



# Transitional Milk and Mature Milk

## Transitional Milk

When breastfeeding mothers talk about their milk coming in, they are referring to the onset of production of transitional milk, the creamy milk that immediately follows colostrum. Transitional milk is produced anywhere from about two to five days after birth until ten to fourteen days after birth.



Because your breasts will supply a much greater amount of transitional milk than colostrum, your breasts will become larger and firmer during this stage. This new fullness may feel uncomfortable at first and may make it more difficult for your baby to latch on to the breast correctly. With practice, however (and perhaps with the help of your baby's pediatrician or lactation specialist), you will help your baby latch on.

Sometimes expressing a small amount of milk by hand will help to soften the areola enough to make it easier for the baby to latch. The drops of milk on your nipple also will encourage your baby to feed. Breastfeeding will ease the pressure in your breasts and make you feel more comfortable.

As your baby latches on and begins to breastfeed steadily, you may notice a tingly pins-and-needles sensation. This feeling tells you that the milk let-down reflex has occurred, causing milk to be pushed out of the milk-producing cells into milk ducts so it's available to your baby. The let-down reflex can be stimulated by your baby's suckling, an approaching feeding time, or just the sound of your baby's hungry cry. Once this happens, your milk will flow more plentifully and your baby will enjoy a satisfying feeding. You will hear him swallowing more frequently. You may notice milk dripping or spurting from your other breast when let-down occurs.

In the early weeks of breastfeeding, you may notice cramping or "afterpains" of your uterus when the baby feeds at the breast. This is yet another result of the hormone oxytocin. It is important for you to try to relax and rest, as stress, pain, and fatigue may decrease milk production and release.

The combination of sharply increased demand and the resulting increased human milk supply may make you feel like you are constantly breastfeeding during this early period. Daytime feedings may be anywhere from one and a half to three hours apart and may range in length from ten minutes to close to an hour each. Human milk is easily digested by the baby, and breastfed newborns typically nurse eight to twelve times a day. Soon, however, the nursing pattern will stabilize, and feedings will become less frequent. Over time, feedings will continue to change in frequency and length, depending upon your baby's needs.

## Mature Milk

In most women, mature milk begins to appear near the end of the second week after childbirth. Mature milk is produced in as great a volume as transitional milk but is thinner and more watery or even bluish; sometimes it's described as looking like skim milk when it is first secreted, until the fat is released later in the feeding and it becomes more creamy.

Your breasts may appear somewhat softer and smaller than they did during the transitional-milk stage, though they will still be larger than before your pregnancy. These changes in your breasts and in your milk are normal and are designed to provide just what your baby needs for his nutrition, growth, and development.

Much later, after your baby begins to sample other liquids and solid foods, breastfeeding sessions will decrease in frequency. Some mothers choose to continue breastfeeding into the toddler or preschool years. By this time, the overall nutritional contribution of breastfeeding has diminished proportionate to the great variety of other beverages and solids the child is consuming. However, human milk continues to be as nutritious as cow's milk. The emotional and immunologic benefits of the nursing relationship continue throughout the period of lactation.

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