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- [Site Navigation](#)
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[Menu](#)

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Navigation

[Home](#) [Close Menu](#)

- - [Conversation-Going-travelling](#)
- [Conditions and treatments](#)
 - [Conditions and treatments](#)
 - [Allergies](#)
 - [Allergies](#)
 - [Allergic reaction to packaged food](#)
 - [Anxiety](#)
 - [Arthritis](#)
 - [Asthma](#)
 - [Behavioural conditions](#)
 - [Birth defects](#)
 - [Blood and blood vessels](#)
 - [Bones muscles and joints](#)
 - [Bones muscles and joints](#)
 - [Foot care - podiatrists](#)
 - [Brain and nerves](#)
 - [Cancer](#)
 - [Complementary and alternative care](#)
 - [Dementia](#)
 - [Healthy living](#)
 - [Healthy living](#)
 - [Alcohol](#)
 - [Babies and toddlers \(0-3\)](#)
 - [Children \(4-12\)](#)
 - [Drugs and addictive behaviours](#)

- [Environmental health](#)
- [Family Violence](#)
- [Older people in hospital – Get well soon](#)
- [Health checks](#)
- [Healthy Eating](#)
 - [Nutrition for life](#)
- [Healthy mind](#)
- [Healthy pregnancy](#)
- [Immunisation](#)
- [Services and support](#)
 - [Services and support](#)
 - [Aged care services](#)
 - [Alcohol and drug services](#)
 - [LGBTI support](#)
 - [Carers, caring and respite care services](#)
 - [Child, family and relationship services](#)
 - [Disability services](#)
 - [Emergency, crisis and support services](#)
 - [End of life and palliative care services](#)
 - [Hospitals, surgery and procedures](#)
 - [Mental health services](#)
 - [Planning and coordinating healthcare](#)
 - [Pregnancy and birth services](#)
- [A-Z](#)
 - [A-Z](#)
 - [Conditions and treatments](#)
 - [Healthy living](#)
 - [Services and support](#)
 - [Videos](#)
 - [Service profiles](#)
- [Blog](#)
 - [Blog](#)
 - [Blog authors](#)
 - [Topics](#)
- [Podcast](#)
 - [Podcast](#)
 - [Influenza - Dr Brett Sutton & Prof Kanta Subbarao](#)
 - [Trauma - Anne Leadbeater OAM & Dr Rob Gordon](#)
 - [template](#)
- [Other sites](#)
 -  [Health.vic](#)  [DHHS](#)  [Seniors Online](#)
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- [Facebook](#)
- [Googleplus](#)
- [Twitter](#)
- [Youtube](#)
- [Rss](#)
- [Conditions and treatments](#)
- [Healthy living](#)
- [Services and support](#)
- [A-Z](#)
- [Blog](#)
- [Podcast](#)



[Back to Babies and toddlers \(0-3\)](#)

- [Home](#)
- [Healthy living](#)
- [Babies and toddlers \(0-3\)](#)
- [Breastfeeding - dealing with nipple problems](#)

Breastfeeding - dealing with nipple problems

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Tags:

- [Babies and toddlers \(0-3\)](#)
- [Babies and toddlers \(0-3\) - Feeding your baby](#)

Summary

- Incorrect attachment of the baby on the breast is the most common cause of nipple pain.
- Breastfeeding is possible if you have inverted nipples.
- Avoiding soaps and shampoos during showering will help prevent nipple dryness.

Nipple pain is not a normal part of breastfeeding. Your nipples may be sensitive in the first few days after birth and while breastfeeding, but sore nipples indicate a problem. If you feel pain, you should seek help immediately to avoid further nipple trauma.

If there is a small amount of blood in your breast milk because of nipple trauma, it will not harm your baby. You can continue to breastfeed unless the pain becomes unbearable.

Tips on caring for your nipples

To prevent nipple problems:

- Ensure correct positioning and attachment of your baby when feeding.
- Avoid soaps and shampoos on the nipples during showering.
- Avoid nipple ointments, powders and tinctures. They may increase nipple problems.
- Leave milk or colostrum to dry on your nipples after breastfeeding. They both contain anti-infective agents.
- Change breast pads frequently. Don't use pads that hold moisture against the skin.
- If nipple pain or nipple trauma is not improving, seek help from your doctor or other medical advisor, lactation consultant or an Australian Breastfeeding Association counsellor.

Some mothers find it more comfortable without a bra; however, large-breasted women are usually more comfortable with the support of a properly fitted maternity bra. Breast shells can be used to protect sore nipples. These are hard plastic domes with holes in them, which allow the nipples to air.

Incorrect attachment is the main cause of nipple problems

Incorrect attachment of the baby onto the breast is the most common cause of nipple pain. Slightly changing the position of the baby on the breast should help. Your midwife, lactation consultant or an Australian Breastfeeding Association breastfeeding counsellor can show you how to attach the baby properly or talk to you about baby-led attachment.

Breastfeeding with inverted nipples

If you have flat or inverted nipples, a little more patience may be needed while you and your baby learn to breastfeed. Strategies that can help include:

- Breastfeed within the first hour of birth – when the baby is alert and ready to suck.
- Use the baby-led attachment technique – immediately after the birth and in the first few days.
- Express either manually or with a pump to draw out the nipple – use a cup or spoon to feed the milk to the baby if necessary.
- Avoid the use of bottles and dummies – they can cause sucking confusion.
- Occasionally, the use of a nipple shield for breastfeeding with flat or inverted nipples is helpful – the clear silicone types are the most suitable. Once the baby is sucking well and the nipple is drawn out, the shield may be able to be removed. When using a nipple shield, the baby should still be correctly positioned and attached to the breast.

Nipple thrush

Nipple thrush (a fungal infection) may occur in the first weeks after birth, but can develop at any time. Signs and symptoms include:

- Severe, burning nipple pain for the entire breastfeed – correct attachment does not alter the pain. There may be shooting or radiating pain throughout the breast
- The nipples are a brighter pink than normal and may be shiny. They may, however, look normal
- Breast pain, which feels like red hot needles radiating from behind the nipple toward the back
- Thrush in the baby's mouth or on the buttocks.

How to tell if your baby has thrush

Oral thrush appears as white spots in your baby's mouth that cannot be wiped away. When thrush occurs around the buttocks, it causes a red rash on the skin.

Treating thrush – mother

Treatment includes:

- Antifungal ointments such as nystatin, clotrimazole and miconazole. These are applied to the nipple after each feed. Oral antifungal treatment such as fluconazole may also be used
- Airing the nipples or going without a bra
- Good hygiene – wash your hands after touching your breasts, using the toilet or changing nappies
- Vaginal antifungal pessaries, if you also have vaginal thrush. It is advisable to consult your doctor
- Washing bras and nursing pads separately from nappies and drying all of them in the sun where possible.

Some mothers find it helps to reduce sugar and yeast in their diet. See your doctor or other medical advisor if thrush persists.

Treating thrush – baby

Treatment includes:

- Nystatin liquid or miconazole for oral thrush
- Antifungal ointments for thrush around the buttocks.

Bacterial infections

Recent research has found that a bacterial infection of the nipples can be mistakenly diagnosed as nipple thrush or may be present in conjunction with thrush. Treatment with an antibacterial ointment or a combination antibacterial and antifungal ointment will often heal unresolved 'thrush'. A combination ointment may be recommended or an antibacterial such as mupirocin. An oral antibiotic can also be used.

Your doctor may send a swab of the nipples to be cultured, to identify the most appropriate antibiotic to use.

Dermatitis (skin irritation) around the nipple

Dermatitis around the nipple and areola can be caused by:

- Ointments and creams you are using on the nipples – stop using them if you develop dermatitis
- Detergents used to wash your bra, breast pads or undergarments – use pure soap, rinse well and dry in the sun
- Sensitivity to soaps or shampoo
- Reaction to the fabric of your bra or bra pads – it may be helpful to go without a bra
- Sensitivity to the moisture-absorbing gel in some disposable nursing pads.

Nipple eczema can cause considerable pain

Nipple eczema can cause considerable pain and discomfort for a few women. Eczema causes inflammation of the skin, leading to blister-like lesions that crust over. You will need referral to a skin specialist if you develop eczema. Dietary changes and a short, intensive course of cortisone cream may help.

Other causes of nipple problems

Nipple trauma can also occur when a breast pump has been used incorrectly or from failing to break the suction before removing the baby from the breast (this is done by sliding a clean finger into the corner of your baby's mouth).

Where to get help

- Your midwife
- Your doctor
- A lactation consultant – contact the [Lactation Consultants of Australia and New Zealand](#)
- An Australian Breastfeeding Association breastfeeding counsellor Tel. 1800 mum 2 mum (1800 686 2 686)
- Your maternal and child health nurse
- Maternal and Child Health Line (24 hours) Tel. 132 229
- Breastfeeding Day Clinic – many hospitals have a day stay program, which assists women with infant feeding problems. The Royal Women's Hospital Breastfeeding Education and Support Services program is open weekdays, 8.30am to 4.30pm Tel. (03) 9344 3651

Things to remember

- Incorrect attachment of the baby on the breast is the most common cause of nipple pain.
- Breastfeeding is possible if you have inverted nipples.
- Avoiding soaps and shampoos during showering will help prevent nipple dryness.

References

- *Breastfeeding*, Population Health Division, Department of Health and Ageing, Australian Government. [More information here.](#)
- *General breastfeeding information*, Australian Breastfeeding Association. [More information here.](#)

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The following content is displayed as Tabs. Once you have activated a link navigate to the end of the list to view its associated content. The activated link is defined as Active Tab

- [Babies and toddlers basics](#)
- [Newborn babies](#)
- [Feeding your baby](#)
- [Growth and development](#)
- [Behaviour and learning](#)
- [Healthy eating](#)
- [Care and wellbeing](#)
- [Health conditions and complaints](#)
- [Sleep](#)
- [Safety](#)
- [Grief and trauma](#)

Babies and toddlers basics

- [Baby bath - bathing \(video\)](#)
[Detailing on bathing from the Royal Women's Hospital...](#)
- [Baby bath - preparation and safety \(video\)](#)
[Detailing on baby bathing from Royal Women's Hospital...](#)
- [Baby bath - skin care \(video\)](#)
[Detail on baby skin care from Royal Women's Hospital...](#)
- [Childhood immunisation](#)
[Being immunised from an early age helps protect your child against serious childhood infections...](#)
- [Children and health services](#)
[There is a range of subsidised and free health services, including services for mental health and dental health, available for children in Victoria...](#)
- [Early support for a child with disabilities](#)
[For children diagnosed with a disability, getting the support they need as early as possible will give them the best chance of minimising the long-term effects of the disability...](#)
- [Immunisation – deciding which vaccines you need](#)
[Everyone's immunisation needs are different and are influence by your health, lifestyle, age and occupation...](#)
- [Maternal and child health services](#)
[Your local maternal and child health service will be a great source of support after your baby is born...](#)
- [No Jab No Play](#)
[No Jab No Play – from 1 January 2016, all parents/guardians seeking to enrol their child at an early childhood service in Victoria must provide evidence that the child is fully immunised for their age...](#)
- [Parenting services](#)
[Parenting is one of the most important tasks we undertake but it doesn't always come naturally...](#)

Newborn babies

- [Baby bath - bathing \(video\)](#)
[Detailing on bathing from the Royal Women's Hospital...](#)
- [Baby bath - preparation and safety \(video\)](#)
[Detailing on baby bathing from Royal Women's Hospital...](#)
- [Baby bath - skin care \(video\)](#)
[Detail on baby skin care from Royal Women's Hospital...](#)
- [Jaundice in babies](#)
[If your baby is full-term and healthy, mild jaundice is nothing to worry about and will resolve by itself within a week or so...](#)
- [Newborn bloodspot screening](#)
[Every newborn baby in Australia is offered a newborn bloodspot screening test to identify those at risk of rare, but serious, medical conditions...](#)

- [Phenylketonuria \(PKU\)](#)

[PKU is an inherited disorder that prevents the normal breakdown of a protein found in some foods...](#)

- [Phototherapy at Home](#)

[Jaundice is very common in newborns, so it's nothing to be too worried about. Treatment is very easy and safe. It all happens using blue light from a special blanket that you wrap your baby in. The...](#)

- [Premature babies](#)

[Sometimes premature labour can be delayed to increase a baby's chance of survival...](#)

- [Sudden unexpected death in infants \(SUDI and SIDS\)](#)

[You can reduce your baby's risk of sudden unexpected death by providing a safe sleeping environment and avoiding tobacco smoke...](#)

- [The Maternal and Child Health phone app](#)

[The Maternal & Child Health app \(MCH\) provides reliable maternal and child health \(MCH\) information that families can use every day...](#)

Feeding your baby

- [Asthma - pregnancy and breastfeeding](#)

[Pregnant women with asthma need to continue to take their asthma medication as it is important to the health of both mother and baby that the mother's asthma is well managed...](#)

- [Baby care - weaning](#)

[Be guided by your baby and let them set the pace when weaning and introducing solid foods...](#)

- [Bottle feeding - nutrition and safety](#)

[Breastmilk or commercial infant formula is necessary for all babies less than 12 months...](#)

- [Breastfeeding and travel](#)

[Breastmilk protects your baby from illness and infection, so it is the safest drink for your baby while travelling...](#)

- [Breastfeeding and work](#)

[You can successfully combine breastfeeding with work if you have support from your employer, colleagues and family...](#)

- [Breastfeeding and your diet](#)

[Breastfeeding women need to eat regularly and include a wide variety of healthy foods in their diet...](#)

- [Breastfeeding - dealing with mastitis](#)

[Mastitis affects some breastfeeding women and may be caused by blocked milk ducts or a bacterial infection...](#)

- [Breastfeeding - dealing with nipple problems](#)

[Your nipples may be sensitive in the first few days after birth, but nipple pain is not a normal part of breastfeeding...](#)

- [Breastfeeding - deciding when to stop](#)

[It is up to you and your baby to decide when breastfeeding should stop...](#)

- [Breastfeeding - expressing breastmilk](#)

[Expressing breast milk by hand is a cheap and convenient method...](#)

- [Breastfeeding - the first days](#)

[Let your baby feed as much as they want in the first few days to help establish good breastfeeding patterns...](#)

- [Breastfeeding - when to start](#)

[Breastfeeding within the first hour after birth allows your baby to behave instinctively and breastfeed with little intervention...](#)

- [Food for babies - tucker talk tips](#)

[Before six months, breastmilk or formula is the only food and drink that your baby needs...](#)

- [Lactose intolerance](#)

[Symptoms of lactose intolerance include bloating, gas, abdominal pain and diarrhoea...](#)

Growth and development

- [Child development \(1\) - newborn to three months](#)
[Infants in the first eight weeks have no control over their movements and all their physical activity is involuntary or reflex...](#)
- [Child development \(2\) - three to six months](#)
[Young babies still have a notion that the whole of life is happening inside themselves, and they are 'making it all happen'...](#)
- [Child development \(3\) - six to nine months](#)
[Fun activities, such as shaking or banging objects, helps a baby understand they have an effect on the world...](#)
- [Child development \(4\) - nine to 12 months](#)
[At nine months your baby is moving around by crawling or pulling along with their arms. Safety is very important now. Your baby is also 'talking' with recognisable sounds and may even say simple words...](#)
- [Child development \(5\) - one to two years](#)
[Between the age of one and two, your toddler understands they are a completely separate person from you...](#)
- [Child development \(6\) - two to three years](#)
[Parents can be tricked into thinking our toddlers are more grown up than they really are...](#)
- [Children's feet and shoes](#)
[A child learning to walk receives important sensory information from the soles of their feet, and shoes can make walking more difficult...](#)
- [Growth charts for children](#)
[Babies and young children do not usually grow in a perfectly smooth way, but instead grow in 'bursts'...](#)
- [Teeth development in children](#)
[Teething symptoms are common in children and can be managed without medications...](#)
- [The Maternal and Child Health phone app](#)
[The Maternal & Child Health app \(MCH\) provides reliable maternal and child health \(MCH\) information that families can use every day...](#)
- [Toilet training](#)
[When toilet training your toddler, praise every little success and remain calm about accidents...](#)

Behaviour and learning

- [10 tips for managing sibling rivalry](#)
[Teach your children to sort out minor differences themselves... 10 tips for managing sibling rivalry...](#)
- [10 tips to raise an optimistic child](#)
[Be a positive role model ... 10 tips to raise an optimistic child...](#)
- [Anxiety and fear in children](#)
[You can help your child overcome anxiety by taking their fears seriously and encouraging them to talk about their feelings...](#)
- [Children and shyness](#)
[If your child's shyness is especially debilitating, you may like to consider professional help from a counsellor or psychologist...](#)
- [Children and sibling rivalry](#)
[Sibling rivalry is a common problem, particularly among children who are the same sex and close together in age...](#)
- [Discipline and children](#)
[Disciplining your child means teaching them responsible behaviour and self-control...](#)
- [Dummies](#)
[Dummy sucking should stop before school age to avoid teeth or mouth problems...](#)
- [Left-handedness](#)
[If your child is naturally left-handed, don't try to force them to use their right hand...](#)
- [Tantrums](#)
[When a young child is having a tantrum, it is because the emotional \(limbic system\) part of the brain is dominating the child's behaviour...](#)

- [Thumb and finger sucking](#)
[Finger or thumb sucking should stop before school age to avoid mouth problems...](#)
- [Toddlers and fussy eating](#)
[If you restrict yourself to a narrow range of foods, your child will notice and copy your wariness...](#)
- [Toddlers and mealtime manners](#)
[Some toddlers do most of their eating on the run, refusing to sit down at the table at all...](#)

Healthy eating

- [Baby care - weaning](#)
[Be guided by your baby and let them set the pace when weaning and introducing solid foods...](#)
- [Breakfast](#)
[Children who skip breakfast may lack sufficient vitamins and minerals including iron, calcium, zinc and vitamin B2...](#)
- [Childcare and healthy eating](#)
[Childcare centres should provide healthy meals for your children...](#)
- [Children's diet - fruit and vegetables](#)
[If you eat and enjoy fruit and vegetables every day, your child may eventually follow your lead...](#)
- [Eating tips for babies](#)
[First foods for babies can be prepared easily and cheaply at home without salt, seasonings and sweeteners...](#)
- [Eating tips for children \(3\) - older toddlers](#)
[Offer children the same foods as the family, with a variety of textures and flavours for balanced nutrition...](#)
- [Eating tips for young toddlers](#)
[Children have a natural ability to sense when they are hungry and when they are full...](#)
- [Soft drinks, juice and sweet drinks - children](#)
[Encourage children to drink and enjoy water. Sweet drinks such as juice, cordial and soft drinks may cause health problems for children if consumed in large amounts...](#)
- [Toddlers and fussy eating](#)
[If you restrict yourself to a narrow range of foods, your child will notice and copy your wariness...](#)
- [Toddlers and mealtime manners](#)
[Some toddlers do most of their eating on the run, refusing to sit down at the table at all...](#)

Care and wellbeing

- [Baby bath - bathing \(video\)](#)
[Detailing on bathing from the Royal Women's Hospital...](#)
- [Baby bath - preparation and safety \(video\)](#)
[Detailing on baby bathing from Royal Women's Hospital...](#)
- [Baby bath - skin care \(video\)](#)
[Detail on baby skin care from Royal Women's Hospital...](#)
- [Childhood immunisation](#)
[Being immunised from an early age helps protect your child against serious childhood infections...](#)
- [Children and health services](#)
[There is a range of subsidised and free health services, including services for mental health and dental health, available for children in Victoria...](#)
- [Child safety in the car](#)
[Taking care to restrain children correctly while travelling in a car is the best way to prevent injuries...](#)

- [Dental checks for young children](#)
[Children should have an oral health check by the time they turn two...](#)
- [Immunisations - vaccinations in Victoria, Australia \(video\)](#)
[Vaccinations are encouraged for all individuals living in the state of Victoria, Australia. The immunisation program in Victoria may be different than other countries, and individuals who have moved...](#)
- [Melissa's story \(video\)](#)
[Melissa shares her story of how her baby caught chickenpox at 5 weeks old...](#)
- [No Jab No Play](#)
[No Jab No Play – from 1 January 2016, all parents/guardians seeking to enrol their child at an early childhood service in Victoria must provide evidence that the child is fully immunised for their age...](#)
- [Phototherapy at Home](#)
[Jaundice is very common in newborns, so it's nothing to be too worried about. Treatment is very easy and safe. It all happens using blue light from a special blanket that you wrap your baby in. The...](#)
- [The Maternal and Child Health phone app](#)
[The Maternal & Child Health app \(MCH\) provides reliable maternal and child health \(MCH\) information that families can use every day...](#)
- [Travelling with children](#)
[If your child is old enough, involve them in planning a trip so they can get excited about it...](#)

Health conditions and complaints

- [Asthma in childhood - triggers \(video\)](#)
[Parents and children talk about some of the factors that can cause a child's asthma to flare up...](#)
- [Back pain in children](#)
[Children with back pain may grow into adults with chronic bad backs, so it is important to encourage sensible back care...](#)
- [Bedwetting](#)
[Bedwetting is a problem for many children and punishing them for it will only add to their distress...](#)
- [Bronchiolitis](#)
[Bronchiolitis is a common chest infection in babies under six months of age...](#)
- [Colic](#)
[Caring for a crying baby with colic can be stressful, so take some time out to calm down...](#)
- [Constipation and children](#)
[A healthy diet, plenty of fluids, exercise and regular toilet habits can help relieve constipation in children...](#)
- [Cradle cap](#)
[Cradle cap is not contagious and it is not caused by poor hygiene or bad parenting...](#)
- [Croup](#)
[Croup is a viral infection of the throat and windpipe that causes noisy breathing, a hoarse voice and a harsh, barking cough...](#)
- [Fever - children](#)
[Fever is a way in which the body fights infection. A fever is not dangerous and does not always indicate a serious illness...](#)
- [Gastroenteritis in children](#)
[Gastroenteritis or Gastro can be dangerous for very young babies. Gastro is common in young children and spreads easily. Gastro is a bowel infection which causes diarrhoea \(runny or watery poo\) and...](#)
- [Nappy rash](#)
[Most babies get nappy rash at some stage, no matter how well they are cared for...](#)
- [Phototherapy at Home](#)
[Jaundice is very common in newborns, so it's nothing to be too worried about. Treatment is very easy and safe. It all happens using blue light from a special blanket that you wrap your baby in. The...](#)

- [Roseola infantum](#)

[Roseola is a mild viral infection with associated fever and rash that affects babies and young children...](#)

Sleep

- [Baby care - moving from cot to bed](#)

[Some children are unsettled the first few nights in a 'big bed'. Try to be patient, loving and reassuring...](#)

- [Sleep and your baby](#)

[Sleeping habits are learned, so try to set up a bedtime routine for your baby as soon as you can...](#)

- [Sleep - children and naps](#)

[A child needs a daytime nap until they are around two and a half to three years of age...](#)

- [Sleep - children and nightmares](#)

[Your child may have only a few scary dreams a year, or be troubled by nightmares much more often...](#)

- [Sudden unexpected death in infants \(SUDI and SIDS\)](#)

[You can reduce your baby's risk of sudden unexpected death by providing a safe sleeping environment and avoiding tobacco smoke...](#)

Safety

- [Animals and child safety](#)

[Children should always be closely supervised near animals and taught how to behave safely around pets...](#)

- [Babies and safety](#)

[Most injuries to babies do not occur by chance - many are predictable and largely preventable...](#)

- [Baby care - moving from cot to bed](#)

[Some children are unsettled the first few nights in a 'big bed'. Try to be patient, loving and reassuring...](#)

- [Baby furniture - safety tips](#)

[Even if your baby furniture meets every safety standard and recommendation, your child still needs close supervision...](#)

- [Bicycle safety and children](#)

[As they grow and develop, and with the help of adults, children become increasingly aware of how they can manage their own safety and become safer road and bicycle users...](#)

- [Burns and scalds - children](#)

[Most hot tap water scald injuries to children happen in the bathroom...](#)

- [Child safety and injury prevention](#)

[By making a few practical changes to your home, you can dramatically reduce the risk of injury to your child...](#)

- [Child safety – at home](#)

[The best way to reduce the risk of injury to children is to remove a potentially dangerous item or add a safety product...](#)

- [Child safety in the car](#)

[Taking care to restrain children correctly while travelling in a car is the best way to prevent injuries...](#)

- [Family violence and children](#)

[Children exposed to domestic violence are more likely to experience emotional and behavioural problems...](#)

- [Farm safety – children](#)

[Children who live on farms are at greater risk of injury and death than their parents or other farm workers...](#)

- [Hot weather and child safety](#)

[Babies and children can quickly lose body fluids in hot weather, which can lead to dehydration...](#)

- [Playgrounds and child safety](#)

[Play environments can be safe and beneficial for your child. With proper planning, you can make sure your child gets plenty of playtime activity...](#)

- [Poisoning and child safety](#)

[Call the Poisons Information Centre on 13 11 26 immediately if you suspect your child has been poisoned or given the wrong medicine or the wrong dose of medicine...](#)

- [Road and traffic safety for children](#)

[As they grow and develop, and with the help of adults, children become increasingly aware of how they can manage their own safety, and become safer road users...](#)

- [Sudden unexpected death in infants \(SUDI and SIDS\)](#)

[You can reduce your baby's risk of sudden unexpected death by providing a safe sleeping environment and avoiding tobacco smoke...](#)

- [Water safety for children](#)

[Toddlers are most at risk of drowning because they are mobile and curious but don't understand the danger of water...](#)

Grief and trauma

- [Child Protection Service](#)

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- [Sudden unexpected death in infants \(SUDI and SIDS\)](#)

[You can reduce your baby's risk of sudden unexpected death by providing a safe sleeping environment and avoiding tobacco smoke...](#)

- [Trauma and children - newborns to two years](#)

[Babies and toddlers can be as affected by trauma as any other family member...](#)

- [Trauma and children – tips for parents](#)

[Tell your child the facts about a distressing or frightening experience using language they can understand...](#)

- [Trauma and children - two to five years](#)

[Preschoolers may not have the words but will show their distress at traumatic events through changes in behaviour and functioning...](#)

Related Information

- [No Jab No Play](#)

[No Jab No Play – from 1 January 2016, all parents/guardians seeking to enrol their child at an early childhood service in Victoria must provide evidence that the child is fully immunised for their age...](#)

- [Breastfeeding - deciding when to stop](#)

[It is up to you and your baby to decide when breastfeeding should stop...](#)

- [Breastfeeding - expressing breastmilk](#)

[Expressing breast milk by hand is a cheap and convenient method...](#)

- [Baby care - weaning](#)

[Be guided by your baby and let them set the pace when weaning and introducing solid foods...](#)

- [Breastfeeding - the first days](#)

[Let your baby feed as much as they want in the first few days to help establish good breastfeeding patterns...](#)

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Related information on other websites

- [Australian Breastfeeding Association](#)
- [Mercy Health - Breastmilk Bank](#)

Support Groups

- [Australian Breastfeeding Association](#)

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