Why should I express?

- To help your baby regulate blood sugar levels at birth.
- It contains infection-fighting antibodies that flourish in the gut.
- To help establish milk production.
- If you and baby are briefly or unexpectedly separated there is less chance of delay in feeding your own milk.
- You will feel more confident if you experience any feeding challenges.
- To help prevent jaundice.
- Peace of mind if things don't go as hoped or if there are any feeding difficulties.
- It is a useful skill.
- It is a good way for partners or loved ones to be involved in feeding.

Further support

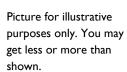
If you decide to continue feeding your baby breast milk, the following support is available:

- Facebook: Swansea Bay 'Bumps in the Road' breastfeeding group
- Local breastfeeding groups attended by a breastfeeding specialist midwife (speak to your community midwife for details)
- Breastfeeding support from Midwives,
 Maternity Care Support Workers and
 Nursery Nurses
- National Breastfeeding Helpline
 0300 100 0212
- * A video demonstration of hand expressing can be found on the UNICEF website at: https://www.unicef.org.uk/babyfriendly/ baby-friendly-resources/breastfeedingresources/hand-expression-video/



Antenatal Expressing Leaflet

Speak to your Community Midwife if you have any questions about antenatal expressing or would like to discuss your individual circumstances.





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What is Colostrum?

Coloustrum is produced in small quantities from around 16 weeks of pregnancy.

Colostrum is a thick sticky substance, yellow or clear in colour that is made before breast milk production begins.

It is a highly concentrated and nutritious substance that helps line the baby's gut with healthy bacteria.

Who can express colostrum?

• Any mother from 37 weeks of pregnancy

It is particularly recommended for:

- Mothers with diabetes
- Mothers who are planning a caesarean section
- Mothers taking beta-blocker medication e.g. Labetalol for high blood pressure
- Babies who may need admission to the Special Care Baby Unit
- Babies with cleft lip/palate
- Twins or triplets
- Babies with a congenital condition
- Babies considered small for gestational age

How do I do it?

- 1. Wash your hands.
- 2. Get comfortable and relax.
- 3. Gently **massage** the breast from the back of the breast toward the nipple.
- 4. Cup your breast and place your thumb and finger about **2-3cms** from the base of the nipple.
- Create a 'C' shape with your thumb and fingers to gently compress this area. Slowly release the pressure and repeat to create a rhythm.
- 6. Avoid sliding your fingers across the breast tissue.
- 7. You can move your fingers towards the nipple or further away. Find the spot that works best for you.
- 8. When the flow slows down, move your fingers around to another section of the breast and repeat so that all lobes are drained.
- 9. Do the same in the other breast. Repeat 2-3 times a day.
- 10. Express the colostrum into a **sterilised feeding cup** and use the syringes to draw up the colostrum.

How much will I get?

At first nothing may come out. Do not worry. It can take a few days for droplets to appear. Any time spent hand expressing will help to make colostrum in the future.

Storage of Colostrum

- Colostrum can be collected 2–3 times a day using the same syringe. The syringe must be stored at the back of the fridge between use.
- At the end of the day, put the syringe in the freezer in a zip-lock bag. Label it with your name, hospital number and date of collection.
- There are fridges within all maternity settings to store your colostrum. The best way to transport frozen milk to the hospital is in an insulated cool bag with ice packs.
- Once defrosted colostrum must be used within 24 hours. It cannot be re-frozen.

Where can I store?	How long for?
Room temperature	6 hours
Back of the fridge 4°C	48 hours
Ice compartment of a	2 weeks
Freezer 18°C or lower	6 months



