

## **Antenatal Expressing**

At Swansea Bay University Health Board we are committed to promoting and supporting breastfeeding as the safest and healthiest way to feed your baby. It is well known that exclusive breastfeeding for the first six months has many health benefits, including reducing rates of infection, obesity, diabetes and Sudden Infant Death Syndrome (SIDS) to name but a few.

Colostrum is the first milk produced during pregnancy and during the first few days after birth. It contains vital immunoglobulins and helps to colonise the baby's gut with healthy bacteria that protect against allergy and disease, as well as containing the perfect balance of proteins, fats and micronutrients needed by babies.

### **Why express in pregnancy?**

Antenatal expressing is something any expectant mum can do from around 37 weeks' gestation. It can, however, be particularly useful for mums whose babies are at a high risk of having low blood glucose in the first few hours after birth. These can include women:

- with diabetes in pregnancy (pre-existing or gestational)
- who have high blood pressure and are being treated with beta-blockers
- whose infants are known to have intra-uterine growth restriction, sometimes referred to as tailing growth or small for gestation age (SGA)
- who have had multiple pregnancies

In the first 48 hours following birth these babies are likely to need additional milk to maintain their blood sugar. Ideally this will be expressed breastmilk, however often formula milk may be used. Babies of diabetic mothers in particular are at a greater risk of developing diabetes themselves, especially if they are given formula.

### **How to hand express:**

1. Always wash your hands before expressing and ensure you have a sterile container or syringe before you start.
2. Apply a warm compress to your breast before you start. Sometimes a warm bath or shower can help the flow of colostrum. Ensure you are comfortable and are as relaxed as possible.
3. Start with a gentle massage, starting from the back of your breast toward the nipple to facilitate the let-down reflex.
4. Feel your breast to find the right spot; this is often about an inch or so behind the nipple.

5. Cup your breast with one hand making a C shape with your thumb and the rest of your fingers.
6. Gently compress your breast and then release the pressure. Try to build up a rhythm. Milk should start to flow. Remember the colostrum is very thick and concentrated so will often start as tiny droplets.
7. Try not to worry if you do not obtain any colostrum initially; it can take a few days of trying for drops to appear and it may just be a glisten at the end of the nipple initially.
8. Rotate the position of your thumb and fingers around the areola and repeat the process to stimulate different areas of your breasts in order to remove colostrum.
9. Aim to use both breasts twice during each session.
10. You can collect your colostrum 2-3 times a day into the same syringe and store this in the fridge between uses while at home. At the end of the day store your colostrum in the freezer, clearly labelling it with your name and the date that it was collected. While you are on ward 19 we only have a freezer available to store milk; therefore it will need to be frozen immediately.

## **Some considerations**

Expression of milk and breast/nipple stimulation releases the hormone oxytocin which is what stimulates the uterus to contract. If you start to feel any Braxton Hicks, this is nothing to worry about. However, if they become painful, you should stop expressing, and rest.

## **Storage of breastmilk**

Breastmilk can be stored in the fridge for 48 hours while in the hospital or up to six days in your own home (in the back of the main compartment of the fridge, not the door). It can be stored for up to six months in a freezer and used within 24 hours of defrosting. The best way to transport frozen milk to the hospital in an insulated cool bag with ice packs.

## **Remember...**

After birth breastfeeding should be unrestricted, and ideally babies should feed exclusively at the breast, with the expressed colostrum being unused. However, if your baby is experiencing any difficulties with feeding or maintaining blood sugars the colostrum you have expressed can be given via syringe rather than introducing formula. Do not be disappointed if any colostrum you collected is unused as baby is breastfeeding well; this should be something to celebrate! However, it can be useful to know that you have milk available for your baby should things not go to plan; something that many parents find reassuring. You will also start your breastfeeding journey with the ability to hand express and a good understanding of how your breasts work.