

Expressing and handling breast milk in hospital

Information for women and their families

Congratulations on the birth of your baby. This information has been produced to help support you with breastfeeding your baby. You have been given this information because your baby is not yet breastfeeding effectively. As well as helping you with expressing we will support you to maximise your breast milk and help your baby and you to achieve effective breastfeeding.

This leaflet includes information on expressing breast milk, storing breast milk, and ways your breast milk can be given to your baby.

If after reading it you have any concerns or need further explanation, please discuss this with a member of the healthcare team caring for you and your baby.

How can I express breast milk?

There are two ways of expressing breast milk – hand expression or using a breast pump. Both methods are discussed below. You can discuss which method is best for you with your midwife.

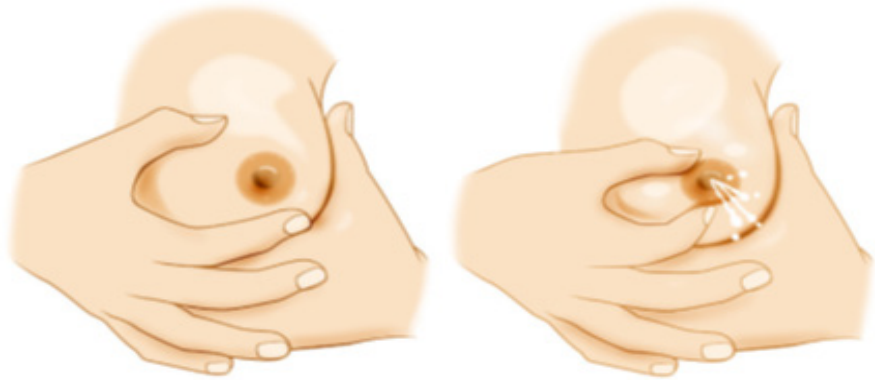
- **Hand expression** is a useful technique for everyone to learn. It is free and needs no special equipment. Hand expression helps increase your milk-producing hormones.

Hand expression is the preferred way of expressing breast milk in the first 72 hours following birth, when there is only a small amount of colostrum (the first milk). These small amounts are perfect for your baby but can get lost in a pump.

If you and your baby are separated, our staff will support you to begin hand expressing within the first two hours. We will encourage you to continue hand expressing at least eight times in 24 hours, including during the night. Early and frequent expressions are important to make sure you are able to maximise how much milk you produce.



- Before you start expressing, wash your hands with hot soapy water and dry them thoroughly.
- It may be useful to massage your breasts before you start to express, as this is what babies often do before they breastfeed.
- Cup your breast and place your thumb and finger about 2 to 3cm from the base of your nipple (see diagram below).



Source: Off to the best start, NHS 2015

- Use your thumb and fingers in a C shape and gently squeeze; pressure should be firm but not painful.
- Release the pressure and then repeat again and again. Avoid sliding your fingers over your skin, as this can cause soreness and may damage skin.
- Move your fingers around your breast and repeat on a different part of your breast.
- Small drops of colostrum should begin to appear, but this may take practice and a few tries.
- The colostrum can be caught in a small syringe or sterile container, which we will give you to use.
- You may find moving your fingers slightly forward toward the nipple or further away may work better for you.

For more information on hand expression, please watch the following UNICEF video www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/hand-expression-video/

- **Breast pump**

You may wish to start using a breast pump once you are able to hand express volumes greater than 5mls at each expression or after 72 hours following birth.

You will be given your own single person use pump kit in the hospital. Pump kits need to be washed with hot soapy water after each use and sterilised before you use them again. In the hospital, when you are using a breast pump, you will be given a cold water steriliser so you can sterilise your pump after each use.

The suction strength can be altered on electric pumps. Build up slowly. Setting the strength too high straightaway may be painful or cause damage to your nipple. There are different funnel sizes available to fit different size nipples. The pump should never cause bruising or catch your nipple as it is sucked into the funnel.

Your midwife will be able to help you to use the breast pump.

How much breast milk will I express?

It is expected that you will see significant increases in the amount of breast milk you express over the first eight days following the birth. But to get an increase you will need to express around eight to 12 times in 24 hours.

- In the first 24 hours after your baby is born it is common to get a few drops or around two to 10mls total each time you express. You might get none the first time.
- By the next day you might find this increases to around five to 15 mls.

If you have a healthy term baby this will be plenty. If you have any worries or have a baby that was born early, or was given an orange or red hat, talk to a member of staff.

Over the first few weeks the amount you express may stabilise and you may be able to express between 700 and 900 mls per day.

There are many reasons that might affect the amount of milk you can express. It is rarely an indication of how much milk you actually make, so the focus should be on celebrating every drop, however much you manage to get.

Whilst you are in hospital your midwife will help you use an expressing assessment form. This will make sure that you are expressing effectively and will give you the opportunity to speak to staff about any issues.

You will be given a daily expressing log to complete and share with your midwife. This will help you to keep track of how expressing is going.

Both of these can be found at the end of this leaflet.

Tips to help you maximise the amount of milk you can express

- Breast massage and relaxation methods support milk flow by increasing oxytocin, a milk making hormone.
- Try expressing close to your baby, have a photo or piece of baby's clothing close by, this can help your milk making and flow.
- Frequent and prolonged skin-to-skin contact or where this is not possible, interacting with and caring for your baby will further support an emotional connection and increase your milk making hormones.
- You may wish to try cluster expressing rather than a strict three to four hourly routine. Cluster expressing means expressing two to three times in a four hour period. However, long gaps between expressions should be avoided, no longer than four hours in the day and six hours at night time.
- Try to make time to express at least once every night. Night time expression is important as this is the time that milk making hormone levels are higher. This is very important to support long term milk production.
- Double pumping and using hand expression and pumps together can increase the amount of milk you express.

Using expressed breast milk in hospital

Expressed colostrum or breast milk is stored in the hospital fridge. When taken from the fridge it should be checked with you and a member of staff to make sure the correct milk is being given to the correct baby. The label and your name bands must be compared before using the milk.

How should breast milk be stored in hospital?

Breast milk can be stored in a sterilised container, breast milk storage bags, or the syringe or pot provided:

- in the fridge for up to 24 hours
- for two weeks in the ice compartment of a fridge; or
- for up to three months in a freezer.

You will be encouraged to take any unused expressed milk home in a cold bag. If you don't it will be disposed of by hospital staff in line with the above times.

- Never store breast milk in disposable bottle liners or plastic bags that are not intended for storing breast milk.
- Frozen breast milk should be defrosted in the fridge and once defrosted used immediately.
- Storing breast milk in small amounts will help to avoid waste.
- Once baby has drunk from a bottle of breast milk it should be used within the hour and anything left over thrown away.

Does my breast milk need to be labelled?

All expressed breast milk should be labelled with the labels given to you by the hospital. Make sure your name, hospital number, date expressed, and time expressed is written clearly on the label.

How do I feed my baby my expressed breast milk?

• Syringe feeding

Syringe feeding is a short term way of feeding your baby, which can be used to give your breastmilk to your baby when it is in amounts less than 5 ml. Syringe fed babies must not be given more than 5 ml of breast milk during one feed. If baby needs more than this, a cup or bottle should be used (see below for more information). Staff will show you how to syringe feed safely.

Before using the syringe.

- Wash your hands with hot soapy water and dry thoroughly.
- Hold baby in an upright position.
- Gently syringe no more than 0.2 mls into baby's mouth at a time.
- Feed the milk in between their gum and cheek or onto their tongue.
- Allow baby to swallow before giving them another 0.2 mls. Continue to do this until the feed has ended.

• Cup feeding

There is little evidence that cup feeding is better than bottle feeding as a supplement to breastfeeding. However some women prefer this as a short term way of feeding their baby. It is not recommended for volumes below 5 mls.

- Baby must be awake and alert to be cup fed.
- Baby should be calm and not overly hungry when cup feeding begins.
- Cup feeding will encourage baby to use their tongue and lower jaw in a similar way to breastfeeding.
- It allows baby to smell and enjoy the milk.
- A baby with a tongue-tie may find it difficult to cup feed. Please discuss this with a member of staff.

Before cup feeding.

- Wash your hands with hot soapy water and dry thoroughly.
- Use a pre-sterilised, once-only cup at each feed provided by the hospital.
- Wrap baby securely in a blanket to keep their hands out of the way, so that they do not knock the cup out of your hands.
- Sit baby in an upright position on your lap to prevent choking and place a bib or muslin square around baby's neck.
- Place the cup so that it is gently resting on baby's lower lip. Do not press it down; the cup should be tipped so that the milk touches baby's lip.
- Wait and baby will sniff the milk, push their tongue forward and start to lap or drink the milk.
- Do not tip the milk into baby's mouth as this may cause them to choke.
- Keep baby sat upright and the cup still; do not move the cup away when they stop drinking.
- Cup feed should not go on for more than 30 minutes.
- Baby will drink at their own pace with breaks when they need to rest. At the end of the feed they may close their mouth to show that they have finished.

- **Bottle feeding your expressed milk**

You may need to be supported to understand your baby's feeding cues and to hold your baby close during feeds. Bottle feeding should be done in a way that is as acceptable and stress-free for baby as possible, as well as reducing the risk of overfeeding.

- Offer the bottle in response to feeding cues, gently inviting baby to take the teat.
- Pace the feeds and avoid forcing your baby to finish their feed.
- Reduce the number of people who give feeds.

Useful information

- **Expressing and storing breast milk. NHS**

Web: www.nhs.uk/conditions/pregnancy-and-baby/expressing-storing-breast-milk/

- **Expressing your breast milk. NHS Start 4 Life**

Web: www.nhs.uk/start4life/baby/breastfeeding/expressing-and-bottle-feeding/expressing-breast-milk

- **UNICEF Hand Expression Video**

Web: www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/hand-expression-video/

Potential amounts of expressed milk

Age of baby	Amount per feed	Volume in 24 hours
First 24 hours	2 to 10 mls	38 mls
Day 2	5 to 15 mls	175 mls
Days 2 to 6	15 to 30 mls	
Day 8		650 mls

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhufft.nhs.uk/patientinformation

Expressing Assessment Tool

An assessment should be carried out once within the first 12 hours following birth to support early expressing and then every 24 hours whilst in hospital. This will make sure that you are expressing effectively and provide an opportunity to address any issues or concerns.



	Assessment √ or x			
Date				
Time				
Number of expressions in 24 hours At least 8 to 10 times in 24 hours, including one in the night.				
Timing of expressions Timings work around lifestyle - if cluster expressing no gaps longer than 4 hours (day time) and 6 hours (night time).				
Stimulating milk ejection Uses breast massage, relaxation, skin contact and/ or being close to baby. Photos of baby or items of clothing to stimulate oxytocin.				
Hand expression Confident with technique. Appropriate information provided.				
Using a breast pump Access to a breast pump. Effective technique including suction settings. Correct breast shield fit, double pumping, or switching breasts to make sure good breast drainage, use of massage/breast compression to increase flow.				
Breast condition Breast fullness that softens following expression. No red areas or nipple trauma.				
Milk flow Good milk flow, breasts feel soft after expression.				
Milk volumes Gradual increases in 24 hour volume at each assessment. See previous page for Potential amounts of expressed milk table.				
Name and signature of assessor				
Care Plan documented in notes? Please note page number.				

Expressing Log

Name: _____

Hospital Number: _____

Date: _____

Time	How many minutes of expressing	Using pump or hand?	mls expressed (even a small amount is great!)		How are you feeling about it?  
			Left breast	Right breast	
Today's total in 24 hours					

This leaflet has been produced with and for women and their families