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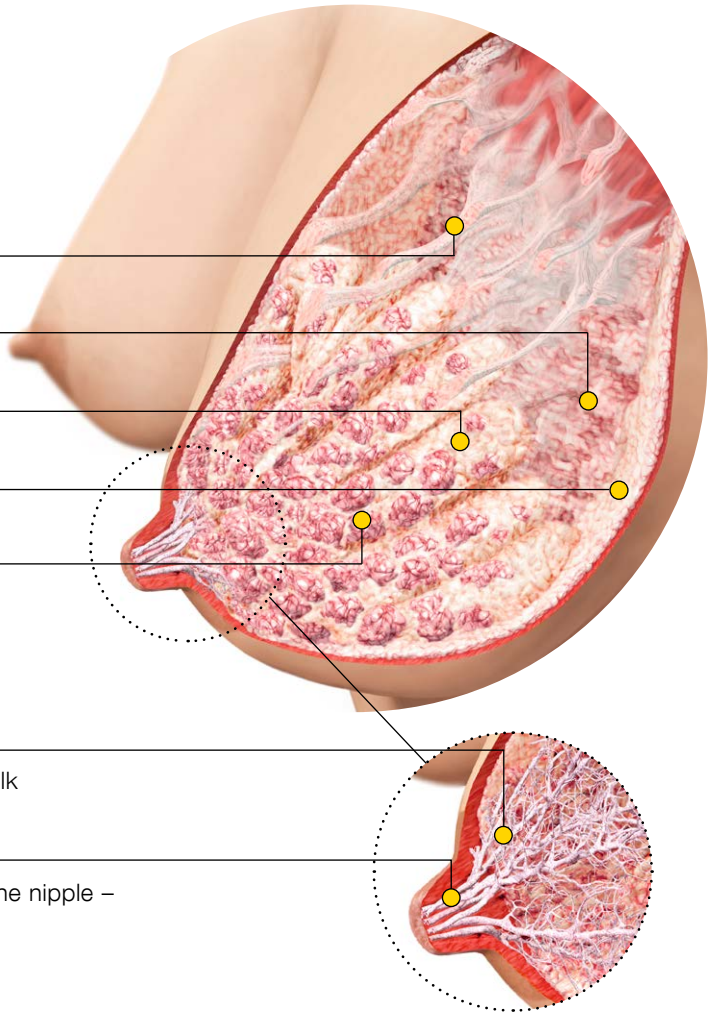
Anatomy of the lactating breast



Glandular and fatty tissue

Cooper's ligaments
Support framework for glandular and fatty tissue

Retromammary fat
Fatty tissue at the back of the breast, at the chest wall

Intraglandular fat
Fatty tissue that is intermingled with the glandular tissue

Subcutaneous fat
Fatty tissue that lies just under the skin

Glandular tissue
Secretory tissue that makes and stores milk

Complex ductal network

Secondary milk ducts
The branching ducts throughout the breast that transport milk from the glandular tissue to the main milk ducts

Main milk ducts
The larger ducts (numbering between 4 – 18) that lead into the nipple – the conventionally described lactiferous sinuses do not exist

Relevance to practice

- Less than 4 % of milk can be stored in the ducts, making milk ejections essential for removing milk. Since stress can inhibit milk ejection, being comfortable and relaxed helps milk flow.
- 65 % of the glandular tissue lies within a 30 mm radius of the nipple base and the ducts reside close to the skin surface. Pressure on the ducts and tissue in this area can restrict milk flow.
- The ratio of glandular tissue to intraglandular fat varies greatly between women. It is the amount of glandular tissue, not breast size, that determines the ability to make milk.

Reference: Ramsay, D.T. et al. J Anat 206, 525-534 (2005).

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