

Why express?

There are many reasons why you may wish or need to express. Here are just a few:

- If you are leaving baby with a carer for an evening out, or when working or at college.
- To feed a premature baby and to preserve your milk supply.
- If your baby, toddler or you are in hospital.
- For relief if your breasts are engorged or you have sore nipples.
- To increase your supply.

Whatever the reason, expressing, like most things, is easy to do with a little practise. Because expressing happens for different reasons, the details may vary. A counsellor will be able to discuss your particular situation with you.

How should I express?

You can express by hand or use a manual or electric breast pump. There's a first time for everyone when it comes to expressing and it is a skill to practise, so don't feel upset or put off if only a few drops come out. Experiment — every mother is different. Whether you choose to express by hand or pump, it's still a good idea to do a bit of both as a pump only 'sucks' the breast but hands 'milk' the breast. The combination will be similar to your baby feeding.

- Begin by relaxing. Tension may inhibit the *milk ejection reflex* (also known as the 'letdown' reflex). The morning is often a good time to try for the first time. Have a warm drink, listen to music, relax your breathing.
- Warm your breasts, wrapping a warm towel around or express after a shower or bath.
- Gently massage the breast, towards the areola, for a minute or two.

By hand : *Stimulate hormone release*

Massage breast in circular manner. Roll the nipple to optimize oxytocin release. Identify where you need to put your fingers in order to

express your milk. Cup the breast with palm of hand. Walk the thumb down the breast (or up from nipple). Stop where you identify a change in texture. Place middle/index finger opposite thumb. Make a 'C' shape.

Express the milk: Compress the breast tissue over the magic spot. It may help to think: "press back, bring together, press forward". Release and repeat until milk flow subsides. Rotate the fingers around the areola to express all areas.

By pump : Most pumps, whether manual, battery or electric, work on a similar principle of creating a vacuum when the funnel has been placed over the areola. Make sure the funnel isn't too small, nor too large, when the nipple is brought into the narrow part of the funnel as this could damage the nipple. Milk will often not flow immediately. If your baby isn't nearby, it can sometimes help if you think about or look at a photo of your baby.

Swap breasts frequently unless you are double pumping. Try only a few minutes on one side and then swap. Experiment with different lengths of time.

If you're expressing to increase your supply, shorter more frequent pumping sessions on an emptier breast are more likely to increase supply than a few long sessions.

Battery and electric pumps : Some women prefer to use a battery or electric pump instead of a manual pump. Instead of you operating the handle, the motor does it for you. On most models the suction strength can be altered as too strong a suction can damage nipples, so find the lowest effective suction rating to suit you.

Make sure the funnel 'fits'. When the nipple is elongated into the narrow part of the funnel, the funnel should not be too small nor too large. Some manufacturers can provide alternative sizes. Once the pump is turned on and

a vacuum created, milk will be expressed and stored in a collecting bottle attached to the pump. Electric pumps can lose effectiveness over time and may need servicing after heavy use.

Double pumping : This means pumping both breasts at the same time. It will usually increase supply more quickly and will make the pumping session shorter. You could do this with two manual pumps or with a double collection set on the larger electric pumps.

Can I hire a pump?

Only hospital-grade electric pumps are available for hire, not manual pumps. They can be hired from pump agents around the country and can be dispatched quickly. Your midwife or health visitor may be able to give you a local contact number. Many breastfeeding counsellors are pump agents or can put you in touch with one or can advise where to obtain them directly.

Pumps can be hired on a short-term or long-term basis depending on your needs: the counsellor or pump agent will be able to advise you. If your baby is in special care then you may be able to obtain a pump from the hospital.

Should I sterilise the equipment?

When storing and expressing breastmilk, it's vital that everything coming into contact with the milk is sterilised before first use. If you're storing EBM for your own healthy baby, you can sterilise the equipment thoroughly once a week (or more often).

Between times, wash it in hot soapy water or put it in a dishwasher according to the product instructions. Check your dishwasher manual about putting your particular pump parts in the machine.

How can I store breast milk?

These storage guidelines are suitable for a healthy term born baby. Different storage

times may be needed for sick infants or donated milk.

- **Room temperature (77°F/25°C) for up to 6 hours.**
- **In main part of fridge (below 4°C) up to 5 days.**
- **Warmer fridge (5°C—10°C) for 3 days.**
Fridge thermometers can be bought from kitchen shops.
- **Freezer (approx -18°C) 6 months**
- **Previously frozen/thawed 12—24 hours in fridge**

Refrigerate your milk in a sealed container as soon as possible. Store in small quantities so there is less waste and it's quicker to thaw or warm. The ABM produces detailed guidelines on storing and thawing breastmilk. It's possible to collect together milk from a number of expressing sessions, but allow each 'batch' to cool before adding it to the sealed container.

How do I defrost breastmilk?

It is possible to defrost milk in a number of different ways. These include:

- placing it in the fridge to defrost slowly.
- placing the container in a bowl of warm water and changing the water frequently.
- holding the container of milk under cold running water.

Never defrost breastmilk in a microwave. It can break down some properties and cause 'hot spots' that could burn the baby's mouth.

Gently shake the milk before use as the fats may have separated.

Using Expressed Breastmilk (EBM)

Depending on age and health, your baby may be fed EBM in several ways: by cup, spoon, beaker, tube or supply line — don't automatically think 'bottle'. If you need help with any of these, contact a breastfeeding counsellor for help. Many mothers do use a bottle but be aware there are other options

and a bottle could lead to breast refusal or confusion with latching at the breast (beakers can be used from around six months).

Many babies like EBM to be warmer than fridge temperature. Just take the chill out by running a warm tap over the container.

Any other tips?

- Express as often as your baby would normally feed, if possible. If you are separated from your baby while expressing, thinking about or looking at a picture of the baby may help.
- Try expressing from one breast when your baby is feeding from the other. This takes advantage of the natural milk ejection reflex. It's easier if you are using an automatic pump. Most babies get used to the noise of the motor quickly — nothing stops a hungry baby feeding!
- When transporting frozen EBM in a cold box, be aware that cool blocks can be warmer than your milk so check they are newly frozen and refrozen regularly.
- Some babies refuse to take milk from a bottle at first. This isn't unusual. Try to spoonfeed the milk or use a small cup — special ones are available for premature babies. Older babies will often use a beaker or feeder cup.
- Remember, your baby is the most efficient pump of all! Don't use your pumping output as a reliable judge for what is going on with your milk supply. Pumping is a skill and, even when mastered, it is not the same process as a baby feeding.

Ardo (pump hire) 01823 336362
www.ardomedical.co.uk

EBM storage guidelines (postcard size)
available from the ABM.

Association of Breastfeeding Mothers
enquiries: 08444 122948 admin@abm.me.uk
ABM, PO Box 207, Bridgwater TA6 7YT
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Association of Breastfeeding Mothers

Expressing breastmilk



helpline: 0300 330 5453

www.abm.me.uk