

Contact Number

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Antenatal expression of breastmilk

This leaflet was developed by Infant Feeding Adviser, Specialist Diabetic Nurse, Senior Speech & Language Therapist and was reviewed by patients, midwives and obstetricians.

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This leaflet can be made available in other languages and
formats on request

Speak to the nurse looking after you to arrange this

Women & Child Health

This leaflet has been produced to provide some information on expressing breastmilk in pregnancy.

Breastfeeding has many health benefits for both mothers and babies.

For baby:

- Protection against ear infections, chest infections and wheezing
- Lower risk of diabetes
- Less allergic disease – eczema, asthma, wheezy
- Protection against diarrhoea and tummy bugs
- Less obesity

For mother:

- Lower risk of breast cancer, ovarian cancer
- Stronger bones in later life

Expressing milk is a useful skill for all new mothers to learn. There are some situations where it may be helpful to start expressing milk before your baby is born, for example:

- Mothers with diabetes
- Antenatal diagnosis of cleft lip or palate
- Previous history of delayed or poor milk supply

Should you choose to express milk during pregnancy we would normally suggest you start expressing between **36 – 37 weeks gestation.**

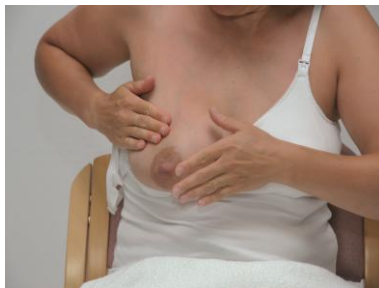
Storage of breastmilk

We will give you a supply of sterile syringes, caps, bags and labels to help you to collect and store your milk. Use a new syringe for each expression. Draw the drops of colostrum up into the syringe and place the rubber cap on the end of the syringe once completed. Label the syringe with your name, your date of birth, date and time of collection of milk and place in poly bag. If you are expressing more than once in the day, you can store the syringes over the course of the day in the back of the fridge in the poly bag. Put all labelled syringes into the poly bag and place in the freezer at -18°C.

When you are coming into hospital, bring your frozen milk with you either in a cool bag or a poly bag packed with cool blocks or ice. Inform staff on arrival that you have milk with you so that they can place it in the Neonatal Unit freezer until it is required.

How to express milk during pregnancy

- Wash your hands
- Gently stroke or use circular movements with your fingertips to massage your breasts for 1 – 2 minutes



- Position your thumb and fingers in a 'C' shape 2 – 3cm back from the base of the nipple.
- Gently press thumb and fingers together and then release. Repeat this compression in a rhythmic fashion. Try not to slide your fingers over your skin. It may take a few minutes for colostrum to drip
- When dripping slows down or stops, move your finger and thumb to a new position and repeat the process. Repeat again on the second breast.
- You can hand express up to 3 times in the same day – **do not use a breast pump in pregnancy.**



You can practice in the bath or shower at first. When you start collecting colostrum (the first milk), express after a bath or shower. You can then build up a small store of milk which can be given to your baby after birth. Your midwife or obstetrician will be happy to discuss this with you.

Mothers with diabetes

- Insulin levels in the body play a central role in starting and maintaining breast milk supply. Mothers with diabetes may therefore experience a delay with their milk supply. Women with diabetes are more likely to develop pre-eclampsia, to have their labour induced and to deliver by Caesarean Section.
- Producing milk requires substantial amounts of energy and for mothers whose diabetes is treated with insulin, hypoglycaemia (low blood sugar) can occur. In general women who breastfeed find they use approximately 30% less insulin than they did before becoming pregnant. To avoid the risk of hypoglycaemia please discuss your blood glucose target levels and insulin doses with your diabetes specialist nurse.
- Babies of mothers with diabetes are not routinely admitted to Neonatal Care Units and every effort is made to keep mothers and babies together, but a small percentage of babies do need extra monitoring/ care and will require admission to the Neonatal Unit. Breastfeeding can sometimes be a bit more difficult, but staff are available for help and advice.

Having your baby beside you will make it easier for frequent feeding to occur and, as well as having a small store of your own breast milk, may reduce the need for your baby to be given formula milk.

Baby with cleft lip and palate

- This is sometimes diagnosed during pregnancy. Babies with a cleft palate can find it harder to breastfeed as they find it more difficult to attach to the breast and create the vacuum needed to breastfeed effectively.
- Specialist advice and support from the cleft lip and palate team is available.
- Breastfeeding and human milk are important to the health of a baby with a cleft lip and/or palate as it helps protect against ear and respiratory infections.

Previous history of delayed or poor milk supply

- Almost all mothers can produce enough milk for their baby or babies however some mothers believe that they do not have enough milk or that their milk is too thin.
- The amount of milk a baby receives depends on milk production and milk transfer. If ineffective or insufficient feeding persists the breasts quickly begin to make less milk.
- Antenatal expression is a positive way to see that you do have colostrum and may help build your confidence in your ability to breastfeed.

Colostrum

Colostrum or first milk is produced during pregnancy and in the first few days prior to milk 'coming in'. Your breasts start to produce colostrum from about 16 weeks of pregnancy onwards. Sometimes as early as 28 weeks women find their breasts leak. Don't worry if this does not happen to you, this is not an indication that you will not be able to breastfeed.

The amount of colostrum varies from woman to woman. It can range from a few drops to as much as a teaspoon or more.

Colostrum is rich in antibodies to help protect your new baby from infections and build resistance. It is also high in protein so a little goes a long way. It is extremely easy to digest and is the perfect first food for your baby.

Colostrum given to baby in addition to breastfeeds can help maintain blood glucose and may avoid the use of artificial milk.

Breast stimulation can sometimes cause the uterus to contract. If you notice an increase in tightening of the uterus or contractions, please stop hand expressing and contact Triage or your midwife.