

Breastpumps and Milk Supply

Breastmilk can be expressed by hand or with the use of a breastpump. There are many pumps to choose from and you may need to try several before you find the right one for you. A lactation consultant, La Leche League Leader or WIC counselor may be able to help you. In Washington State you can call the Family Health Hotline at 800-322-2588 to locate breastfeeding support in your community or to learn where to rent or buy a breastpump.

If you are returning to work more than six weeks after your baby was born and you are working eight hours a day or more, you will need to pump your milk at least two to three times while you are separated from your baby. If you are returning to work earlier than six weeks, you may need to express more often to establish your milk supply. You may also want to pump at home to help build up a milk supply. Pumping is a skill that takes time to develop. Whichever method(s) you choose, allow time to practice before returning to work.

Breastpumps

Electric: If you will be pumping 2-3 times a day and have little time, you may prefer an electric pump. An electric pump is faster and more efficient as it allows you to pump both sides at once and mimics a baby's suck, which helps to establish and maintain your milk



supply. Many women rent rather than purchase these pumps.

Battery: This type of pump may work well for occasional use but isn't recommend for the mother who returns to work full time. The suction lessens as the battery gets weaker. Some battery-operated pumps can be converted to electric with the use of an adapter.

Manual: You power the pump by pushing and pulling or squeezing a handle. Some manual pumps more closely simulate the baby's suck and may be more effective than others. Because manual pumps involve a repetitive movement, your hands may tire and this method may take longer. Do not buy those that look like a bicycle horn, because they can not be cleaned properly and milk may become contaminated.

Hand Expression: Some mothers prefer this as they feel it is more natural. This can be very convenient as there is nothing to buy, break, wash or carry. With practice some women become very efficient with this method.

How to solve possible breastpump problems

Many mothers experience some problems with breastpumps. A breastfeeding baby with a good suck can remove most of the milk from one breast in about 10-20 minutes. A good pump should do the same. If you are having problems with your breastpump and you know you don't have a defective or weak pump try:

- *Cleaning all parts of the pump that touch the milk with warm soapy water. If a part is gummy with dried milk, soak it in vinegar for several hours then wash and rinse well.*
- *Checking all parts for cracks. Are the parts attached properly and tightly? Hairline cracks can affect suction. Double-check pressure settings.*
- *If you are still having problems, call the person, clinic or company where you got your pump.*



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Meeting your baby's nutritional needs

You can meet your baby's nutritional needs while working and breastfeeding. Consider the following options:

1. While at work, express and refrigerate your breastmilk for the next day's feedings. Continue to breastfeed whenever you or your baby are together, or
2. Go to the care provider during your lunch break for feedings or have your care provider bring your baby to your worksite, or
3. If your baby is older and you have a good milk supply, nurse at home in the morning, evening, at nights and on the weekends. Have your child care provider feed your baby iron-fortified infant formula while you are at work. You may need to provide some formula on the weekend as your milk production may be low.

Ensuring your milk supply

Some mothers are able to express only a few drops of milk their first try. Others express a few ounces. Expressing a small amount doesn't necessarily mean your milk supply is low. **A nursing baby is more effective than your hand or any pump.** The amount of milk you express can change depending on many things: how long it has been since you last breastfed your baby or expressed your breasts, how comfortable you are in the setting where you are expressing, the time of day, your diet, the amount of

sleep or rest you are getting and if you are going through an unusually stressful time. Remember, pumping and hand expression improve with practice. Talk to other moms who have pumped, especially those who have had problems and listen to their solutions. If you plan to use birth control with hormones such as the pill or "the shot", be sure to



Photo courtesy of Medela, Inc.

tell your health care provider you are breastfeeding. Some types of contraceptives work better with breastfeeding than others. Your care provider can help you choose the best one for you.

The "let-down" occurs many times during a feeding or while pumping. Stimulating the "let-down" is important because it makes the milk in all parts of the breast accessible for nursing or expressing. Some mothers let down their milk when they hear a crying baby or even at the thought of their own baby. Because pumping and hand expressing feel different compared to a nursing baby, you may need to encourage your let-down. This can be done in several ways:

- Find a comfortable, private or semi private setting such as an unused office, storage room or restroom lounge area.
- Limit other activities by taking the phone off the hook, listening to relaxing music and expressing in a familiar setting. This could be the same place each time, a comfortable chair or a familiar routine.
- Gently massage your breasts right before expressing. Stimulate your nipples by rubbing or rolling them.
- Relax by taking a few deep breaths and imagining a pleasant place. You can also imagine your baby at your breast, look at a photo of your baby, feel and smell one of your baby's blankets or listen to a recording of your baby's voice.
- Encourage multiple let-downs, try several of these suggestions and massaging your breasts throughout the time you are pumping. When single pumping, switch

When selecting a pump consider these questions

- Is the pump easy and comfortable to use?
- Are the instructions easy to understand?
- Are single and double pumping options available?
- Are replacement parts available without having to buy an entire kit?
- Is the pump easy to clean?
- What is the cost of the pump?
- If considering a used pump, use your own tubing and realize a pump's motor is not meant to last beyond a couple years of regular use.

breasts when the flow of milk lessens, expressing from both several times during each session.

Try pumping for 10-20 minutes per breast. Some breasts release milk more quickly than others. Complete emptying will signal the breast to make milk faster. Mothers make from ½ to 2 ounces of milk per hour per breast. The breasts make milk fastest when they are “emptiest.” Milk left in the breast does not go bad. But it does signal the breasts to make less milk. It is important to pump at least every four hours.

Pump or express when your breasts feel full. For many women this is the first thing in the morning. With practice, you may be able to pump while nursing your baby.

If you give your baby a pacifier, you will decrease your milk supply by limiting the number of times your baby sucks at the breast. Remember, the more you nurse, the better your milk supply.

Nurse your baby whenever he shows signs of hunger such as rooting, mouthing and sucking on fingers or hands. Crying is a late sign of hunger. By that time your baby may be too fussy to eat easily.

Try breastfeeding only and avoid bottles and formula when at home. Consider providing extra nursing time at night, days off, weekends and before and after work to help you keep a good milk supply. If you think your supply is low, nurse more frequently when home.

Get plenty of rest, and eat extra food and drink to maintain your health. Your diet should be well balanced and include lots of fruits, vegetables, carbohydrates and fluids. You need more calories breastfeeding than during pregnancy.



Consider sleeping near your baby. This helps some moms get more rest and makes night nursing easier. It is normal for babies to nurse at night. This provides valuable calories and comfort, plus it can help keep your milk supply up. Unlike taking a bottle to bed, it does not increase the risk of cavities. Putting your baby to sleep on his back and sleeping in the same room as your baby decreases the risk of SIDS.

Storage and handling breastmilk

You can keep your breastmilk clean and safe by following these suggestions:

Always wash your hands before expressing or handling breastmilk.

Clean your breastpump and collection bottles after each use with hot, soapy water. Rinse well with hot water and air dry.

Express breastmilk into clear glass or plastic bottles with caps. Freezer safe, plastic bottle liners may be used but can't be filled to the top as they may split open when frozen.

To avoid wasting breastmilk store it in 2-4 ounce quantities per container. Small amounts thaw and warm up more quickly, and less milk will be left if your baby does not take it all. You may need to combine several containers of breastmilk to equal the number of ounces your baby needs for each feeding

Label each container of breastmilk with your baby's name, the date expressed, and the number of ounces of milk.

Refrigerate breastmilk. If no refrigerator is available, store with an ice pack or on ice until you're able to refrigerate or freeze. Use an insulated container to transport the breastmilk you collect.

Thaw frozen breastmilk under warm running water or in a pan of warm water. **Do Not Microwave breastmilk!** Microwaving can destroy protective factors present in breastmilk and can create hot spots in the milk, which can burn your baby's mouth.

Rotate storage containers so breastmilk with the earliest date is used first. Remind your child care provider to do this too.

Defrosted milk can be safely refrigerated for up to 24 hours. It should not be refrozen. Talk to your health care provider about storing your breastmilk if your baby is ill or premature.

Introducing a bottle

Introducing a bottle is easy for some babies but requires more time for others. Practice time with a bottle can begin anytime after breastfeeding has been successfully established, usually after breastfeeding 8-12 times a day every day during the first four to six weeks. If it is necessary to return to work before this time, you may need to begin introducing a bottle while you are still establishing your milk supply. The amount of milk you produce is determined by how often you nurse and how much your baby takes from the breast. Even if you pump your own milk, giving bottles too soon can cause the baby to suck the breast as he sucks the artificial nipple and this will not get enough milk out of your breasts. Nursing at the breast requires more active participation from a baby than taking liquid from a bottle. By waiting until your milk supply is established (four-six weeks) switching back and forth from breast to bottle should have little effect on your supply. Make sure that you nurse your baby at the breast when you are together and that you pump regularly.

Guidelines for Storing Breastmilk	
Room temperature at 60° for 24 hrs; 66°-72 for 10 hrs; 79° for	4-6 hrs
Refrigerator; fresh milk (32°-39° F or 0°-4° C)	Up to 8 days
Refrigerator; thawed milk (32°-39° F or 0°-4° C)	24 hours
Freezer compartment inside refrigerator	2 weeks
Freezer compartment above, below or next to refrigerator	3-6 months
Deep freezer less than 0° F	6-12 months
Insulated cooler / ice packs (60° F or 15° C)	24 hours

Your baby may not like taking a bottle from you as he or she is used to breastfeeding. If this happens, ask a family member, friend or neighbor to help introduce the bottle. At least one bottle per day with a few ounces of expressed breastmilk should get your baby familiar with the bottle and shouldn't interfere with breastfeeding. Your baby may like a bottle nipple that imitates the size and shape of a breast. You may need to try different nipples on the bottle, such as one's with small "slow-flow" holes. Try offering the bottle before the baby is too hungry. Instead of pushing the bottle nipple into the baby's mouth, try laying it near his mouth and allowing him to pull it in himself. Run warm water over the bottle nipple to bring it to body temperature.

If your baby is still having trouble after several tries and you are becoming frustrated, try a cup, or spoon. If your baby has a difficult time accepting a bottle, be patient; continue to offer the bottle and allow the baby to explore it at her own pace.



"It was very important to me to have support from my employer so I could maintain my milk supply for my adopted daughter. Being able to breastfeed her provided a special closeness." Karen, mother of Layla.



Family Health Hotline a program of
1.800.322.2588
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