

Using a breast pump to collect breast milk



Giving your baby breast milk

Breast milk for your baby's health

Giving your baby breast milk is one of the best ways to support your baby's health. Breast milk has the right nutrients in the right amounts to nourish your baby completely.

Breast milk also has proteins and other substances that help fight infections and many kinds of illnesses. They also help your baby's immune system, brain and vision grow and develop.

The American Academy of Pediatrics strongly recommends that babies:

- Have only breast milk for their first 6 months.
- Continue to have breast milk for 2 years or longer even when they eat solid foods.

When your body makes breast milk this is called lactation. The milk you make changes to meet your baby's growth needs and feeding patterns. For example, the amount of milk may increase or decrease. The nutrients in the milk may change. The milk may change during a feeding. It may change by the hour and day.

Using a breast pump

You can use your hands or a breast pump to get milk from the breasts. This is called expressing breast milk. The milk you collect is called expressed milk. You can give your baby expressed milk whether you feed from the breast or from a bottle.

This resource helps you learn more about breast pumps. It tells you how to use and clean a breast pump. It gives guidelines for storage and use of expressed breast milk. And it explains how to care for yourself when you use a breast pump.

This resource can be helpful if you:

- Both breastfeed and pump.
- Only pump and do not breastfeed. This is called exclusive pumping.

Note that not everyone who breastfeeds needs to pump or express milk.

If you have questions about this information, talk with your child's healthcare team. Or talk with a lactation consultant or a lactation counselor. Lactation professionals are trained to support people who breastfeed. They can help you decide whether a breast pump may be a good choice for you. They can provide resources and guidance for breastfeeding.

About breast pumps

There are many kinds of breast pumps. They include:

- **Manual breast pumps.** A manual pump is a simple pump. You use your hands to control the amount of suction and the flow of milk. There are different kinds of manual pumps. One example is a pump that has a handle or lever that you squeeze to create suction. You pump one breast at a time with this kind of pump.

Manual pumps are best to use for a short time or when you do not pump often. Manual pumps also are useful when you want to remove a small amount of milk. For example, if your breasts are engorged, you can pump a small amount with a manual pump. This can help relieve pressure and stimulate milk flow.
- **Single-user breast pumps.** These portable pumps are made for use by only one person. They may be electric or battery powered. There are many brands and styles. A single-user pump is ideal if you often are away from home. For example, you can use this kind of pump at work or school. You also may use it to pump after your milk supply is established.
- **Wearable breast pumps.** These portable pumps are hands-free. Some have tubing attached. Others do not. You wear the pump inside your bra. This may make it easier to do other things when you are at work or school. But often these pumps do not have enough suction to remove milk fully. You should still use a single-user pump as your main pump.
- **Hospital-grade breast pumps.** These pumps can be used by several people. They are ideal to help establish your milk supply. You may use this type of pump while you or your baby is in the hospital. Most people do not buy this type of pump. But you can rent one from a medical supply store.

You may know which pump you want to use. If not, talk with your healthcare team. A lactation professional can help you decide whether a breast pump is right for you. They can help you choose the kind that is best for you.

How to get a breast pump

Before you buy or rent a pump, call your medical insurance company. Ask whether your policy pays for the purchase or rental of a breast pump. Find out what you must do to have insurance pay the costs of a pump. For example, you may need a written prescription from a healthcare professional.

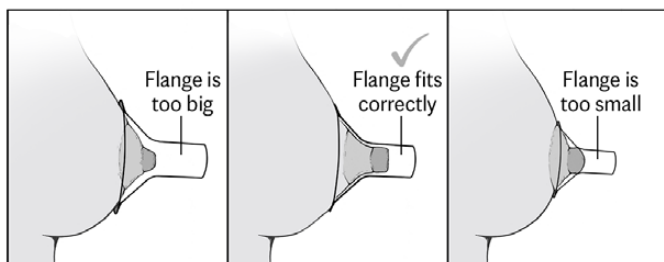
Find out when you can get the pump. This may be late in your pregnancy or after you have your baby.

You may prefer to get a breast pump after you have your baby. This may help you decide what type of pump suits you best. Your healthcare team or lactation professional can help guide you. They can suggest where to buy or rent a pump.

Breast pump flanges

Breast pump flanges are plastic or silicone pieces that come with your pump. They also may be called breast shields. They fit over your nipple to form a seal.

Breast pump flanges come in different sizes. Be sure your flanges fit well. The flange should fully cover your nipple. It should touch all sides of your breast. It should not be too loose or too tight around the nipple. See Figure 1.



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Figure 1. The correct fit of breast pump flange

As you continue to pump breast milk, the size of the breast flange you need may change. If it hurts to pump, the flange size may be wrong.

Check the fit of the flanges often. Choose the size that fits your breasts comfortably. If you need help to find the right size, ask a nurse, lactation consultant or lactation counselor. Or check the website of the company that makes your pump. It may tell you how to choose the correct flange size.

How to use a breast pump

Unless you are told something else, follow these steps each time you use your pump.

1. Wash your hands well with soap and water. Do this before and after you pump.
2. Choose the breast flange size that comfortably fits your breasts.
3. Center your nipple in the breast flange. Check that the breast flange touches all sides of your breast while you pump. Most pumps let you pump both breasts at the same time. See Figure 2.
4. Set the pump on a lower suction setting. Increase it until you reach the strongest setting that is comfortable. Pumping should not cause discomfort. More suction does not always help you pump out more milk.
5. Pump directly into a breast milk storage container. If your pump comes with storage containers, use those. Store pumped milk the right way. See “How to store breast milk” for more information.

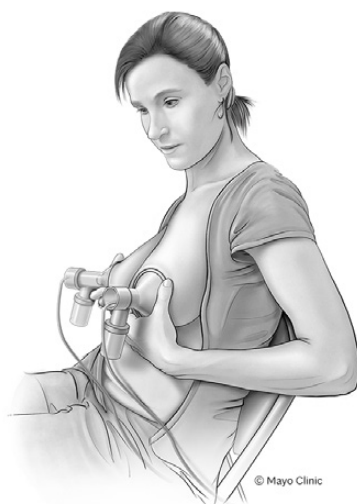


Figure 2. Most breast pumps let you pump both breasts at the same time.

How often to breastfeed or use a breast pump

Your milk supply is best established and maintained when you breastfeed or pump early on and often.

The guidelines that follow tell you about how often to breastfeed, use a pump or do both. Follow the guidelines that match how you plan to feed your baby.

When you breastfeed and use a breast pump

Breastfeed your baby often. Usually, babies eat 8 to 12 times every 24 hours. This depends on a baby's age and feeding patterns. For the first few months, feedings typically last 20 to 40 minutes.

Use a breast pump:

- As needed to increase your milk supply.
- As needed to supplement your baby's feedings.
- To collect breast milk to bottle-feed your baby.
- Anytime you miss a feeding or feed your baby with a bottle. This helps maintain your milk supply.

When you use a breast pump first and then move to breastfeeding

You may want to pump breast milk first and then switch to breastfeeding. Sometimes you need to do this when illness or another reason separates you and your baby for a time.

Pump as soon as you can after your baby is born. Pump every 2 to 3 hours for 15 to 20 minutes each time. When you follow this schedule, you should pump 8 to 12 times every 24 hours. This is the number of times a newborn baby usually eats each day.

When you start to breastfeed, follow a pumping plan that matches your baby's eating patterns. For example, as your baby starts to breastfeed more often, you pump fewer times each day. It may help to talk with a lactation consultant or lactation counselor about your pumping and feeding plan.

When you use a breast pump only

Begin breast pumping as soon as you can after your baby's birth. Pump every 2 to 3 hours for 15 to 20 minutes each time. When you follow this schedule, you should pump 8 to 12 times every 24 hours. This is the number of times a newborn baby usually eats each day.

Try to stay on a consistent pumping schedule. This helps you have a good milk supply. Avoid long times between pumping. Do not go longer than four hours between the times you pump at night.

When you start to make breast milk

Your body begins to make milk while you are pregnant. The first milk is called colostrum. It is thick and sticky.

It can be hard to pump out colostrum. In the first days after your baby's birth, you probably will pump just a little colostrum. Sometimes you may pump no colostrum. But you still need to pump, even if nothing comes out. This helps establish your milk supply.

Early on, you may not make a lot of milk. But the more you pump in the first days after your baby's birth, the more milk you should have later.

Milk volume typically starts to increase after 2 to 3 days. Sometimes it takes longer. For example, it may take longer when you breastfeed or use expressed breast milk for the first time. It may take longer if you have certain health conditions.

It takes about 10 to 14 days to fully establish your milk supply and have enough milk for your baby's growth needs. If you have concerns about your milk supply, talk with a lactation professional or other member of your healthcare team.

How to increase your breast milk supply

Breast milk supply works on a basis of supply and demand. The more breast milk you remove from your breasts and the more often you breastfeed or pump, the more breast milk your body makes.

To increase how much breast milk you make:

- When you use a breast pump, be sure it is the best one for your needs. A nurse or lactation professional can help you choose the best pump for you.
- To empty your breasts more effectively, gently massage your breast while you pump or breastfeed. This also helps the milk flow.
- Increase the number of times each day you breastfeed or pump.
- You may be thirstier than usual while you provide breast milk. To help meet your fluid needs, drink 8 to 12 ounces of water each time you breastfeed or pump. Drink at other times to satisfy your thirst.
- Eat a variety of nutritious foods. Unless you are told something else, eat an extra 500 calories a day while you provide breast milk. This helps you make the milk your baby needs.
- Get as much rest as you can. Try to sleep when your baby sleeps. An increase in stress may lessen your milk supply.

If you have concerns about your milk supply, talk with a lactation professional.

When to decrease or stop use of a breast pump

When to decrease how often you pump depends on your milk supply, your baby and your pumping situation. Talk about this with a lactation professional or other healthcare team members.

When you are ready to stop giving expressed milk, do it slowly. Every few days, pump one less time. Slowly increase the time between pumping sessions. A lactation professional can help you plan how to do this.

How to store breast milk

It is best to refrigerate or freeze milk right after you express it.

- Store expressed breast milk in bottles or plastic bags made to store breast milk.
- Label each container with the date and time you collected the milk.
- Depending on when you plan to feed your baby, put the container in the refrigerator or freezer.

The following storage guidelines are for healthy, full-term babies. Guidelines may differ for babies born prematurely or who have certain medical conditions. Check with your baby’s healthcare team.

In this chart, F stands for degrees Fahrenheit. C stands for degrees Celsius.

	Countertop or table	Refrigerator	Freezer
Storage temperatures	77 F or colder (25 C)	40 F or colder (4 C)	0 F or colder (-18 C)
Freshly pumped or expressed human milk	Up to 4 hours	Up to 4 days	Within 6 months is best; up to 12 months is acceptable
Thawed human milk	1 to 2 hours	Up to 1 day (24 hours)	Never refreeze human milk after it thaws

Mixing freshly expressed milk and chilled breast milk

You can add milk that you pump or express by hand to milk already in the refrigerator or freezer. Be sure to follow these guidelines if you mix milk.

- Refrigerate the freshly pumped or expressed milk for at least 4 hours before you add it to milk that is already chilled or frozen.
- If you plan to store this combined milk, label the container with the date of the oldest milk in the container.
- You may put milk from each breast into the same container at the time you pump or express it.

Using breast milk

Use breast milk in the order it was pumped or expressed. It is best to use fresh or refrigerated milk first.

Frozen milk is the next best choice. If you can, use frozen milk within six months. When you use frozen milk:

- Thaw the oldest frozen milk first.
- Place the frozen container in the refrigerator or in a container of cool or warm water. Do not thaw at room temperature.
- After the milk thaws fully and has no ice crystals in it, use it to feed your baby within 24 hours. After that time, throw away any thawed milk you have not used.
- **Once breast milk thaws fully, do not freeze it again.**

Use up breast milk within two hours after your baby finishes a feeding. After that time, throw away milk left in the bottle. Do not store it in the refrigerator. Bacteria from your baby's saliva can grow in the milk.

Warming breast milk

To warm a bottle of breast milk, set it in a container of warm water for a few minutes. Or hold it under running warm water. Be sure no water gets in the bottle or on the nipple. You can buy products to warm bottles.

Never use a microwave to warm a bottle of breast milk. Hot spots in the liquid can burn your baby's mouth. Also, extreme heat can destroy the natural antibodies and other helpful substances in breast milk.

Before you feed your baby, gently shake the bottle. Test the temperature of the milk. Place a few drops on the inside of your wrist or the top of your hand. The milk should be a little warm. It should not be hot. Note that what feels comfortable to you may be too hot for your baby's sensitive mouth.

Do not put breast milk that you warm or that reaches room temperature back in the refrigerator.

Cleaning your breast pump

After each use, clean the parts of your breast pump that have contact with breast milk.

To clean the parts that have contact with breast milk:

1. Rinse the parts in cool water.
2. Wash them in a clean wash basin. Use hot, soapy water. Do not let pump parts touch the sink. It may have germs that can harm your baby.
3. Rinse parts well in hot water.
4. Put washed parts on a clean cloth in a place protected from dust and dirt.
5. Let the parts dry in the air.

If moisture or milk is on parts that do not have contact with milk, clean those parts also.

You may be able to wash parts of the pump in the dishwasher. Follow the cleaning instructions that come with the pump.

Self-care when you pump breast milk

Breast and nipple care

- Wash your breasts and nipples each day, such as when you bathe or shower. You do not need to wash your breasts and nipples before or after you pump.
- Change breast pads if they become damp, wet or soiled.
- To help lessen swelling and remove more milk, pump more often. Gently massage your breast while you pump.
- After you pump, you may let breast milk dry on your nipples.

Sore nipples

If your nipples become sore from pumping, try these tips:

- Make sure your breast pump flanges are the right size. A breast pump flange that does not fit well can cause sore nipples. Talk with a lactation consultant or counselor if you are not sure of the right flange size for you.
- Before you pump, apply a nipple cream to the flanges. An example is lanolin.
- Use as much suction as is comfortable for you. The right suction can help empty your breasts quickly and effectively.
- Check the suction level on your pump. When suction is too high, your nipples may get sore. Turn down the pump suction to see if that is more comfortable. More suction does not always mean more milk.
- Pump only 15 to 20 minutes each time. Longer pumping time can make your breasts and nipples sore.

If you still have discomfort when you pump, talk with a lactation professional or other member of your healthcare team.

Medicines and supplements

Some medicines and supplements can enter breast milk. These may include prescribed medicines and medicines you can buy without a prescription. When providing breast milk, talk with your healthcare team or a lactation professional before you take any medicines, supplements or herbs.

When to call your healthcare team

People who breastfeed or use a breast pump sometimes develop mastitis. This is an infection in the breast.

Symptoms of mastitis include the following:

- Breast tenderness, warmth or swelling.
- Thickening of breast tissue or a breast lump.
- Pain or a burning sensation while you breastfeed.
- Pain or a burning sensation when not breastfeeding.
- A change in skin color. This change may be a shade of red, purple or brown depending on your skin color.
- Chills, body aches or feeling more tired than usual.
- Temperature of 101 degrees Fahrenheit (38.3 degrees Celsius) or greater.

If you have symptoms of mastitis, call your healthcare team right away. Team members may prescribe medicine that fights infection. They may recommend medicine to lessen pain and swelling.

It is important to get extra rest and drink plenty of fluids. Cold compresses on the breast may ease some tenderness.

Unless you are told something else, you still may breastfeed or give your baby pumped breast milk while you have mastitis.

Continue to breastfeed or pump breast milk as often as you did before your mastitis symptoms started. If you stop removing milk, mastitis may get worse. Do not breastfeed or pump more often than you did before. This can make your symptoms worse.

Be sure to ask for help

It can take time to become comfortable pumping breast milk. Know that you are giving your baby the benefits of breast milk.

Remember that you are not alone. There are resources to help support you. Be sure to ask for help if you have concerns about your milk supply or your pump.

If you need help or have questions about this information, talk with a healthcare team member. This may include your or your child's healthcare professional, a nurse, a lactation consultant, or a lactation counselor. Team members want you to have success using your pump. They can provide resources to help with your concerns.

Notes

Notes

Barbara Woodward Lips

PATIENT EDUCATION CENTER

Mrs. Lips, a resident of San Antonio, Texas, was a loyal patient of Mayo Clinic for more than 40 years. She was a self-made business leader who significantly expanded her family's activities in oil, gas and ranching, even as she assembled a museum-quality collection of antiques and fine art. She was best known by Mayo staff for her patient advocacy and support. Upon her death in 1995, Mrs. Lips paid the ultimate compliment by leaving her entire estate to Mayo Clinic.

Mrs. Lips had a profound appreciation for the care she received at Mayo Clinic. By naming the Barbara Woodward Lips Patient Education Center, Mayo Clinic honors her generosity, her love of learning, her belief in patient empowerment, and her dedication to high-quality care.

This information is for your education only. It does not replace medical advice, diagnosis or treatment. New medical research or practices may change this information. If you have questions about a medical condition, talk with a member of your healthcare team.

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