

Speaker 1 ([00:20](#)):

[Inaudible]

Dianne ([00:20](#)):

Hey, welcome to the badass breastfeeding podcast. This is Dianne, your lactation consultant,

Abby ([00:25](#)):

And I'm Abby. The badass breastfeeder and today's episode is brought to you by Fairhaven health. Fairhaven Health health sells the wildly popular milk saver that has moms raving about how much milk they are collecting by simply collecting their leaking breast milk. And today's episode is also brought to you by a new sponsor, love and fit, a revolutionary new active wear brand that is designed for moms by moms. And we'll hear more about our sponsors later, but I think Dianne has our review of the week.

Dianne ([00:55](#)):

Okay. I do have our review of the week. We get such good reviews. I say that every week, I'm always like, I don't know which one to read, but this is from put myglassesonbank18, who says that she loves us. Put two little heart emojis in there too, just for kicks. "I Absolutely love this podcast. I wish I'd found this podcast earlier, but I was about four months into my breastfeeding journey when I found it. And I am now almost nine months into my journey. This show has given me so much helpful information for myself and other breastfeeding moms in my life. Thanks to the show or the confidence to unapologetically nurse my baby, no matter where we are. Thank you ladies so much for what you do." Congratulations. And that was a couple of months ago, so she's probably like creeping up on a year.

Abby ([01:45](#)):

Oh, wow. Yeah. That's cool. Congratulations. Happy first nursiversary!

Dianne ([01:50](#)):

Ooh, that's a word. Holy cow. Yeah. Just send us reviews. We would love to hear your thoughts about all the things. So send us reviews. You can put them on iTunes that really helps the podcast a lot. Or if you can't put it on iTunes, you can just send us an email. Cause we read those too, and we love them. Thank you so much. Thanks for the love

Abby ([02:18](#)):

Badassbreastfeedingpodcast@gmail.com is what she means by email.

Dianne ([02:26](#)):

I just, yeah. Don't pay attention.

Abby ([02:29](#)):

No, it stands to reason that it's badassbreastfeedingpodcasts@gmail.com, that's what it would be.

Dianne ([02:35](#)):

So send it to us. We'll watch for them and that's it. And off we go, we're going to do a popular, popular, popular topic, popular. We're going to do a topic based on all of the messages that you all send us that start with. How can I increase my milk supply?

Abby ([03:00](#)):

Question of the century because it's probably about, about a century where people started wondering before that, I assume we just assumed we were making enough, you know, I'm sure there's still places in the world where people don't even think about that. Right? Like we're just like, it's just a thing in places where breastfeeding is more normalized. People have less concerns, less issues because it's just happening everywhere.

Dianne ([03:31](#)):

So I love to talk about this topic because there's so much, there's so much and a lot of it is so society driven. I did a video consult with somebody this week who was really concerned, like no supply and dah, dah, dah. It's like the issues they were having were not milk supply issues. It was, the baby was fussy, changing up her sleep patterns, you know, like doing different things.

Dianne ([03:59](#)):

And it was like that baby was fine. Like low supply was fine, but it seems like whenever your baby does something that you don't think they should be doing or that is it typical for what they did the day before gotta be a milk supply issue. Right. Gotta be milk supply. They're not getting enough to eat. I'm not making enough, very hungry. And I need more milk when that's not right at all.

Abby ([04:23](#)):

So what's the, what are like the, yeah. What are the like popular things that we see that are really, that really send people in, you know, into a tizzy about milk supply?

Dianne ([04:32](#)):

Like definitely the fussy baby. Like we, you know, after they nurse they're super fussy so that we just assume that they're still hungry and that there's nothing left in the boob. Or maybe you never even thought that, but somebody else, or your doctor told you, somebody said, Oh, well, are you sure the baby's eating enough? And then you go, Oh my God, maybe the baby's not eating enough. And now you're ruined for the rest of your life because yeah. Don't know anymore where you were confident five minutes ago now it's gone. And like not sleeping a lot at night or waking up again after not waking. They must be hungry. Let's start giving them cereal.

Abby ([05:22](#)):

That'll help them sleep longer at night. No, don't do that. And then, or like I used to pump this much now I'm not pumping so much, which we can just direct you immediately to our episode that we'll put in the show notes of how to pump more milk. I used to pump this and now I'm pumping this right. How do I make more milk?

Dianne ([05:54](#)):

And we're not going to get into the whole pumping thing today. We do have a whole episode on it. And it's a whole different thing. It's a whole different thing. But I am just going to say, just for fun, we know pumping does not equate how much milk you have.

Abby ([06:07](#)):

That's right. Has nothing to do with it,

Dianne ([06:09](#)):

Nothing to do with it. And that's all, we're just going to leave that there because it has nothing to do with it.

Abby ([06:15](#)):

Right. If you're in that situation, just go to [badassbreastfeedingpodcast.com](http://badassbreastfeedingpodcast.com) and find the episode and listen to that one. And then what else, why else do people think that they have low milk supply?

Dianne ([06:28](#)):

Growth spurts? Well, that's babies wanting to feed more frequently. All of a sudden like a frequent nursing. So, and that's what I mean when like maybe yesterday your baby was doing the regular every two hour thing and now today they're fussier and want to feed every hour and not napping well and woke up during the night. So it must be that all of a sudden overnight your milk supply went away. No.

Abby ([07:02](#)):

So there are this goes into the whole like myths, milk supply myths of which there are, you know, several episodes. We talked about doing like an episode, like every month on that, because there's so many, there's so many that it's like impossible to cover all of them. But pretty much all of the myths that we talk about are They're like milk supply driven, right?

Abby ([07:38](#)):

It's mostly, it's mostly milk supply.

Dianne ([07:42](#)):

It is huge. It is a huge thing. I have heard some crazy things. I've heard about milk supply over the years. And I think one of the ones recently that I heard was somebody saying, well, I was told that I have to pump from the very start or my milk supply is not going to be okay.

Abby ([08:20](#)):

Or she's leaking. That must mean that she has a lot more milk than I do, or I used to be engorged. I'm not engorged anymore.

Dianne ([08:32](#)):

That's a big one. Yep. Or I wasn't ever engorged at all. I'm not engorged.

Abby ([08:41](#)):

Right. That's your body like, figuring it out. That's your body initially confused.

Dianne ([08:50](#)):

And then it's like, oh, too much. Cause your body's just gonna like make too much because it doesn't know and then dials back. Dialing back and regulating, you're feeling less full. So, and I always try to tell moms like in the beginning, when your milk first comes in, you may, you might feel full. I mean, sometimes don't, but that doesn't mean anything. So you might feel full and then a couple of weeks later, you might not feel as full anymore. And I have a lot of moms that will contact me and be like, my breast feel really soft. I'm not really full anymore. What happened? Do I not have enough milk now? And it's like, no, now your body's regulating. So you're going to feel full. And then in two weeks you're going to call me and say, why don't I feel full anymore? That's normal. You're not supposed to walk around for the whole breastfeeding relationship feeling full and uncomfortable.

Abby ([09:39](#)):

No. And that's not even good. That's where clogged ducts and mastitis and all that stuff come in. Right.

Dianne ([09:44](#)):

Right. And you're uncomfortable. You're supposed to feel like you're a normal human,

Abby ([09:48](#)):

Right. You're not supposed to be miserable the whole time. That's not how it was made. Like when it's working well, you're totally miserable. No.

Dianne ([09:57](#)):

It's one of the things I think that people don't want to know is that the more you breastfeed, the more frequently your baby breastfeeds, especially in the beginning, the more comfortable you are. But in our society, people say, Oh no, your baby's feeding every hour and a half. No, that's not right. You must not have enough milk. You supposed to feed your baby and then not touch them again for another four hours. Like that is not reality. The more frequently you feed your baby, the more milk your body makes, the more comfortable your body is. And the happier your baby is. But most people don't have that idea because society is like, you shouldn't be feeding your baby all the time. And if you are something's wrong.

Abby ([10:50](#)):

And this is, and there's so much like bottle feeding norms that get pushed onto breastfeeding, right? Cause you do have to schedule bottle feedings. You don't bottle feed on demand. You are going to stick to a schedule. But so because of that, then it's like bottle feeding is so normal. Breastfeeding is so abnormal here that we put all of that understanding of bottle feeding onto breastfeeding. And it just screws it up.

Dianne ([11:17](#)):

Right? When you get into a place from the very beginning where you are just listening to your baby, listening to your body, doing what your baby's asking, feeding on demand, you know, all those things, everything works out the way it's supposed to. You're following the natural path of breastfeeding. When you get into this place where you're like, let me start pumping early let me try to stretch the baby out. Let me time my feeds let's, you know, make sure that you're feeding for this long or making sure that you're feeding every three hours instead of every hour and a half like that. When you start trying to

control what can't be controlled, that's when we start running into problems. But we really have a hard time with that because it's like, you want to be able to control and measure and that is not ideal for newborn babies. It's just not.

Abby ([12:20](#)):

Yeah. But that's really hard for people to wrap their heads around. So if you're still convinced that you have low milk supply, there are some things that could be going on that would actually be creating a supply issue.

Dianne ([12:37](#)):

So the thing is that the majority of women will make enough milk. The majority of women in the world make enough milk. But for that small percentage that don't, or there are things that can happen during your breastfeeding relationship that might trigger a decrease in your milk supply. So that's what we wanted to, you know, that's what we're kind of talking about here.

Abby ([13:10](#)):

So like, if you actually cannot, you're doing everything right. And you cannot make enough milk. That is so rare. And it's a condition, right. A particular condition can lead to this too. It's usually hormone or IGT. Where there's not enough tissue, insufficient glandular tissue, when there's just not enough tissue, but that is so rare. It's not like just, you know, running rampant through the human species. It's not, that's extremely rare condition that would actually prevent you from making a full milk supply. And, or hormonal stuff. Or like latch issues,

Dianne ([13:57](#)):

That's with latch issues from the very beginning. And when I say like that, that is like from the very beginning. So if your baby pops out of the womb is not latching well is not feeding well is not, they are not sending the message to your body, that they need your body to make the milk because the latch is preventing them from pulling the milk out. So your body's not empty. Your breast is not being emptied and your breast is not getting your, body's not getting the signal to make more milk.

Dianne ([14:29](#)):

So in pumping, as we know, does not trigger the same hormonal response and does not empty the breast that the baby does. So when you have that separation there where the baby's not feeding well, that can trigger a low milk supply because the baby is just not stimulating the way we need baby to tell your body in the beginning, this is how much milk I need. And then if you pair that with like a really traumatic birth or blood loss, or, you know, something like that, which can also add into issues with milk supply in the beginning, then that's kind of like a perfect storm. But if you get help early, so sometimes I'll have moms contact me like, you know, a month in and the latch was never fixed and they're still having problems. And you know, just kind of like pumping and supplementing, but like the latch never, the feed itself never got fixed. So it damaged the milk supply from the start. So get help early. That's pretty much the bottom line with that, with that scenario, if it's a latch problem, if somebody is telling you on week one, you're just not making enough milk to see somebody that, you know, get a second opinion on that, because it's not that you can't make enough milk. It might be that something's going on there. That's the, baby's not telling your body what it needs.

Abby ([15:55](#)):

Right. And that's so easily fixed. It's just, these are, these are things that have easy fixes and the sooner that you do it, the easier it is to fix.

Dianne ([16:05](#)):

Absolutely. Just like with anything. I think, you know, people don't realize that babies need help in the beginning. Yes. Breastfeeding is a very natural thing, right? But it's learned. Well, everybody's learning your baby. Your baby is learning just as much as you are about breastfeeding, your baby has to figure it out.

Dianne ([16:31](#)):

Somebody said that to me the other day, they're like, I never realized that I had to like help the baby figure out how to suck and do what they needed to do to help them they're babies.

Abby ([16:45](#)):

Okay. Let's talk more after a word from our sponsors. Today's episode is brought to you by Fairhaven health. The milkies milk saver collects your leaking breast milk as you nurse or pump allowing you to store extra breast milk effortlessly with each feeding, simply slide the milk saver into your bra or tank on the non-nursing side. The milk saver collects the breast milk that is leaked. When your breast milk lets down, then simply transfer the milk into a storage bag. The milk saver holds a little over two ounces of breast milk and people are constantly shocked at how much milk they're leaking. And we're losing to a breast pad. People are reporting that they are collecting several ounces a day and sometimes a whole day's worth of breast milk. It's common to think that you're just leaking a few drops, but when the leaky milk is collected throughout the day, it adds up to a lot of milk. It's comfortable, it's durable and reusable and has a protective lid to prevent spills. Check out the milk saver at fairhaven health that's F A I R H A V E N health.com. And don't forget to use promo code badass for 10% off of your purchase. And today's episode is also brought to you by love and fit, love and fit as a unique active wear line, featuring functional and innovative items for all women from top selling nursing and pumping sports, bras, nursing tops, nursing hoodies to pregnancy and postpartum support leggings feel supported and cute in there. Stylish items and fun colors, no more frumpy looking nursing bras. Even if you are past the time of breastfeeding, their stay put leggings can be worn by anyone. They are squat proof have pockets and don't fall down during running or workouts touted just recently by Chrissy Tiegen, she loves the state, put silicone grips, check out love and fit on [instagram@loveandfitshop](#) or shop online at [loveandfit.com](#). And you can use promo code badass for 10% off of your purchase at love. And today's sponsors can be found on [badassbreastfeedingpodcast.com](#) also. So our episodes can as well, and our show notes for this episode that we'll have links to all the things that we talked about. And we'll also have information about scheduling your online consultation with Dianne.

Dianne ([19:10](#)):

Those are popular by the way. People are realizing that now, like it's hard to get somebody to come to your home or maybe there's nobody in your area and you know, like people reaching out, which is fantastic. We want to be able to help want to help you.

Abby ([19:31](#)):

Yeah. So go to [badassbreastfeedingpodcast.com](#), fill out the, go to the consultant consultations tab and fill out a little form and schedule yours with Dianne. It's like why wait for these issues that you're having? And so we also have our new segment shout out of the week. And our shout out of the week,

this week is Momma's Village Fayetteville. They can be found on Instagram at @mommavillagefey and on Facebook at Momma's village Fayetteville. This is a nonprofit organization. They provide breastfeeding, birthing education, support, and advocacy for Black and brown families in and around Fayetteville, North Carolina. So that's them in person, but their social media is robust and educational and supportive and you should follow them. Good people.

Dianne ([20:29](#)):

Yeah, absolutely. And that holds a special place for me because my first one was born in Fayetteville. So I, you know, I just, I love the work she's doing there. And she's an amazing, amazing human being Angela behind that. And she's like a doula that trains, new lactation consultants and run support groups for the breastfeeding mamas of color. And it's just like, there's so much that she's doing for the community and system. Fascinating love it. So definitely follow them, give them some love.

Abby ([21:03](#)):

Awesome. And so milk supply things that really can screw up your milk supply. We were talking about latch. What about scheduled feeds? That's terrible. Don't do it.

Dianne ([21:15](#)):

So there are some books, we hate the books. I'm trying to write one. Now I'm working on it. People it's, you know, it's a work in progress, but about like the realities of having a new baby, because a lot of the books and I was just telling somebody this this week, cause they were like, well, the book, didn't say this in the books, don't say this in the books, books are not geared towards newborns. They are not, they are geared towards an older baby. I'm telling you like, cause your baby, if you start scheduling feedings, if you start trying to control feedings, your, your milk supply is not going to be the way we need it to be for your baby. If you're like, Oh, but it isn't, it hasn't been two hours. So we have to try to push it off. Let's try to get them to suck on a pacifier instead. Let's try to pass them to somebody else. Let's try to do everything, but feed him. Your body is not going to make the milk that we needed to make.

Abby ([22:15](#)):

You're not emptying the breast. It was all gonna come down to that.

Dianne ([22:20](#)):

And what we continue to think is, Oh, I must not be making enough milk, but it would really is just put the baby on the breast. Your baby will make more milk. That's what your baby wants.

Abby ([22:31](#)):

Yeah. Your baby and your body that they're like designed by nature to work together. You have to help them. But like you're helping them to learn each other.

Dianne ([22:51](#)):

Work for each other. I mean, it's just, we could talk forever about that,

Abby ([22:56](#)):

But so yeah. So scheduled feeds...

Dianne ([23:00](#)):

Are a big part of it for sure. So don't do that as your baby gets older, you know, you have to return to work, things like that, where you need a little bit more of a routine, then it's a little bit easier to kind of like, you know, start to schedule things a little bit. But even that I hesitate to say, because it's like, it's not a good practice, but I know that when people have to go back to work that it just kind of happens.

Abby ([23:29](#)):

Well, I feel like it's also kind of like sleep like in the beginning, you know, when you have that newborn baby at home and you're just like, Oh, you know, like what's their sleeping schedule, you know? Like they just fall asleep like all the time, whatever they just sleep. And then after like weeks go by, you kind of start to learn when your baby's tired, you start to like, kind of look at the clock and you feel your baby and you go this is kind of when they have been falling asleep, this is kind of when they've started to get sleepy and they find this kind of eventually they kind of find this like routine. You're not, you're not forcing them into a routine. They just develop their own. And you know, my kids to this, my kids are six and eight, you know, Exley wakes up at 5 or 5:30 every morning and people say, Oh, you need to put him to bed later. Okay. Up yours. Because I put him to bed later and he gets up at 5 or 5:30 tired. And then he's miserable all day. Then he's miserable all day. This is his schedule. I can try to manipulate it as much as I want. I can't, I can't like put them in a sleeper hold and like make them go to sleep longer. Like I there's nothing that, and I know every kid is different and this is what we're saying. Every baby is different. They're going to find their own kind of routines. And this is a really long tangent for just a small point. But you will find at some point, like when you go back to work or even if you don't go back to work and you're just at home, like you don't have to force the schedule, they will find like a little bit of a routine that works for them. And it's going to be different from your friend's baby. It's going to be totally different.

Dianne ([25:20](#)):

And like, even we can use Jack and Exley Jack doesn't get up at 5:00 AM. Does he?

Dianne ([25:25](#)):

Well, with Exley yelling and running around he does. And he's pissed cause he doesn't want to get up that early. So they're different kids.

Dianne ([25:35](#)):

They're all going to be different. So even in the same family, then they're just going to kind of, but one of the things that helps you figure that out is breastfeeding. When you are breastfeeding, your baby, you learn them very intimately and very quickly. So it does help you to figure out what they're doing faster when you are a breastfeeding mom, because you just get, become very much in tune with what what's what's happening and you know, your baby really well. So that's so the scheduled sleep or the scheduled thing is a big thing. Medications. So let's talk about this really quickly. Like we do have an episode on medications, but I want to really make it known. A lot of people are like, Oh, I'm really afraid about taking a medication because I'm afraid it's going to affect the baby. I'm afraid it's going to go to the baby. That's the last thing I usually think about. I'm more worried about is that medication going to impact your milk supply? And I actually had a triage nurse call me one time because the mom had called the pediatrician's office and said, Oh, can I take this medication? So they called me to ask me and I said, yeah, that medication's fine. But I'm more concerned about what it could do to the milk supply. And they were like, Oh, I didn't realize that that was a thing that it could impact milk supply for them. I just



thought it was something that it could impact the baby. Well, ultimately the milk supply will impact the baby, but it's not like it's not dangerous for the baby to get like, you know, 1 tenths of this medication, you know, like of the dosage of what you're getting. But if it's something like an allergy medication, which is big, you know, in the fall and in the spring and certain parts of the world if it's, you know, whatever it is, you need to look at it as can this dry out my milk supply. Birth control. A lot of times at the birth control thing. That's one of the first things I ask when somebody says to me is my, you know, there's something going on with my milk supply. Did you start a birth control? Cause a lot of times doctors will tell you, Oh, this won't affect your milk supply. This won't impact your milk supply. If there is hormones in that birth control and your body is very, very sensitive to anything hormonal, which some women are very sensitive to hormones, it can impact your milk supply. It is not one size fits all. That is definitely something to think about is the medication you're about to take for whatever reason, something that's going to impact your milk supply. So that's something I usually ask about too. So we've got meds, your period coming back. That's something that can impact your milk supply because it's hormonal. And that is, you know, usually you will find that your milk supply will dip during ovulation and then it'll kind of come back up. Some women really struggle with that. Some women because their body is sensitive, hormonally really struggle with the milk supply dipping and coming back up. And some women never notice it well, just, you know, it's one of those things.

Abby ([28:49](#)):

So what can we do? Is there anything that we can do when our period comes back or we're starting a new birth control?

Dianne ([28:57](#)):

Just wait it out. Or if it's your period, there are some supplements. I'll have to look at it. And it's not something that I really, that's not really my like vitamins and stuff like that, I'm not good with that stuff, but there is a really good thing on Kellymom. So I'll put it in the show notes about like, I think it's like zinc and something else that you can like supplement your diet with. It's supposed to be helpful during that period of time during the ovulation to help with your milk supply. So I can, you know, I can put that up so that people have that. If it's a birth control issue, I always say that, just switch it. If it's any kind of birth control that can be reversed, like the, or you know, something that you can take out or stop if you do, if you take it out or stop it, your milk supply will rebound. If it's something like the depo shot that you can't get out of your system, then you're just screwed. So it doesn't matter. But if it's something that you can take out and stop taking or stop using that I use, that's usually what I suggest. If we can trace it back to that then yeah. Going to stop using it. Pregnancy can do it too. Do you remember that when you got pregnant?

Abby ([30:26](#)):

I think it's really unusual for you to maintain a milk supply through pregnancy? I think it's really, it's very common and usually would happen that like towards the end of the first trimester or definitely by the second trimester that your milk supply will be much, much lower. And Jack started slowing down. I really wanted to tandem nurse and I knew it was going to happen. I knew my milk supply would go down, but I would just figured he would just like kind of comfort nurse all the way through. Cause he was such a nursing person. But he started to nurse less and I started to freak out and I was like, Oh my God, he's going to wean. And that does happen. Sometimes. Sometimes they just happen to wean while you're pregnant. But he, he still nursed a little bit all the way through. And then when my milk came back, I mean he was as happy as anybody.

Dianne ([31:19](#)):

Because it changes to colostrum changes back to colostrum. So some, you know, well we can call them toddlers at that point. Because usually that's where they are, but sometimes they're like, what's going on here. And then when the new baby's born and it changes back to milk, but we do, we get this question a lot because a lot of moms are like really anxious to have their next baby. So they want to say like, how do I, you know, keep my milks. I want tandem nurse. How do I keep my milk supply up if I get pregnant? And it's like, there's really, don't have a magical answer for keeping your milk supply up while you're pregnant is it's a totally hormonal thing.

Abby ([31:58](#)):

And your body's preparing for your new baby, which, which is what it should be doing.

Dianne ([32:02](#)):

Right. And the thing that I always tell moms, I don't know if it brings them any comfort or not. If there's a lot of moms that tandem nurse. So it is very, very possible to just continue on. But you know, it's going to be a decreased supply until the new milk comes in

Abby ([32:19](#)):

But sometimes people get pregnant when their baby is like eight months old and surprised to learn that they're not going to be able to maintain their milk supply through their pregnancy. And then that's when it becomes an issue because they need breast milk for the eight month old baby.

Dianne ([32:52](#)):

I talked to somebody once she was talking about how her first baby weaned at like nine months. And she was just like, I just, you know, like my milk supply went down and I had gone back to work, you know, and I was struggling to keep it up anyway. And then, and then, and I'm like, and when did you get pregnant with the next baby? And she was like, right around that time, she's like Oh my gosh, I never even put the two together. You know? And you don't, and that is stuff you're not going to hear probably from your, your pediatrician or your OB.

Dianne ([33:32](#)):

They're going to be like, Oh my God, you have to wean. It's dangerous. That's what they're gonna say. Oh my God, I'm pregnant. I'm breastfeeding. Oh, you have to wean. You have to wean. Or if you go to them and you say, you know, my baby's nine months old, I'm really struggling with my milk supply. They're going to be like, well, you know, some babies, that's just sweet. Now the baby doesn't just wean at nine months. That's not typically what happens. There's something going on there. And it turned out that she was pregnant and she just never connected the two. Cause nobody ever said to her, your milk supply decreases when you go pregnant again.

Dianne ([34:09](#)):

So your body is amazing. It doesn't care. It knows that your toddler's fine. Your body is just like, well, we got a new one coming here, all hands on deck for the baby for this baby in here. And you can't stop it. And why would you, I mean, it, I mean, it's just, you know, there's things that you can't, that you can't control. So that's one of the things we'll ask too, did you get your period back yet? Because that can obviously impact milk supply. That's one of the first things I asked, I go to birth control. That's one of the

first things I ask in pregnancy. And sometimes we don't plan those pregnancy things. So that happens. And that can, you know, that can be a reason why you have a decreased milk supply and you just don't even realize it.

Dianne ([34:57](#)):

No, that can, you know, so the moral of the story here is that you should not go to bed breastfeeding your baby, fine and wake up with no milk supply. That doesn't, that doesn't happen. That does not happen. Your baby crying does not mean that you have no milk. That doesn't happen either. If you feel like there's a problem with your milk supply, then reach out to somebody. Don't go get into these like black holes of the internet and mom on Facebook where they'll tell you to take these magic beans because that's what helped me. Or, you know, you're not drinking enough water. You know how many emails we get where people are like, I've been drinking a gallon of water a day, nothing happening, no, that's not gonna do anything, but make you pee all the time.

Dianne ([35:53](#)):

That has nothing to do with your milk supply. Talk to somebody who can ask you the right questions and who can figure this out for you because it might not even be a milk supply problem. And if it is, it can be helped. Also, thyroid issues. That's huge for most supply problems. Thyroid issues can creep up after pregnancy. So that can be a big deal too. So find somebody that can ask you all the right questions and kind of get to the bottom of it. Don't listen to anybody who says to you, well, you know what? My milk supply died when my kids for this age too. So it just happens sometimes. No, no.

Abby ([36:37](#)):

Contact a lactation consultant. That's what we're saying.

Dianne ([36:40](#)):

And a lot of it is educational too. If you're in a situation where people are like, Oh, your baby needs more milk. Your baby needs more milk. Your baby needs more milk. That might not be an issue that might not be what's going on. They shouldn't be, nobody should be feeding your baby too much milk while they're at daycare. And then telling you, you don't have enough milk. We could go on all day,

Abby ([37:03](#)):

But we won't. Thanks for listening.

Dianne ([37:05](#)):

Thank you for listening. Check us out next week too.

Speaker 1 ([37:19](#)):

[Inaudible].