultant who will also advise you on how to use the nipple shield without compromising your milk production.

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<http://www.askdrsears.com/topics/feeding-eating/breastfeeding/common-problems/flat-or-inverted-nipples>

