

Antenatal Hand Expressing Guideline

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	1
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Dissemination Arrangements:

- Policy Distribution List
- NHS Fife Intranet: Women and Children's Heath Directorate

Target Patient population:

All pregnant women from 37 weeks gestation

Target Staff population:

All staff who care for women in the antenatal period.

Guideline Content:

Introduction

Procedure

Related NHS Fife Documents

References

Appendix



Introduction:

This guideline will inform staff on

- How to identify women who may want to express their colostrum antenatally
- When to advise women to start expressing their colostrum
- What resources and advice to give to women who want to express
- Safe storage and labeling of colostrum both in the home and hospital environment
- Transportation of colostrum into hospital
- Who should **not** express their colostrum antenatally

Procedure:

Who may be eligible to express?

Any expectant woman could potentially express her breast milk starting from 37 weeks gestation. It is particularly useful to antenatally express if the baby is at an increased risk of having a low blood sugar in the first few hours after birth. This can include:

- Women with diabetes in pregnancy (pre-existing or gestational)
- Women having an elective caesarean section
- Women taking beta blockers (e.g. labetalol)
- Women with a raised BMI
- Infants known to have Intrauterine growth restriction
- Infants diagnosed with an anomaly such as Down's Syndrome, a cardiac complication, cleft lip/palate
- Women with breast hypoplasia
- Women with hyperandrogenesis (polycystic ovarian disease)
- Women who have had breast surgery
- Strong family history of dairy intolerance or inflammatory bowel disease
- Women with multiple sclerosis
- Mothers who have previously had a poor breastfeeding history.

This list is not exhaustive.



It may be possible for some women to express earlier than 37 weeks gestation but only following consultation with the woman's obstetrician.

Contra-indications

Antenatal expressing is **not** routinely recommended in the following:

- Women known to have cervical incompetence
- Women who have a cervical suture in situ
- Women who have had threatened or actual premature labour
- Women who have polyhydramnios
- Women who have had vaginal bleeding or premature rupture of membranes.
- Women who have a placenta praevia
- Unstable lie/ malpresentation
- Multiples pregnancy

Following consultation with the woman's obstetrician antenatal expression may be possible for some of these women.

Antenatal expressing information

It is recommended to start antenatal expressing from 37 weeks gestation. This should be carried out initially once or twice per day and gradually building up to 3 - 4 times per day. Each expression should last no longer than 3-5 minutes per breast. Expressing should only be carried out by hand. A breast pump **should not** be used in the antenatal period. If the woman experiences uterine contractions the advice is to stop immediately, advise to rest and if the contractions do not stop in a couple of hours she needs to contact the maternity assessment unit for advice. The technique of hand expression is the same as the technique taught in the postnatal period.

Equipment required

An expressing pack should be given to women who wish to express in the antenatal period. This pack can be provided by either the antenatal clinic midwife or the community midwife.

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This pack should include labels and sterile syringes with caps. Labels should have space for the woman's name, CHI, date and time of expressing. Gallipots can also be included to aid colostrum collection, if syringes are proving too difficult for use. A patient information leaflet should also be given.

Syringes for Collection



Expressing Technique







Step 1

Before you begin to express by hand, start by gently massaging your breast to stimulate the hormones needed to release colostrum

Step 2

Position your thumb and fingers in a 'C' shape, 2cm to 3cm back from the base of your nipple

Step 3

Gently press and release, press and release, and keep repeating until you see a glisten or a drop of colostrum. This may take a few minutes.

Collect the colostrum in the syringe.

Clinical Guidance Document





Step 4

When the drips slow down or stop move your fingers round to a different part of your breast and start again. Only express for a total of 3-5 minutes on each breast

Storage of colostrum

- A new syringe should be used for each expression. Ensure a cap is place on the end of the syringe following expression.
- Each syringe should be labeled with the woman's own name, CHI and date and time of expression.
- Syringe should then be placed in a freezer bag, sealed and stored at the back of the fridge (maximum temperature of 4'C) and can be kept for up to 5 days in the fridge.
- If delivery not anticipated in the next few days, antenatal expressed colostrum should be stored in the freezer with a temperature below -18'C, within 30 minutes of expressing.

Transporting antenatal expressed colostrum to hospital

- When transporting frozen colostrum to hospital, mothers should place it in a cool bag or a plastic bag packed with cool blocks or ice.
- Staff in the department should then take the colostrum and place it in the appropriate facility ie. freezer if not being used straight away or fridge if using within 24 hrs. Please ensure to only defrost small amounts of colostrum as required, to reduce wastage.
- Local guidance on the storage of breast milk in hospital should then be followed.

Clinical Guidance Document



Documentation

Discussion around antenatal expressing must be documented in the 'antenatal colostrum' section in the 'Conversations in Pregnancy' page on Badgernet. If a woman has carried out antenatal expressing, document this and also document where the colostrum is being stored.

-Antenatal Colostrum	
Antenatal collection and storage of colostrum discussed	Yes No
Antenatal hand expressed colostrum	Yes No
Notes	Stored in NNU freezer

Related NHS Fife Documents:

NHS FIFE WIDE INFANT FEEDING POLICY – INF 01 (2021) Clinical Guideline - Expressed Breast Milk (EBM) Guideline (2019) Clinical Guideline – Joint Diabetes Antenatal Clinic protocol(2018)

References:

Forster, D. A., Moorhead, A. M., Jacobs, S. E., Davis, P. G., Walker, S. P., McEgan, K. M., ... Amir, L. H. (2017). Advising women with diabetes in pregnancy to express breastmilk in late pregnancy (Diabetes and Antenatal Milk Expressing [DAME]): A multicentre, unblinded, randomised controlled trial. *The Lancet*, *389*(10085), 2204-2213. DOI: 10.1016/S0140-6736(17)31373-9



Appendix 1:

Storage guidance for hospital

