

IT'S NOT THRUSH

Quick Guide

But I Had Thrush?

Thrush is a fungal infection caused by an overgrowth of *Candida albicans*, but it does not occur in the breast.

There is no evidence to support it as a diagnosis in nursing parents. All symptoms can be attributed to other diagnoses.



Symptoms (that aren't thrush)

- Pain or burning sensation in the nipple and/or breast tissue, especially after feeding, that comes on suddenly
- Redness, itchiness and/or soreness on the nipple and areola
- A wound that won't heal
- Nipple blanching and/or colour change after feeds

Causes

The evidence shows that *Candida albicans* is not responsible for the symptoms associated with "breast thrush" and is not present in almost all cases that have undergone clinical testing.

Likely diagnoses are:

- Subacute mastitis (pain, burning, redness, etc.)
- Vasospasm (blanching and/or colour change)
- Dermatitis/allergy (itching, wound that won't heal)

Note: it is not contagious and does not transfer through pumping. This would be true even if it were a fungal infection, but it isn't!

Management/Treatment

Seek skilled, up-to-date lactation support*.

- If you are diagnosed with "breast thrush", ask for a second opinion and/or refer them to the following studies:
 - PMID: [33305975](#)
 - PMID: [28704470](#)
- Follow the guidance for the diagnoses that match your symptoms (mastitis, vasospasm, dermatitis).

DO NOT

- Accept an incorrect diagnosis of breast thrush
- Follow outdated advice
- Stop feeding your baby
- Take antibiotics unless medically indicated
- Take antifungal medications unless medically indicated

*Appropriately trained professionals, such as IBCLCs, Infant Feeding Coaches and Breastfeeding Counsellors.