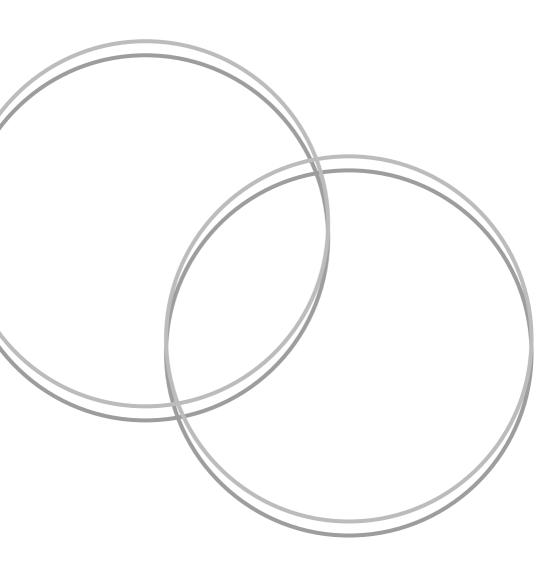


Collecting Colostrum While Pregnant

Information leaflet



The aim of this information leaflet is to answer some of the questions you may have about hand expressing colostrum before your baby is born. To discuss whether this is recommended for you or if you have any further questions or concerns, please speak to your midwife/midwifery support worker or contact a member of the infant feeding team (see page 10 for contact details and useful website details).

Gender inclusive language in OUH Maternity and Perinatal Services:

- This leaflet uses the terms woman and birthing person, women and birthing people and mother throughout. These terms should be taken to include all pregnant people. Similarly, where the term parent(s) is used, this should be taken to include anyone who has main responsibility for caring for a baby.
- The term partner refers to the woman or birthing person's chosen supporter. This could be the baby's father, the women or birthing person's partner, a family member or friend, or anyone who the woman or birthing person feels supported by and wishes to involve in their care

Why should I breastfeed my baby?

Breastfeeding is a natural way for you to bond with your baby from the very first moments of their life. Your breast milk is specifically produced for your own baby and it is readily available any time they need it at the perfect temperature.

It will protect your baby from many diseases early and later on in life and will help make them healthier, compared with babies who are formula fed. For example:

- fewer stomach and digestion problems
- fewer coughs and colds
- reduced chance of type 1 diabetes
- reduced chance of obesity
- reduced chance of heart disease.

The World Health Organization (WHO) recommends that babies are exclusively breastfed for the first six months of life. After six months, babies should receive complementary food alongside breastfeeding, until you and your baby decide to stop.

Expressing before your baby is born

Most people do not need to collect colostrum whilst pregnant. You may choose to express before your baby is born if your baby has a higher chance of being born unwell or in need of specialist care, or if you have diabetes.

You may also choose to express because you have had breast surgery, which may impact on your milk production, or because you have had a difficult time breastfeeding previously.

For some of the above situations the infant feeding team are available for telephone appointments during pregnancy. Ask your midwife or doctor to refer you if you are interested.

You can start to hand express from **37 weeks** pregnant onwards. Using a pump at this time is **not** a good way to collect colostrum as it is such small amounts and so thick and sticky.

If you are expecting your baby to be born early, you may choose to start collecting colostrum earlier than 37 weeks after a discussion with a midwife or doctor. There is a small chance that the oxytocin released may bring on labour, so we do not suggest expressing before 37 weeks unless agreed with your midwife or doctor.

As oxytocin is a hormone that is released when you hand express you may notice that you experience some Braxton Hicks contractions (sometimes called practice contractions). These should settle once you stop.

Your baby's first feed

It is recommended that all babies have their first feed during skin to skin contact and within an hour of being born. However, you or your baby may not be able to feed straight away if either of you are not well enough. In this situation, the staff will help you feed your baby in a way that best supports your needs. It is important to hand express as soon as you can after birth. The staff will encourage you to have skin to skin contact with your baby as soon you are both able.

You may be quite tired after giving birth to your baby and may find it difficult to learn a new skill at this time. This is why for some people it is a good idea to have some colostrum already expressed, ready to be given to your baby. This will help to avoid your baby having to have artificial formula milk top ups.

Your baby may also need some extra breast milk feeds if they have unstable blood glucose. You can help your baby maintain their blood glucose levels right after birth by keeping them warm through skin-to-skin contact with you. This will also encourage your baby to search for the breast and begin to suckle.

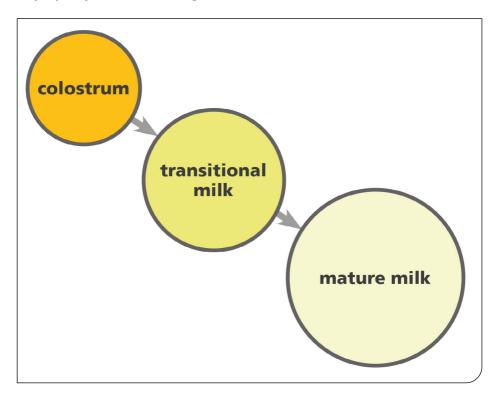
Breastfeeding reduces your likelihood of developing some cancers, osteoporosis, diabetes (including gestational diabetes developing into type 2 diabetes) and heart disease.

What will I be expressing?

Colostrum is the name of the thick and sticky milk that you produce during pregnancy and for the first few days after birth.

The colour of colostrum can range from almost see-through to orange, depending on your diet. It contains everything your baby needs in the first few days of life and is high in infection-fighting antibodies. It will also help stabilise your baby's blood glucose (sugar) levels.

To begin with, the amounts you produce will be very small. You can sometimes collect colostrum whilst pregnant, if you do collect colostrum while you are pregnant, it won't make a difference to how much milk you produce later on. However, if you stimulate your milk supply after birth by feeding your baby or hand expressing, your milk will continue to increase day by day and will change to mature milk.



Diabetes

If you have diabetes, your baby will have their blood glucose checked a few times after birth, to see if the level is within an expected range. If their blood glucose is low, we will encourage you to put your baby back on the breast. Don't worry, we will be there to help and support you.

We will then check your baby's blood glucose again. If it is still low, we will show you how to hand express some milk and how to give it to your baby with an oral syringe. This will usually bring the baby's blood glucose right up, as your colostrum is full of calories perfectly designed for your baby. Alternatively, if you have some colostrum already expressed you could give it at this stage.

A newborn baby's stomach is the size of a cherry, so they will only need a tiny amount (just a few millilitres) of colostrum to be full and content after these first feeds.

How to hand express

As colostrum is thick and sticky, a small syringe tends to be the best thing to collect it in. Your midwife will offer to discuss hand expressing with you from 36 weeks gestation and will give you a supply of syringes from 37 weeks gestation if you choose to try hand expressing before your baby is born. You may not get anything the first time you try, but with practice you will.

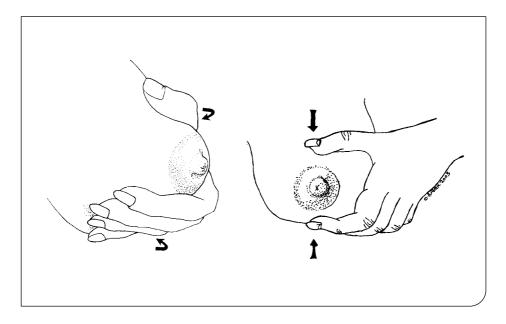
You can either take out the plunger of the syringe and scoop the colostrum into the barrel (with a bung on the end to stop it leaking out) or, if you prefer, you can use the syringe to suck up the drops of colostrum as they appear.

When you have expressed a few times you may find that you are producing more than the syringe can hold. If this is the case, simply use a small, lidded sterile container (you can sterilise it using a home steriliser).

Hand expressing is much better than using a pump when collecting colostrum because it comes in such small amounts, is thick and sticky and would be lost in the pump kits.

Getting started

- Make sure you are relaxed and you have some time ahead of you.
- You may find that a warm shower/bath helps you to relax.
- Wash your hands with soap and hot water, and then dry them with a clean towel.
- Make sure you have a sterile container, such as a syringe, ready to collect the colostrum.
- Gently massage your breast from the outer parts toward the nipple, in all directions, in a way that feels soothing to you. This will help stimulate the hormone, oxytocin, that lets down the milk.
- Position your index finger and thumb in a C shape 2 to 3cm back from the nipple. You may feel a texture change under the skin; these are your milk ducts (don't worry if you don't).



- Gently but firmly squeeze your finger and thumb together, without moving their position on the skin, and hold the squeeze for about 3 to 5 seconds.
- Release the pressure and repeat again and again, building up a rhythm.
- Do not slide your fingers over your skin or nipple. If it hurts, move a little further back away from your nipple and try again.
- When the flow slows down or stops, change the position of your finger and thumb, gradually moving them around your breast like a clock face. Then move to your other breast and repeat the process.
 - If you aim to express from each breast at least twice per session you will be really maximising the amount of colostrum available to your baby.
- Start off by hand expressing twice a day and aim to increase to up to four times a day.

It can take a few tries to be able to do this properly. Try not to get frustrated if you only express a few drops, this is not unusual!

Remember some women and birthing people may not be able to express colostrum before their baby is born, this does NOT mean they will not produce milk. Some people need to give birth to their baby before colostrum is released.

When you are approaching 37 weeks we will show you how to hand express with the aid of one of our lovely knitted breasts!

If you do not think you can hand express your colostrum do not worry. We will help you to do it, when and if needed, when your baby is born.

How to store colostrum

- Collect and store every single drop of colostrum you have expressed. Let none of it go to waste – it is very precious!
- You can store your colostrum in the syringe or container you collected it in, as long as it is sterile.
- Put the container in a labelled freezer bag, (showing the date and time it was collected) and freeze it.
- You can safely store this for up to six months if the freezer temperature is -18°C or lower.
- If you don't have access to a freezer straight away, you can keep colostrum at room temperature for 6 hours or in the fridge at -4°C or lower for up to five days.

We would encourage you to discuss with your midwife if your milk is slightly older than the guidelines and the alternative is formula you may still decide to feed your own milk to your baby.

Remember, if your baby has been born, the best place for your milk is in their tummy.

Transporting colostrum into the hospital

- Place the frozen colostrum in a cool bag with freezer packs, to help maintain the cold temperature.
- Only bring some of the colostrum into the hospital when you are about to give birth, not when you are admitted for induction of labour. More can be brought in when you have had the baby.
- Only bring in enough for 12 hours at a time, as there is no freezer available. If it isn't used within 12 hours of being defrosted your precious colostrum may have to be thrown away (your midwife will give you more information about this nearer the time).
- When you are in the hospital you can put the colostrum in a fridge, labelled with your name, and the time and date it was collected, as well as the time and date it was put in the fridge.
- If you leave the frozen colostrum at room temperature you will have to use it immediately once it is defrosted.
- If you need to defrost frozen colostrum quickly, you can place it under warm running water then use it immediately.

Your midwife will assist you and support you with all this. They will also show you how to give the colostrum to your baby.

Please read this leaflet at home, so you can discuss any questions or concerns you may have at your next antenatal appointment.

How to contact us Infant Feeding Team

Telephone: **01865 572 950**

Email: infantfeeding.team@ouh.nhs.uk

Further infant feeding information is available from the following websites:

www.ouh.nhs.uk/maternity/feeding

www.unicef.org.uk/babyfriendly/baby-friendly-resources/breastfeeding-resources/hand-expression-video

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Authors: Infant Feeding Team

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Oxford University Hospitals NHS Foundation Trust

www.ouh.nhs.uk/information

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Making a difference across our hospitals

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