Expressing Your Breast Milk: When Your Baby is in the Hospital



Maternal, Infant, Child & Youth (MICY) Program





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Expressing Breast Milk

While in the hospital, your baby might not be able to breast feed right away. This does not mean that your baby cannot have your breast milk. In fact, one of the best things you can do for your baby right now is express your milk so your baby can have it either now, or when he or she is ready.

The following information will help you get started expressing your milk using hand expression and pump methods. The nurses will help you if you have any questions.

Why express my breast milk?

If your baby is not able to breast feed, it is important to begin expressing your milk as early as possible. The earlier you start expressing, the more likely you will be able to start, increase, and maintain your milk supply.

Your baby might not be able to feed at the breast, or feed at all right now. But when your baby is ready, you will have your milk supply established.

There are many benefits to providing breast milk to your baby. Along with nutrients, breast milk also carries antibodies that help protect your baby from many infections and diseases, which is why it is so important for babies in Neonatal Intensive Care Unit (NICU). The World Health Organization recommends breast milk as the only food for babies until 6 months of age with continuation of breast feeding until 2 years of age and beyond.

When should I start expressing my breast milk?

It is ideal to start expressing your milk within **1 hour** of birth. If this is not possible, start expressing within **6 hours** of your baby's birth.

Ask your nurse or lactation consultant (an expert in breastfeeding) for 'My Breast Milk Expressing Record'. This helps you keep track of when and how much you express.

It is also helpful to learn how to hand express while you are still pregnant, especially if you think your baby might have to stay in the hospital. Your nurse or the lactation consultant might suggest this to you if you are in the hospital for a period of time before having your baby.

How do I express my breast milk?

There are two ways to express your breast milk: Hand Expression and Pumping.



Hand Expression

Hand expression is the best way to express your milk in the first couple of days until your milk supply comes in.

Your early milk (called colostrum) helps protect your baby. It comes in small amounts and you usually get more of it with hand expression than with pumping.

To hand express:

- 1. Wash your hands.
- 2. Have a clean container to catch your breast milk in. (Ask your nurse for containers.)
- 3. Label your milk collection containers using labels provided to you by the hospital.
- 4. Start by **gently** massaging your breast from your shoulder towards the nipple.
- 5. Put your hand in a C-shape around your breast, with your fingers at the bottom and your thumb at the top, just behind the darker area around your nipple (areola).
- 6. Push your fingers and thumb back into your breast (towards your chest) and gently squeeze your fingers together well behind your nipple. Do not pinch your nipple.
 - At first, it can take several minutes before you see any milk ('let –down reflex'). This is normal and soon your body will let-down more quickly.
- 7. Catch the milk in the clean container. You might get less leaking if you keep the rim of the container touching your breast below the nipple.

- 8. Once the milk seems to stop, move your fingers around your breast in a circle gently repeating the motion with your fingers in each new place until the milk seems to stop again. Repeat this until milk is expressed from all areas of the breast.
- 9. Switch breasts every few minutes.
- 10. Date and time the milk containers as soon as you finish pumping.
- 11. Wash your hands.



Using a Breast Pump

Another way to express your milk is to use a breast pump. If you have to express breast milk over a long period of time, an electric pump might be more effective. Hand expressing for a few minutes before, during, or after using a pump, can help increase your milk supply.

To pump with an electric pump:

- 1. Wash your hands.
- 2. Position yourself comfortably in a quiet relaxing place and think of your baby. Have a picture of your baby or a blanket that smells of your baby near you.
- Follow the instructions that came with your pump or are provided by the hospital.
- 4. Holding the shield against your breast with your nipple centred in the flange, start with suction on the lowest setting. With some pumps, suction will automatically start at a moderate settling. Decrease the suction manually if it is uncomfortable or painful.

Your nipple should move freely in and out with the suction. If your nipples rub against the flange, you might need a larger one. If you are not sure, ask your nurse or lactation consultant to check the size with you.

PHOTO A: GOOD FIT



PHOTO B: TIGHT FIT



- 5. Once milk starts to flow, you can increase the suction and you might need to slow the cycles. Pumping should be done at the highest comfortable suction setting without being painful.
- 6. Try hand expression after pumping if you are trying to increase your milk supply.
- 7. If you are freezing your milk, leave room at the top of the container to allow for expansion.
- 8. Label the milk containers with the date and time as soon as you finish pumping.
- 9. Wash your hands.



How often should I express milk?

While your baby is in the hospital, you should express 8 to 10 times a day in order to start, increase, and maintain your milk supply.

It can be very helpful to keep an **expression log** to track your expression progress, as well as identify possible concerns early. Expression logs can be obtained from your baby's nurse. If you have any questions or concerns about your expression or milk supply, the nurses are there to help you.

Do I pump at night?

Skipping pumps at night time can be tempting in exchange for some well-deserved sleep. However, you naturally produce more 'prolactin' at night, (a hormone that helps you make milk).

So, even if you take a longer period between pumps during the night (no more than 4 hours), try to pump between the hours of 2:00_{AM} and 4:00_{AM} when prolactin levels are known to be highest.

What do I do with my expressed milk?

(Labelling breast milk)

Once you have expressed your milk, make sure you label it with the **date and time** you expressed it and your baby's name.

Ask the NICU/Pediatric Unit for pre-made labels for your milk.

If it is within 4 days of your baby's birth, you might be asked to label your milk with a **yellow dot sticker**. The hospital will provide these stickers for you. The yellow dot tells the nurses caring for your baby that the milk is early milk (colostrum).

How long can I use expressed breast milk?

Breast milk can go sour just like other milk products. Safe handling and storage of breast milk is important to make sure it is safe to give to your baby, especially babies who are premature or sick.

Depending on where you store your breast milk, it has different 'best before dates'. The tables on the next page outline different storage times.

For preterm or sick babies (in the NICU):

	Freshly	Frozen Breast Milk			
Storage	Expressed Breast Milk	Thawed in the fridge	Warmed		
Room Temperature (20°C)	Up to 4 hours (Refrigerate right away if not used)	Up to 4 hours			
Refrigerator (0°C to 4°C)	Up to 48 hours	Up to 24 hours	Up to 4 hours		
Fridge Freezer (-18°C to 20°C)	Ideally 1 month, up to 3 months	Do not refreeze			
Deep freezer (Greater than -20°C)	Up to 12 months	Do not refreeze			

For full term or healthy babies:

Storage	Freshly Expressed Breast Milk	Frozen Breast Milk, thawed in the fridge
Room Temperature (20°C)	Up to 6 hours (Refrigerate right away if not used)	Up to 4 hours
Refrigerator (0°C to 4°C)	Up to 5 days	Up to 24 hours
Fridge Freezer (-18°C to -20°C)	Up to 6 months	Do not refreeze
Deep freezer (Greater than -20°C)	Up to 12 months	Do not refreeze

When should I freeze my breast milk?

It is best to give your baby fresh milk whenever possible. Sometimes it is necessary to freeze your milk if you are making more milk than your baby needs. Talk to your baby's nurse about when to start freezing your milk.

How do I transport my milk from home to the hospital?

This depends on the state of your milk before you transport it. Is it fresh at room temperature, fresh but refrigerated, or frozen? As well, it depends on how long it takes you to travel from home to the hospital. The following table outlines transport methods and transport times.

State of Milk	Transport Method	Transport Time
Fresh, room temperature	Sealed bag	Less than 4 hours
Fresh, refrigerated	Insulated bag with gel ice packs	Less than 24 hours
Frozen	Insulated bag, tightly packed with or without gel ice packs	Less than 18 hours



What do I do with my milk at the hospital?

When you bring your milk to the hospital for your baby, it is best that you bring it to your baby's bedside or give it to your baby's nurse. The nurse will put the milk in your baby's individual fridge (if available) or in your baby's individual bin in the central fridge and/or freezer.



Pumping at the Hospital

All units have electric pumps available for your use while you are with your baby in the hospital. The nursing staff will teach you how to use that pump. If the electric pump is shared, please clean it with disinfectant wipes (CaviWipesTM) so that it is clean for the next mother to use.

You will be provided with a pump kit, containing all the parts you will need to connect to the electric pump at the hospital. The pump kit will be only for your use.

What do I need to know about the pump kit?

The pump kit:

- Is single patient use, therefore only you will use it.
- Should be kept in a clean dry bin or clean plastic bag between pumps.
- Needs to be cleaned as soon as possible after every use (refer to instructions on the next page).
- Can be used for the duration of your baby's hospital stay.
- Needs to be replaced if moisture enters the tubing or any parts become damaged.

How do I clean my pump kit?

- 1. Take apart all the parts of the pump kit.
- 2. Rinse all the parts that come in contact with breast milk under cool running water to remove milk residue.
- 3. Wash all the parts that come into contact with breast milk with unscented detergent (soap), rinsing thoroughly under hot running water.
- 4. Completely dry with clean paper towel, or allow to air dry on clean paper towel.
- 5. Store pump kit in labelled clean, dry bin or clean, plastic bag.
- 6. Store the bin or bag in a clean area at your baby's bedside.

For preterm and sick babies:

If your baby is preterm or sick, sanitize the breast pump parts every 24 hours.

A special microwave steam bag will be provided to you to use in the hospital. Your nurse will show you which microwave to use.

Once every 24 hours:

- Place all the parts that come in contact with breast milk into your microwave steam bag.
- Follow the instructions on the bag.

Whether you pump at home or in the hospital, we recommend you clean the pump parts after every use and sanitize once every 24 hours. Follow the pump manufacturer's instructions for cleaning and sanitizing the parts at home.

Increasing a low milk supply

There can be several reasons for a low milk supply. Many women have concerns about low milk supply at some point in time. The most common reason is either not breast feeding or not expressing (hand expression or pumping) often enough or long enough. Some medications and substances such as birth control, nicotine, or special teas and vitamins can affect milk production. Consult a local breastfeeding expert such as a lactation consultant, your public health nurse, your midwife, or your family doctor about any substances you are taking.

The following are tips for increasing milk supply.

Expression:

- Pump after doing skin-to-skin with your baby.
- Pump with a blanket that your baby has laid on and smells of your baby, with a picture or video of your baby, or while listening to music.
- Consider pumping at your baby's bedside if possible.
- Hand express after pumping. (Studies tell us that mothers often get more milk if they do this – emptier breasts make more milk!)

Use the right pump:

 A hospital-grade double breast pump is the best choice for pumping. It has the appropriate suction settings and can pump both breasts at the same time.

Check pumping technique:

- Check the fit of the pump flange to your breasts. The flange should be slightly larger than your nipple to avoid friction or pain. If you are not sure about the fit, speak with your baby's nurse or a lactation consultant.
- Pump and massage your breasts 8 to 10 times a day for 15 to 30 minutes at a time.
- Pump for an additional 2 minutes after the milk has stopped dripping.
- Consider turning up the suction pressure after letdown (when milk starts spraying out) to help empty your breast. The pressure should be strong yet comfortable, not painful.
- 'Hands-on' pumping is recommended to increase milk supply. This means doing breast massage and compression while pumping. A 'hands free' breast pump bra might help with this.

Consider keeping an expression log:

 Keep an expression log at home to track your expression sessions and milk production. Share your log with your nurse/lactation consultant.

A final word

Being separated from your baby can be tough, and it is easy to forget to keep yourself healthy.

So just a reminder to:

- Eat balanced meals every day.
- As always, make sure you drink enough fluids to stay well-hydrated.
 - Try to limit or stay away from too much caffeine.
 - Since alcohol can slow down the flow of your milk, it is best to not drink alcohol if you are trying to increase your milk supply.
- When possible, go to bed early and take naps when you can.
- Relax by taking a warm bath, having a massage, or reading a book (there are lots of ways to relax, make sure you take time for yourself).

If you have any questions or concerns, your baby's nurse and/or lactation consultant is here to help you.

Notes				



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This information does not replace the advice given to you by your healthcare provider.

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