

Early Maternal Breast Milk



Evidence shows that for premature babies, their mother's* fresh breast milk is the most important and effective nutrition that is available.

Your breast milk has a vital role in protecting your premature baby's gut from necrotising enterocolitis, a serious, and sadly in some cases, life threatening gut condition. It also helps their brain, immune system, eyes and lungs. For premature babies, breast milk is associated with improved development as the baby grows up (development includes skills such as walking, coordination, speech).



Every drop counts

Each millilitre of their mother's breast milk has a positive influence on outcomes for premature babies.

All babies, no matter how early or unwell, can receive their mother's colostrum (special early breast milk) into their mouths.

Your breast milk is specifically designed for your baby in terms of nutrition, optimum gut health and immunity.

* The words 'mother' and 'mothers' have been used throughout this leaflet as this is the way that the majority of those who are pregnant and having a baby will identify. For the purposes of this leaflet, this term includes girls. It also includes people whose gender identity does not correspond with their birth sex or who may have a non-binary identity. ([nmc.org.uk: standards-of-proficiency-for-midwives.pdf](https://www.nmc.org.uk/standards-of-proficiency-for-midwives.pdf))

Providing breast milk for your baby

You may not have decided yet how to feed long term, but if your baby is born prematurely you will be encouraged to express milk for them before, or very soon after birth.

Whilst this can be overwhelming and a lot for you to process, the midwives, nurses and feeding specialists will be on hand to talk to you and help you with expressing, storing and delivering your breast milk to your baby. This leaflet is designed to share some of the science behind the benefits of breast milk for preterm babies.

When can I start expressing breast milk for my baby?

Although you may give birth early, your body will still be able to make breast milk, but your breasts will need the stimulation of regular expressing to start and maintain breast milk production.

Expressing before your baby is born

You can start expressing breast milk for your baby even before they are born. You must discuss this with your doctor or midwife before you start as **antenatal expressing should only be done once it is certain that you will give birth to your baby in the next few hours.**

You can discuss this with the obstetric and midwifery team to support your decision.

- Antenatal expressing can be done by hand or by using the special 'Premature Breast Pump'. Expressing by hand or pump encourages your breasts to have milk available at birth. **This would mean your breast milk can be one of the first (and most important) treatments your baby receives,** even if this is for initial mouthcare and you choose, for whatever reasons, not to breast feed long term.

Expressing after your baby is born

- Evidence shows that if you can **express within the first 1 – 2 hours after giving birth,** your milk volumes will be over double by 7 days (compared to if you wait until later than 2 hours after giving birth), and this difference continues until at least 4 weeks.



Frequency of expressing:

- When it is possible, having as much skin to skin contact with your baby will help with milk production.
- Aim to express **8 to 10 times in every 24 hours**; Staff can help with both hand expressing and using the pump.
- **Night time expressing** is important because that is when the hormone receptors are most ready to stimulate milk production. Although challenging it will help with establishing your supply. An alarm can help.
- It may seem frustrating when very little milk comes out initially, but this stimulation will be important to get breast milk production established. **Every drop of breast milk counts and gives your baby important nutrients.**

Increasing Breast Milk Supply:

Sometimes, despite regular expressing, your milk supply may start to fall. Feel free to talk to us about this, but there are also things we recommended you do to help increase your breast milk supply:

- Increasing the amount of contact and skin to skin you have with your baby (Staff will support you with this).
- Expressing near your baby, thinking about your baby, and looking at photos of your baby while you express.
- Exchanging a muslin cloth or item of clothing with your baby that has been near you. They will be comforted by your smell and you can touch and smell something that your baby has been close to when you are expressing.
- Looking after yourself by drinking plenty so that you stay hydrated, eating well and getting rest when you can.
- Increasing the frequency of expressing attempts: try hand expressing and using the pump.
- Checking you have a good fit with the pump. There are different size shields available and you can ask one of the staff to help you check you have the right one.

Donor Breast Milk

Your fresh breast milk is the most important nutrient to give to protect premature babies. Where possible, we avoid giving formula for premature or very low birth weight as it can increase the risk of a very serious gut complication (Necrotising Enterocolitis (NEC)), as well as eye and lung problems. We will do everything we can to support you to produce your own breast milk to give to your baby, but when necessary, for example while your milk volume is increasing, with your agreement we will offer Donor Breast Milk for all babies <32 weeks gestation or under 1.5kg. Donor Breast Milk is a highly regulated, pasteurised product obtained from our SouthWest Neonatal Network Breast Milk Bank.

Please see our other leaflets on '**Donor Breast Milk**' and '**Expressing your milk**' for practical advice about expressing techniques and milk storage.

If you require further support with feeding please ask your midwife or baby's nurse to contact your local Infant Feeding Specialists.