Your breast milk has important health benefits for your premature or sick baby.

Benefits of breast milk for preterm babies
Breast milk is easier for babies to digest, (especially for your preterm baby), helps baby's own immune system and has special qualities designed for preterm babies. Even the smallest amount is of benefit to your baby. As health professionals we recognise how special your breast milk is for your baby.

Starting expressing
No matter how preterm or sick your baby is you should be able to express your breasts and give your baby some breast milk.

It may be a stressful time after your baby is born but it is important to start expressing as soon after the birth as possible, i.e. within a few hours. This will help your body start to produce milk for your baby - even if your baby isn’t ready to feed.

When your baby is born, colostrum (the first milk), will be produced in your breasts. Hand expressing is recommended at this stage - the midwives will show you how to do it. Once your breasts feel fuller switch to using a hospital type pump. If your baby is not feeding from the breast at all then you will need to express frequently to establish and maintain your milk supply (8–10 times a day). Once your supply is established you may be able to reduce the number of times you express; talk to your midwife or nurse before reducing expressing.

For more information see the fact sheet: Expressing breast milk

Types of breast pumps

Hand pumps (those that aren’t battery or electrically powered) are not generally recommended for mothers with preterm or sick babies. They are designed for less frequent use such as 1–2 times per day.

Hospital grade electric breast pumps are recommended for mothers with preterm babies to ensure they establish and maintain a good milk supply.

For mothers with a baby born at less than 34 weeks gestation it may be best to buy a double pump kit. This type of pump is the most effective in stimulating release of the milk making hormone, prolactin. Using a double pump also reduces the amount of time that is spent expressing. However some mothers will feel that the single pump is best for them, so please talk with your nurse, midwife or the lactation consultant.

For more information see the fact sheet Using a breast pump

Pumps are available for hire and purchase from:

» Australian Breastfeeding Association
» The Royal Children’s Hospital (Equipment and Distribution Centre) (03) 9345 5325 or visit www.rch.org.au/edc
» Some pharmacies
» Some private companies
Cleaning the breast pump equipment

» Wash hands thoroughly.
» Dismantle all pieces of the breast pump kit after each use.
» Rinse with cold water all parts that come in contact with breast milk.
» Wash in warm water and dishwashing detergent.
» Rinse thoroughly under warm running water.
» Allow to air dry while draining on clean paper towel before storing in a clean closed container or plastic bag.

Your baby is in Special Newborn Care Nursery so we recommend that you disinfect your breast pump equipment daily.

The equipment can be disinfected daily by using a process such as boiling, chemical disinfection (follow manufacturer’s directions) or a home steam steriliser (follow manufacturer’s directions).

Boiling method of disinfection

» Wash hands thoroughly.
» Thoroughly clean all parts as above.
» Completely immerse all parts of the breast pump kit in water, bring to the boil and continue to boil rapidly (completely submerged) for five minutes uninterrupted.
» Remove the items without touching the inside of the containers. Long handled tongs, which have been disinfected along with the breast pump kit, may be useful.
» Allow to air dry while draining on clean paper towel before storing in a clean closed container or plastic bag.

How often should you express your milk?

For most women it is recommended to express at least 8 times in 24 hours with one expression overnight. You are trying to imitate breastfeeding a newborn baby. For mothers of twins it is recommended to express at least 10 times in 24 hours. Frequent expressing gives a message to your breasts to make milk for your baby. More frequent expressing makes more milk.

How much milk should you get?

In the first few days after the birth, between a few drops and a few ml of colostrum may be expressed each time. As colostrum changes to more mature milk, the amount increases to around 50–70mls at each expression by about day 4 or 5. Milk volumes vary from mother to mother and from expression to expression. Aim for 500mls per 24 hours by day 10 and by about 6 weeks, you may produce around 600–800mls (sometimes more!), over a 24 hour period.

If you feel your milk supply is not enough for your baby please speak with your midwife, nurse or lactation consultant.

Important points

» Expressing should be done gently, to avoid pain and discomfort.
» The use of gentle breast massage and nipple stimulation will help to encourage the milk flow (let-down reflex), see the Getting Started fact sheet.
» Using relaxation techniques or thinking about your baby while expressing may also be helpful. Express your milk while sitting with your baby or have a picture of your baby with you.
» Kangaroo care – having a cuddle with your baby skin to skin just before expressing helps to increase your milk supply.
» Expressing frequently throughout a 24 hour period, (including overnight), rather than for a long period of time at one sitting, is more effective in stimulating your milk supply.
» Clean your breast pump equipment after every use and disinfect your breast pump daily.

How long should you spend expressing your breast milk?

It will probably take between 25 and 30 minutes in total. If using a double pump kit then it will normally take about 15 minutes. The important thing is to express one side until the flow slows to drips and then switch to the other side and repeat. If you are expressing because your supply is low, switch back to the first side again. Switching back and forth, expressing each side 2 or 3 times will increase your supply over time. This is sometimes called switch pumping /expressing. Using “breast compression” to help drain your breasts will speed up the process as well as increase the amount you obtain. Breast compression means squeezing your breast gently (squeeze where the breasts meet the ribs, with your fingers on one side and thumb on the other) while expressing.
Storage and transport of breast milk

If your baby is in Newborn Intensive and Special Care it is important to follow the following guidelines for the safe storage and transport of your breast milk.

» Expressed breast milk should be placed in provided containers or syringes and clearly labelled with the baby’s identification label and date and time of expression.

» Containers of colostrum/breast milk need to be labelled 1–30 in order of expression using the fluorescent dot stickers given to each mother. Following the first 30 expressions, breast milk from several expressions may be combined in the one container after it has been chilled in the refrigerator.

» Expressed breast milk transported to the hospital must be kept chilled in an esky like container with ice or freezing blocks.

» For women in regional areas that are sending milk to the Women’s please talk with your nurse about how to safely send your breast milk to your baby.

<table>
<thead>
<tr>
<th>Breast milk status</th>
<th>Room temperature (26˚C or lower)</th>
<th>Refrigerator (4˚C or lower)</th>
<th>Freezer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freshly expressed into container</td>
<td>4 hours</td>
<td>48 hours Place in refrigerator within 1 hour of expression Store at back where it is coldest</td>
<td>2 weeks in freezer compartment inside refrigerator</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3 months in freezer section of refrigerator with separate door 12 months in deep freeze (-18˚C or lower)</td>
<td>Place in freezer within 24 hours of expression.</td>
</tr>
<tr>
<td>Previously frozen thawed in</td>
<td>4 hours</td>
<td>36 hours from time removed from freezer</td>
<td>Do not refreeze</td>
</tr>
<tr>
<td>refrigerator but not warmed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thawed outside refrigerator in</td>
<td>For completion of feeding</td>
<td>Do not return to refrigerator</td>
<td>Do not refreeze</td>
</tr>
<tr>
<td>warm water</td>
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For information and advice

Your local Maternal & Child Health Nurse

Maternal and Child Health Line | T: 13 22 29 (24 hours)

Australian Breastfeeding Association
T: 1800 686 268 Breastfeeding Helpline | www.breastfeeding.asn.au
The Australian Breastfeeding Association has a booklet available titled Breastfeeding your Premature Baby which is an excellent source of breastfeeding and expressing information for parents with a preterm baby.

Women’s Health Information Centre (Victoria only)
The Royal Women’s Hospital | T: (03) 8345 3045 or 1800 442 007 (rural callers) | E: whicinfo@thewomens.org.au