Expressing your milk before your baby arrives (Antenatal expressing)

Transporting your frozen colostrum
You can take syringes of frozen colostrum into hospital using a freezer block and insulated bag. The colostrum can be defrosted under a running warm tap or at room temperature.

It's a good idea to mention your colostrum stores on your birth plan and make sure staff are aware in advance of your wishes in certain situations. The hospital may have access to a freezer for storage once you arrive.

After the birth, breastfeeding should usually be unrestricted. Ideally, a baby should feed successfully at the breast and the antenatally expressed colostrum would remain unused.

If your baby is experiencing difficulties with breastfeeding at this time, you may be encouraged to express some fresh colostrum to give to your baby. You may also use any colostrum you have brought into hospital with you in preference to using any formula.

If harvested colostrum ends up being ‘wasted’ because you are able to establish early exclusive breastfeeding, this is a cause for celebration rather than commiseration!

The process of antenatal expressing however, gives you a back-up if things don’t go to plan which many families find reassuring. You’ll also start your breastfeeding with a good sense of how to hand express and confidence about how your breasts work.

Storage of human breast milk
Colostrum can be collected two to three times each day in the same syringe. You will need to store the syringe in the fridge between uses.

At the end of the collecting day, the colostrum can be frozen - place the syringe into a zip-lock bag before putting into the freezer. Label the syringe and bag (separately) with the date and time of when you expressed.

The frozen colostrum can be stored for up to six months in the freezer. Once thawed, it should be used within 24 hours.

Is it safe?
The oxytocin hormone released when expressing, stimulates the uterus. Opinions differ on whether expressing colostrum antenatally is likely to induce labour. Those who advocate it do not believe that expressing would constitute sufficient stimulation to start labour. Sex while pregnant and breastfeeding through pregnancy both release oxytocin and both are generally considered safe while pregnant. If you experience any cramping in your uterus however, you should stop expressing and discuss your choice with your healthcare provider.

What if I need more help?
Visit the ABM’s website to find out the different ways we can support you and how you can find us on social media. You might also choose to become a member.
What is antenatal hand expression?
This technique involves expressing colostrum in the final few weeks of pregnancy. It can also be referred to as ‘colostrum harvesting’ and is advocated by some NHS Trusts. Mothers are normally advised to wait until around 37 weeks before starting antenatal expression. Mums who are having multiple births may sometimes start sooner as giving birth earlier is more likely.

Why do it?
For some mothers, it can be a useful tool that helps ensure their baby will start life without the need for formula supplementation. The importance of exclusive breastfeeding for all babies has been well-established by scientific research. Colostrum contains vital immunological properties and helps to colonise the baby’s gut with healthy bacteria that protect against allergy and disease. It also contains the perfect balance of proteins, fats and micronutrients needed for human babies as well as acting as a laxative to help the passing of the first tarry meconium stools. Some babies may experience difficulties with feeding or maintaining their blood sugar levels during the first few days after birth and therefore may require supplementary feeds. These include babies:
- whose mother had diabetes in pregnancy or who has a history of diabetes.
- with a cleft lip or palate identified during pregnancy.
- with congenital conditions e.g. Down syndrome or cardiac complications.
- diagnosed with intrauterine growth restriction.
- whose mother is taking beta blockers to control high blood pressure.
- who are twins or triplets.
Where there is a family history of cow’s milk protein sensitivity or type 1 diabetes, families may be particularly keen to avoid the use of early formula supplementation. Some women may need to consider supplementing feeds from an early stage if there are concerns over their ability to make and/or secrete milk.

How to hand express:
- Always wash your hands before expressing.
- Applying a warm compress to your breast or expressing after a warm bath or shower can help the flow of colostrum.
- Get yourself comfortable. Perhaps seated and leaning slightly forward but find what works best for you.
- Start with a gentle breast massage, stroking from the back of your breast towards the nipple to encourage the let-down reflex.
- Put your thumb above the nipple and your first few fingers below the nipple. You will be cupping the breast in a ‘C’ shape.
- With your thumb and fingers, feel a few centimetres back from the nipple.
- Press back towards your chest, then compress (press your fingers together), and release.
- Repeat this process, building up a rhythm. Press, compress, release.
- It may be useful to look online for videos of hand expression techniques.
Colostrum should start to arrive drop by drop. Initially it may just be a glisten on the end of your nipple, and it may take a few days of practice before drops appear.
Collect the colostrum into a clean container, like a syringe (1ml or 2ml syringe). If nothing happens, adjust your finger position slightly to find the spot that works for you. Try not to pinch your nipple or slide your fingers uncomfortably over the skin.
Rotate the position of your fingers and thumb around the areola (imagine a clock face) and repeat the expressing process to stimulate and remove colostrum from different parts of your breast.
Express each breast twice during each session. Colostrum can vary in appearance. Sometimes it may appear quite thick and yellow or orange and at other times paler and thinner. Expressing colostrum antenataally will not decrease or increase your milk supply after baby is born.

Although the terms mother and breastfeeding are used in our materials, we are mindful of the fact these are not used by every parent. The ABM supports all kinds of families and will ask families which terms they are most comfortable with.

These include women:
- who have a breast hypoplasia (limited breast development).
- who have had previous breast surgery.
It is important for a mother to discuss her plans to express antenataally with her healthcare provider. It may not be recommended if you’ve been at risk of preterm labour in previous pregnancies, or have a surgical stitch, for example.
It is recommended to express antenataally by hand rather than use an electric or manual breast pump. Colostrum will be produced in quite small quantities and can easily stick to the bottles or pump parts and be harder to collect. A pump at this stage is likely to be more uncomfortable than gentle hands. Try hand expressing for a few minutes, 2 or 3 times a day.
If you hand express and use a syringe to draw up the individual drips of colostrum, you can use these syringes for storage prior to birth. Your health care provider may be able to supply you with sterile syringes.