IMAGES IN CLINICAL PRACTICE

BILATERAL NEONATAL BREAST ENLARGEMENT ASSOCIATED WITH MASTITIS

R. D. Wammanda

Department of Paediatrics, Ahmadu Bello University Teaching Hospital, Zaria, Nigeria

A 1-month-old baby girl presented with bilateral enlargement of the breast noticed at 2 weeks of life. The grandmother, following their tradition, commenced twice daily massaging of both breasts with warm water. This is to expel the mother’s breast milk which they believe the baby have sucked into her own breast. The baby’s breast continued to increase in size and 3 days before presentation, the left breast became painful. On examination the baby was febrile, temperature of 37.8°C with bilateral enlargement of the breasts (Figure 1). The left breast was inflamed and fluctuant. Aspiration with a 21Guage needle yielded thick pus. Incision and drainage was effected and baby placed on a 5-day course of ampiclox. The inflammation resolved and both breast returned to normal size.

Elevated circulating maternal endogenous steroid hormone during late gestation may lead to bilateral breast enlargement in the newborn, which often may be associated with nipple discharge. Repeated massaging of the breast as in this case, will lead to exacerbation of the condition. Often it is associated with mastitis, which is predominant in female neonates with the most common pathogen being Staphylococcus aureus. The condition resolves spontaneously. If associated with mastitis, antibiotics should be administered, occasionally, may need incision and drainage if fluctuation is present.

Figure 1: Bilateral enlargement of the breast in a neonate

References