**EXPRESSING BREAST MILK**

Expressing breast milk is when you use your hands or a breast pump to get the milk from your breasts. Whether you use your hands or a pump is dependent on how long you have been breastfeeding, the reason you are expressing and how often you are going to express.

The first milk you produce after your baby is born is called colostrum. If you need to express milk at this stage it is often easily done by hand. If you need to express for more than a short time your midwife may suggest combining hand expressing and using an electric breast pump.

The number of times you will need to express per day will depend on your circumstances. For example, if your newborn baby is not feeding from the breast at all you will need to express frequently to establish a good milk supply (at least 8-10 times a day) and using a breast pump in combination with hand expressing will be more effective. Your midwife or a lactation consultant can help you to plan what might be best for you and your baby.

**Important points to remember**

- Expressing should be done gently to avoid pain and discomfort.
- The use of gentle breast massage and nipple stimulation will help to encourage the milk flow (let-down reflex - see: Breastfeeding: Getting started factsheet).
- Using relaxation techniques or thinking about your baby while expressing may also be helpful.
- Expressing frequently throughout a 24-hour period (including overnight) is more effective at stimulating your milk supply than expressing for a long period of time at one sitting.
- When your baby is unable to feed from the breast for more than a day or two, combining hand expressing and using a breast pump will provide more stimulation for your milk supply.

**Reasons for expressing**

There are a number of reasons why you may need to express breast milk:

- your baby is unable to attach at the breast or is not sucking effectively
- you are separated from your baby, e.g. baby is premature or sick, or you are unwell
- your breasts are firm and expressing to soften them helps your baby to attach at this time (usually a short-term problem)
- your nipples are damaged and attachment is painful
- your milk supply is low and you need to stimulate more milk production
- your breasts feel lumpy and it will help to clear them to manage or avoid mastitis
- you have another obligation which means you will miss a feed.

**Hand expressing**

If your midwife has not already shown you how to express please ask her to do this before you go home.

**Some general points to remember**

- If your baby is not able to breastfeed, early expressing is important and best commenced as soon as possible after the birth.
- Where possible mothers and newborn babies are placed skin-2-skin immediately after birth. Holding your baby skin-2-skin provides important warmth and comfort as well as helping with breastfeeding.
- In the first few days after birth the amount of colostrum expressed may vary from a few drops to a few mls. As colostrum changes to more mature milk the volume will gradually increase.
• Expressing frequently (at least 8–10 times in 24-hours, including overnight) will help establish the milk supply.

• If your breasts become very full, hand express a little milk just before the feed to help your baby to latch on well.

If your nipples are too tender for your baby to breastfeed hand expressing may be the gentlest way to obtain milk.

A general guide for hand expressing
Always wash your hands before you start to express. To begin, gently massage your breasts for a short time and stimulate your nipples to encourage the let-down or flow of milk, then:

1. With your hand under your breast, place your thumb and index finger on either side of your areola, well back from the nipple
2. Gently press your thumb and forefinger back into your breast and as you do this, press them towards each other behind the nipple. Press for about two seconds, then release
3. Continue to compress and release and your milk will begin to appear
4. When the flow stops move your fingers to another position, around the edge of the areola, and start again
5. When the flow slows to drops of milk change to the other breast
6. Massage both breasts again and repeat steps 1–5.

It is important not to cause pain or friction while expressing. If using a breast pump ask your midwife to check that the shield size is correct.

How long does expressing take?
Breast milk expression may take between 20-30 minutes.

The important thing is to express one breast until the flow slows to drips and then to switch to the other breast. Once that breast slows, if you are expressing because your supply is low, switch back to the first breast again. By switching back and forth, expressing each side two or three times, you will increase your supply over time.

Using "breast compression" will help to drain your breasts and therefore speed up the process as well as increasing the amount you obtain. Breast compression means squeezing your breast gently (i.e. where the breasts meet the ribs with your fingers on one side and thumb on the other).

Discuss combining hand expressing and using a breast pump with your midwife to provide additional stimulation for your supply. This may be especially important if you are not breastfeeding directly from the breast for more than a day or two, particularly if your baby is newborn, premature or unwell.

How much milk should you get?
Mothers of well babies born at term produce 500-600mls of breast milk every 24 hours toward the end of the first week.

Mothers of preterm infants need to have 500–700mls by day 7 to ensure there will be enough milk when the baby is older and ideally 750–800 mls by the end of the first two weeks.

Mothers of twins need to have 1100–1400ml every 24 hours by two weeks.
## Guidelines for storage of breast milk at home

<table>
<thead>
<tr>
<th>Breast milk status</th>
<th>Room temperature (26°C or lower)</th>
<th>Refrigerator (4°C or lower)</th>
<th>Freezer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freshly expressed into container</td>
<td>6-8 hours</td>
<td>3-5 days</td>
<td>2 weeks in freezer compartment inside refrigerator</td>
</tr>
<tr>
<td></td>
<td>If refrigerator is available</td>
<td></td>
<td>3 months in freezer section of refrigerator with separate door</td>
</tr>
<tr>
<td></td>
<td>store milk there</td>
<td></td>
<td>6-12 months in deep freeze (-18°C or lower)</td>
</tr>
<tr>
<td>Previously frozen thawed in refrigerator but not warmed</td>
<td>4 hours or less – that is, the next feeding</td>
<td>24 hours</td>
<td>Do not refreeze</td>
</tr>
<tr>
<td>Thawed outside refrigerator in warm water</td>
<td>For completion of feeding</td>
<td>4 hours or until next feeding</td>
<td>Do not refreeze</td>
</tr>
<tr>
<td>Infant has begun feeding</td>
<td>Only for completion of feeding</td>
<td>Discard</td>
<td>Discard</td>
</tr>
</tbody>
</table>

For more information

**Your local Maternal and Child Health Nurse**

**Maternal & Child Health Line**
T: 13 22 29 (24 hours)

**Australian Breastfeeding Association**
T: 1800 686 268 - Breastfeeding Helpline
W: www.breastfeeding.asn.au

**Related fact sheet**
- Mastitis
- Using a breast pump