

# EXPRESSING BREAST MILK



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## 01 MUM MAKES MILK!

You're breastfeeding and are going to express milk. The midwives and nurses at the maternity ward and neonatal intensive care unit will be happy to help you find your way. Please feel free to ask them all your questions. This leaflet also contains useful information.

When you give birth, an ingenious system is set in motion for you to start producing breast milk. Your body releases the hormone prolactin every time your baby drinks from the breast, and this hormone ensures your mammary glands produce more milk. The more often your baby breastfeeds, the faster more milk is produced. Sometimes a baby cannot drink directly from the breast (yet). Fortunately, this doesn't mean that you cannot breastfeed! Expressing milk ensures that you still produce breast milk and these important hormones continue to be released.

If the baby doesn't drink from the breast and you don't express it frequently, milk production will not be initiated.

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### Did you know...

... every drop of your milk is worth its weight in gold?

... mother's milk contains extra antibodies during the first days

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## 02 HOW OFTEN TO EXPRESS?

To get milk production off to a good start, we recommend that you express eight times every 24 hours, especially for the first two weeks – as often as your baby would breastfeed.

The first time you express milk can be at the delivery centre, shortly after giving birth. Starting this soon helps with the further progress of breastfeeding.

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### 8 times in 24 hours

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You can express breast milk whenever you find it easiest. Some parents find it best to express milk every three hours; others prefer a more flexible schedule. You don't need to leave three hours between two pumping sessions – you can express milk more often during calmer times of day, and leave slightly longer gaps between sessions during busier times.

If you express milk more frequently during the day, you can take longer breaks between pumping sessions at night.

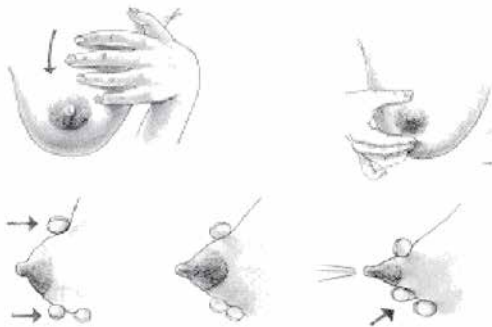
Please note: leaving more than five to six hours between pumping sessions has a negative effect on your milk production.

## 03 EXPRESSING MILK IN THE FIRST DAYS AFTER GIVING BIRTH

There won't be much milk yet in the first few days after giving birth – this is normal. You can express milk by hand to collect the drops and give them to your baby during this time. Take a syringe or jar with you to the neonatal intensive care unit to collect the drops in.

### Expressing milk by hand

- ▲ Wash your hands.
- ▲ Massage your breast (this ensures the milk is released more easily).
- ▲ Place your thumb and fingers around the breast.
- ▲ Gently press your fingers towards your chest, without moving them.
- ▲ Squeeze the breast tissue between your fingers with a soft, rolling, kneading movement towards the nipple (don't squeeze too hard!)
- ▲ Relax your fingers.
- ▲ Repeat this movement rhythmically.
- ▲ Swap sides frequently, for example when the flow of milk decreases.



Keep expressing milk for as long as it is released. If no milk is being produced yet, which is normal in the first few days after giving birth, pump each breast for five to ten minutes.

#### TIP

On [www.uzgent.be](http://www.uzgent.be) you can find a video about expressing milk by hand: type 'kolven' into the search bar. Then click the page 'Voeding van de baby'.

## 04 EXPRESSING MILK WHEN IT IS FLOWING WELL

As soon as more milk is being produced, it can be useful to use an electric breast pump. Most mothers find this quicker.

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### Materials

- ▲ Soap and/or hand sanitiser
- ▲ Breast pump
- ▲ Breast pump accessories
- ▲ Sterile milk containers (use a new container every time you express milk)
- ▲ Labels with your baby's name, and the date and time of expression
- ▲ Detergent to wash the breast pump accessories
- ▲ Clean muslin cloths or tea towels to dry and store the accessories after cleaning

You can use the maternity ward's breast pump during your stay there. New disposable breast pump accessories are also available every day. You will need to use your own expressing and sterilisation equipment when you leave the maternity unit (more information on page 12: Going home ... what I need). You may bring your own breast pump to the neonatal intensive care unit to express milk near your baby. Free milk containers are available.



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## Method

- ▲ Wash or sanitise your hands.
- ▲ Massage the breast. Nipple stimulation, warmth and expression by hand can help with lactation.
- ▲ Start on both sides, expressing milk from both breasts at the same time. This takes less time and stimulates production better.
- ▲ Use your hands to apply pressure to the breast. This allows you to express more milk and stimulates the flow.
- ▲ If one of the two breasts stops producing milk, continue to express on one side. You can now use both hands to massage.
- ▲ Change sides frequently. If a breast stops producing milk, you will often find that it starts again after a short pause.
- ▲ Continue as long as the milk flows.

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### TIP

On [www.uzgent.be](http://www.uzgent.be) you can find a video about maximising milk production by hand: type 'kolven' into the search bar. Then click the page 'Voeding van de baby'.

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You can adjust the pump's suction to make it feel comfortable for you: it should be strong enough to express milk without hurting. Express milk for as long as it continues to flow or 10-15 minutes if you are not producing much milk yet.

Some breast pumps have an 'initiate' mode, which you can use until the fifth day after giving birth. After the fifth day, or as soon as you start to express more than 20 ml each time, switch to the standard 'maintain' mode. Your midwife will provide further explanation.



## 05 COLLECTING AND LABELLING BREAST MILK

You can use a feeding spoon, syringe or milk container to collect the drops of milk. Wash or sanitise your hands before handling the milk, and make sure you have clean containers and a clean worktop.

The syringes and milk containers are labelled with:

- ▲ your baby's name and adrema number. Pre-printed labels are preferred, which are available from reception at the neonatal intensive care unit or maternity ward.
- ▲ the date and time when the milk was expressed.



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### Did you know...

... breast milk contains over 200 different components that are useful for growth and infant health?

... breast milk is very beneficial for the development of your baby's immune and digestive systems?

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## 06 BRINGING BREAST MILK TO THE BABY

### Your baby is with you in your room

Use a syringe or spoon to give your baby the freshly expressed milk. If you cannot give your baby the milk immediately, you can store it in the milk refrigerator in the maternity ward.

### You express milk at the hospital, your baby is in the neonatal intensive care unit

The breast milk is taken to your baby in NIC. We like to give fresh breast milk that has been expressed at the hospital. If the milk cannot be used immediately, it is refrigerated or frozen for use later. Bring the expressed milk to NIC as soon as possible. If this is not possible straight away, make sure you keep it in the milk fridge in the maternity ward. The logistics staff will then make sure your milk is taken to NIC. The NIC Nurse may ask you to divide the freshly expressed milk into several smaller portions.

### You express milk at home, your baby is staying in the neonatal intensive care unit.

Divide the breast milk into portions of maximum 50ml after expressing and place in the freezer as soon as possible. This ensures we can defrost the portions easily in the hospital with as little waste as possible. Frozen breast milk should be transported to the hospital in a cool box or bag with cooling elements.

For more info, please see chapter: Storing breast milk

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#### Did you know...

- ... we make sure your baby receives your breast milk in the ideal conditions?
- ... breast milk for the smallest\* children is subject to additional checks?
- ... we sometimes culture and pasteurise breast milk for them

\* children with a post-menstrual age (PMA) less than 32 weeks. A baby born 5 days ago at 30 weeks and 1 day has a PMA of 30+6 today..

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## 07 CLEANING THE BREAST PUMP

Wash the breast pump accessories (shield and connector) thoroughly with detergent and warm water. Rinse thoroughly afterwards and store hygienically, for example wrapped in washed and ironed muslin cloths or tea towels.

You will be given new disposable breast pumps and milk containers every day at the maternity ward, which you can use for 24 hours.

If you're using reusable accessories for your baby in NIC, it's important to sterilise them after washing. You can sterilise in different ways: in a sauce pan, in a steam steriliser (electric or for the microwave)... Sterilisation bags are available specifically for breast pump accessories, which can easily be sterilised in a microwave oven if you're away from home.

## 08 BREAST CARE

Normal hygiene is sufficient for breasts, areolas and nipples. Simply wash with water. Avoid soap as it will dry out the skin. You can use a soap-free washing lotion if you wish.

Wear a comfortable bra that fits properly, which is not too tight and provides adequate support. Keep the nipples dry. You can use breast pads to absorb any leakage. Replace them when they become damp.

## 09 GOING HOME... WHAT DO I NEED?

### Breast pump

There are various breast pumps available, ranging from hand pumps to electric devices. The choice of device depends on your wishes for expressing.

### Frequent to full-time expressing in the first weeks after birth: milk production is not yet up to speed

You build up milk production in the first weeks after birth. It's important to use a device designed for this purpose.

Parents leaving the maternity ward are advised to hire a hospital-grade two-phase double electric breast pump. This is the easiest way to increase production. The pumps are designed for very frequent expressing and you can adjust both the speed and suction strength.

Examples of a hospital-grade two-phase device:

- ▲ Medela symphony: you can rent this device from your pharmacy (CNK code 2485-027) or via some drugstores (see [www.medela.be](http://www.medela.be) > winkelzoeker > check box 'Symphony huren')



Medela symphony

- ▲ Ardo Carum breast pump hire: via the CM drugstore



Ardo Carum

## Expressing milk a few weeks after giving birth: good milk production

Parents who express milk full time can continue to use the breast pumps above.

Expressing milk when production is regular is also possible using a **lighter (double or not) two-phase device**. These devices are less suitable for full-time pumping (lighter motor) or increasing production. They are more suitable, however, for mothers who express once or twice a day, for example at work.

Examples of two-phase devices: Ardo Calypso Double, Medela Freestyle, Medela Maxi swing, Horigen Chicture, Philips Avent, Lansinoh Double Pump. In some specialist shops, you can test these devices before buying them. They are not for hire.



Medela freestyle



Medela swing maxi



Ardo calypso double



Horigen chicture



Philips avent



Lansinoh (smart pump)

Be careful with second-hand devices: they don't all have an external filter, so there is a risk of bacterial or fungal growth in the motor from small amounts of milk residues.



### Milk production is progressing well, mum only expresses milk occasionally

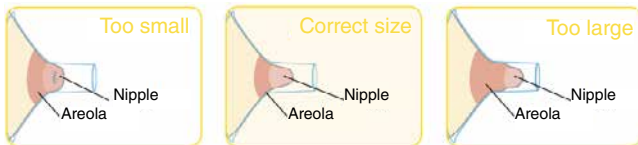
A hand pump may be sufficient for occasional, non-daily use.

Example: Lansinoh hand pump

## Shields and bottles

In addition to the pump itself, you also need the right accessories and bottles. Breast pump accessories include a breast shield and bottle connector. You cannot hire the breast pump accessories; you need to buy them.

It is not recommended to continue using the disposable accessories from the hospital at home. These are not designed to be sterilised or used for more than 24 hours. Prolonged use may result in the accessories becoming deformed/damaged, resulting in reduced suction. This means the device may not work efficiently and could lead to less milk being produced.



Source: Medela

Breast shields are available in different sizes. If a breast shield is too large or too small, pumping can be less efficient or painful. The size is determined by the size of the nipple, not the cup size. Always use the correct size:

- ▲ Your nipple should be able to move in and out of the shaft freely without rubbing against it.
- ▲ Only your nipple is sucked into the shaft, and not your areola (or only slightly).
- ▲ Your nipple does not turn red or white.



The pumped milk is collected and stored in a bottle. In case of an admission to the neonatal intensive care unit, you will be given free bottles on the ward. Even though there are special freezer bags for breast milk, we ask you not to use them to bring your milk to the hospital. These bags can become damaged during transport, which causes them to leak.

## 10 STORING BREAST MILK

	Home	Hospital
room temperature (18-25°C)	max. 4 hours	max. 2 hours
refrigerator (0-4°C)	max. 72 hours	max. 48 hours
fridge freezer compartment	2 weeks	/
deep freezer (-18°C)	3 months	3 months
deep freezer (-20°C)	6 months	

### Home

#### Storing breast milk at room temperature (18-25°C)

Freshly expressed breast milk can be safely stored at room temperature until the next feeding (max. 4 hours). The antibodies in the milk destroy the bacteria present.

#### Storing breast milk in the refrigerator (0-4°C)

Freshly expressed breast milk can be stored in the refrigerator for a maximum of 72 hours. The bottle should be kept in the middle and at the back of the refrigerator. If the breast milk will not be used within this time, the best solution is to freeze it as soon as possible.

#### Storing breast milk in the freezer

How long you can keep the milk depends on the type of freezer (see table)

### In hospital

In the hospital, stricter standards apply to the preservation of food.

#### Storing breast milk at room temperature (18-25°C)

In our hospital, freshly expressed milk may be kept at room temperature for up to two hours. Milk that has not been drunk after two hours is thrown away. Breast milk that will not be given immediately is best stored in the refrigerator as soon as possible.

## Storing breast milk in the refrigerator (1-4°C)

Freshly expressed breast milk can be kept in the refrigerator for up to 48 hours.

There is a milk fridge that you can use to refrigerate breast milk. If the breast milk will not be used within 24 hours, the best solution is to freeze it as soon as possible.

## Storing breast milk in the freezer

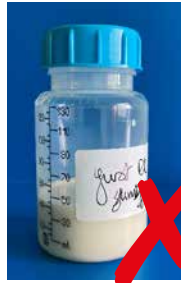
In the hospital, you can keep the milk in the freezer for up to three months.

## Things to consider when freezing breast milk



### Label correctly

- ▲ Baby's name and adrema number
- ▲ Printed label
- ▲ Time of expression
- ▲ Bottle was frozen upright
- ▲ Max. 50 ml per bottle



Make sure the label is legible



### Portion too large

Divide larger volumes of milk between several bottles, up to max. 50 ml



Use a bottle lid, and not a teat, to close it before freezing



Do not stick the label over the measurement markings on the bottle



Do not freeze at an angle





Do not use storage bags

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## Defrosting and heating breast milk

### Did you know...

... the colour of your breast milk varies? Sometimes it is watery white, sometimes it appears orange, and sometimes it even has a blue sheen. The colour does not change the good qualities of breast milk

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Breast milk is best thawed slowly: in the fridge or under running water from cold to lukewarm. In thawed breast milk, the fats separate from the watery part. Gently swirl the milk to mix it back together. Do not shake.

Heating breast milk to room temperature is sufficient. If you want it warmer, limit the time of heating (to max. 15 minutes). You can warm it up under running water or in a bottle warmer. Breast milk should not be heated in a microwave oven. Always check the temperature of the milk before giving it to your child. Thawed breast milk can be kept in the refrigerator for up to 24 hours.

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## Transporting breast milk

Breast milk expressed at home for a baby in neonatal intensive care should always be frozen.

Bring the frozen milk bottles to the hospital in a cool box or bag with cooling elements, so the milk remains frozen during transport.

Place the milk in the freezer in the neonatal intensive care unit upon arrival.

## 11 WHERE IS THE MILK?

Many mothers worry about their milk production. Some have the impression in their first days after giving birth that breastfeeding will never work out.

Rest assured that it's normal for milk production to only start properly after a few days.

Here are a few tips:

- ▲ The more often you pump each day, the faster production will increase.
- ▲ Expressing breast milk regularly in the first few weeks will increase production in the long run.
- ▲ Try to relax while expressing (stress hinders lactation).
- ▲ You can choose to pump close to your baby, next to the bed or near the incubator.
- ▲ Make sure you have plenty of skin-to-skin contact with your baby, if their condition allows it.
- ▲ Find a pleasant environment in which to express milk. Look at photos or watch a video of your baby while expressing.
- ▲ Settle yourself in comfortably, and make sure the room temperature is warm enough.
- ▲ Pumping on both sides stimulates better milk production.
- ▲ Applying warmth and massaging and/or expressing by hand before pumping can stimulate lactation.

## 12 BREAST ENGORGEMENT

After a few days of expressing milk, both breasts may feel hard, tight and painful. This tension is the result of the increased milk production. You can continue to express milk as usual. The engorgement will stop again by itself after a few days.

In case of severe engorgement, pumping is sometimes difficult: the milk seems to be stuck in the breast. The milk will be released more easily if you place warm, moist compresses or a warmed cold/hot pack on the breast beforehand and massage it. If this doesn't work, please ask for help.

If your breast becomes infected (usually just one breast), this may also cause it to feel engorged. The breast appears red, and sometimes mum will feel like she has flu symptoms with a fever. If you suspect a breast infection, it's important to seek help straight away, for example from a midwife. It's important to continue feeding because milk stasis (milk staying in the breast) is the most common cause of a breast infection. See a doctor if the breast infection persists. You can continue breastfeeding. If medication is required, ask for a medicine which allows you to continue breastfeeding.

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### Did you know...

... stress hinders lactation?

... pumping near your baby or in a quiet place while looking at a photo of them helps the milk to flow more easily and can prevent engorgement?

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## 13 CHECKLIST

Complete this checklist yourself and/or together with the midwife or nurse.

	Okay: I know this, it is taken care of.
Expressing milk by hand	
Electric pumping	
Types of breast pumps	
Correct breast pump shield	
Hiring a breast pump	
Cleaning the equipment	
Storing milk	
Transporting milk	
Influencing production	
Help lines	

Independent midwife and/or lactation expert who will check on you at home:

Name .....

Phone number .....

## 14 EXPRESSION DIARY

Here is an expression diary, which is helpful for keeping track of when and how much you pump. Or you can download a free digital version from [www.uzgent.be](http://www.uzgent.be). Useful free apps to keep track of breastfeeding or pumping sessions on your smartphone are available online.

EXPRESSION DIARY					
date : ..... / ..... / .....			date : ..... / ..... / .....		
Time	Expression/Latching	#ml	Time	Expression/Latching	#ml
	Total			Total	

EXPRESSION DIARY					
date : ...../.....			date : ...../.....		
Time	Expression/Latching	#ml	Time	Expression/Latching	#ml
	Total			Total	

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## 15 USEFUL ADDRESSES

### UZ Gent

#### Maternity

Tel. 09 332 20 43

#### Lactation Consultant Maternity

Tel. 09 332 24 36

[lactatiekundige@uzgent.be](mailto:lactatiekundige@uzgent.be)

#### Neonatal ICU

Tel. 09 332 35 37

#### Lactation Specialist NIC

[bvneonatologie@uzgent.be](mailto:bvneonatologie@uzgent.be)

### Flanders Professional Midwives Association

Independent midwives and/or lactation consultants in your area [www.vroedvrouwen.be](http://www.vroedvrouwen.be).

### Breastfeeding assistance

You can always contact an independent midwife for breastfeeding assistance, but the other resources may also provide the information you need. The organisations listed below can offer professional care providers (midwives, lactation experts) or experienced professionals (mothers with extensive breastfeeding experience, volunteers). (This is a non-exhaustive list.)

#### Belgian Association of Lactation Experts

[www.bvl-borstvoeding.be](http://www.bvl-borstvoeding.be).

#### Vzw Borstvoeding

[www.vzwborstvoeding.be](http://www.vzwborstvoeding.be).

#### La Leche League Vlaanderen

[www.lalecheleague.be](http://www.lalecheleague.be)

#### Vereniging voor Begeleiding en Bevordering van Borstvoeding (Association for Guidance and Promotion of Breastfeeding)

[www.vbbb.be](http://www.vbbb.be)

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## Maternity Care Expertise Centre

Expertise centres provide besides home care by midwives and maternity carers, also extra services such as telephone info line, sometimes a shop/lending desk (e.g. breast pump), organisation of courses/workshop ...

All info and regional addresses at: [www.expertisecentrakraamzorg.be](http://www.expertisecentrakraamzorg.be)

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## Kind en Gezin (Child and Family)

Kind en Gezin is an organisation subsidised by the Flemish Government. Its mission is to provide, together with its partners, as many opportunities as possible to every child, no matter where and how they are born and brought up. You can also find a lot of information on their website. [www.kindegezin.be](http://www.kindegezin.be).

Tel. (Brussels) 02 533 12 11 - Info line 078 15 01 00









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## Maternity

T +32 (0)9 332 20 43

[www.uzgent.be/materniteit](http://www.uzgent.be/materniteit)

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## Neonatal ICU

T +32 (0)9 332 35 37

[www.uzgent.be/neonatale-intensi](http://www.uzgent.be/neonatale-intensi)

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## Lactation expert

T +32 (0)9 332 24 36

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