



Mastitis and Blocked Ducts

Prepared by: Papaya Clinic x Movement Lab Pelvic Health Physio team

What are blocked ducts and mastitis?

Blocked ducts occur when there is a compression in the milk ducts, causing a blockage – milk can then build up behind the blockage causing a hard lump, which can be tender, red and painful. This milk can seep into the surrounding tissues, leading to mastitis which is inflammation of the breast with symptoms such as redness, breast pain, swelling and general feeling of being unwell or flu-like symptoms.

Mastitis can be infective or non-infective, meaning with or without an infection.

What is involved in our Physiotherapy treatment session for Mastitis?

Initially our women's health physios will gather a detailed history on breastfeeding and locate any factors that may have contributed to the blocked ducts or mastitis.

We will then carry out an assessment to locate the affected areas.

Therapeutic ultrasound is applied to the affected breast tissues, **usually requiring 3 sessions 24 hours apart.** The ultrasound probe is moved around the affected breast tissues, it is not uncomfortable, and will not cause pain – some mild heat may be felt in the area.

Following therapeutic ultrasound some massage may be performed to aid in lymphatic drainage, and the women will be provided with individualised after-care plan, such as advice on breastfeeding positions, what to do before, during and after breastfeeding and demonstrations on how to self-massage the area.

We encourage women to bring their baby to the session as it is advised that directly after treatment that they breastfeed, or if not able to feed, to at least express following treatment.

How does therapeutic ultrasound help with mastitis?

There is evidence that therapeutic ultrasound:

- May reduce swelling by improving blood flow and encouraging lymphatic drainage
- May change permeability of the tissues.
- May reduce pain by impacting the sensory nerves in the area.

Usually, infectious mastitis needs antibiotics, but this is something that would need to be discussed with your local GP.

In the case of non-infective mastitis, if we can use therapeutic ultrasound to treat in a timely manner, it may reduce the need to rely on antibiotics thus reducing the impact on the women's gut health. Therapeutic U/S can also help in cases of infective mastitis once antibiotics have been prescribed and the course is started. It is likely that U/S may increase cell wall permeability thus improving the outcome of antibiotics.

Ultrasound is an effective treatment with the women reporting a reduction in pain and symptoms, along with improved breast feeding after the treatment sessions. Majority of the women required between 1-4 sessions to resolve symptoms. (*Lavigne & Gleberzon, 2012*)

	Blocked Ducts	Mastitis
Frequency	3MHZ if close to nipple or superficial (0-2cm), 1MHZ if deeper (2-5cm)	3MHZ if close to nipple or superficial (0-2cm), 1MHZ if deeper (2-5cm)
Intensity	Whatever patient tolerates – gradually increase w/cm2	Whatever patient tolerates – gradually increase w/cm2
Continuous/Pulsed	Continuous	Continuous
Treatment Area	1 or 2 per 2ERA over affected area	1 or 2 per 2ERA over affected area
Treatment Time	10 mins per ERA (20 mins max)	1 or 2 per 2ERA over affected area