Breast pumps & storing breast milk

If you’re having problems breastfeeding and think you need a breast pump, make sure you talk with your midwife or a lactation consultant before you make any decisions. You can normally see a lactation consultant for free if you're referred by your midwife or GP. Or you may choose to pay to see a lactation consultant privately.

Reasons for using a breast pump

Most women don’t need to use a breast pump, although many women mistakenly believe that a pump is part of normal breastfeeding. This is mostly because there's a lot of marketing of breast pumps.

Sometimes women express milk to reassure themselves that they're making enough milk for their baby. As a pump will never remove as much milk as a breastfeeding baby, mothers can be unnecessarily anxious when they see less milk than they expected.

It isn’t a good idea to use a breast pump without good reason when you start breastfeeding, especially in the first six to eight weeks. This is because it may cause problems with milk supply and breastfeeding.

However, you'll need to express milk if you and your baby are going to be separated for any reason and you're exclusively breastfeeding. This is so you can continue to make milk and feed your baby (removing milk is crucial to continuing to make it). If this happens to you, you can either express the milk by hand or use a breast pump.

For the first two to three days after birth, it's better to express by hand, as colostrum is too thick for breast pumps to remove effectively. Some women also find that expressing by hand works well for them long-term if they need to remove milk in between breastfeeding. You can find some useful information and tips about expressing milk by hand through these pages:

  A two–page leaflet explaining how to express breast milk and how to stimulate the flow.

- Stanford School of Medicine (for both videos, go to https://med.stanford.edu/ and search for “milk”)
  - Hand expression of breast milk
    This video shows how to hand express milk.
  - Maximizing milk production with hands on pumping
    This video shows how to combine hand expression of milk with a breast pump to make sure you produce, and remove, as much milk as possible.
Breast pumps can sometimes help with some short-term breastfeeding challenges. For example if you're having trouble with latching, so your baby isn't effectively removing milk from your breast, a pump may help to increase your milk supply. However, the real solution is to fix how your baby is latching and their position at your breast.

When to use a breast pump
Not every woman will need to use a breast pump, but there are some situations when it can be helpful or necessary.

If you're breastfeeding and need to be away from your baby, you can express breast milk. You may also need to use a breast pump if your baby won't, or can't, feed at the breast.

To keep a good milk supply, it's essential that you regularly remove breast milk. So if you want to keep your milk supply and your baby is not breastfeeding, or breastfeeding only a little bit, you need to express milk by hand or use a breast pump.

If your baby isn't breastfeeding at all for some reason, you'll need to express milk at least eight times every 24 hours to keep your milk supply. If this is happening to you, you should get some help from a lactation consultant.

If you're trying to increase your milk supply, you can express after each feed. You may need to do this for a short or long time, depending on whether or not your baby is feeding at the breast, and how much your supply needs to increase. You should get some help from a lactation consultant.

Types of breast pump
For long-term, intensive use, a heavy-duty electric pump is ideal. These are closed-system pumps, which means that breast milk can't travel into the motor parts of the pump. You may need to hire this type of pump, or you can buy some closed-system pumps.

Rental services clean hired pumps between users.

In some situations, Work and Income may help a mother buy a breast pump if it's clinically necessary. Ask your doctor or lactation consultant for more information.

If you're using a pump for a shorter time, or less intensively (for example, if you need to express milk when you go back to work, or if you're trying to increase your milk supply), then a mini electric pump (which can also run on a battery) should be suitable. A good hand pump should also work well.

If you only need the pump for a short time, for example if you have painful or damaged nipples, a hand pump is usually sufficient. Hand expression can also work.
Renting or buying a breast pump

Open-system single-user pumps
There are many different breast pumps on the market. Unfortunately, many of the cheap ones don't work effectively. Ameda Egnell, AVENT, and Medela brands are reliable.

These pumps are available for sale at many retail outlets including pharmacies and some specialist baby care retailers. Or you can ask your midwife or lactation consultant for advice about local suppliers.

Closed-system heavy-duty pumps
These are available to rent or hire from some baby stores, pharmacies, and lactation consultants.

Rental costs range from $23 to $45 a week, or you can rent on a monthly basis. You need to buy personal kits on top of the hire charge (personal kits include accessories such as a breast shield, collection containers, and tubing valves). Prices for personal kits range from $65 to $85 for a single kit and $75 to $120 for a double kit.

At most rental outlets you'll also have to pay a deposit, but you'll get this back when you return the pump. At others you'll have to give your credit card details when you hire the pump.

You can buy some closed-system pumps from pharmacies or baby item shops, or a local lactation consultant.

Ask your midwife or lactation consultant for advice about local suppliers.

Breast shields
It's important to get a breast shield that fits properly. A shield that doesn't fit properly could squash your milk ducts and create friction around your nipple.

To apply a breast shield, centre your nipple carefully in the opening before switching the pump on. While you're pumping, your nipple should move freely in the shield tunnel and you should see rhythmic movements. Pumping should be comfortable and pain-free.

- If your nipple is not moving and looks squashed, then you need a larger breast shield.
- If your nipple and a large amount of the area around it are being pulled into the shield tunnel during pumping, then you might need a smaller shield.

Five different sizes of breast shield are available from Medela. Ameda Egnell has four different sizes.

With some brands, you can get a comfort shield or soft-fit shield.

Breast pump myths
There are quite a few myths about breast pumps. You may have heard some of these.

Every woman needs a pump to breastfeed successfully
This simply isn't true. However, advertising and other marketing can give this impression. That helps to sell more breast pumps (it's called manufactured demand), but it also unnecessarily complicates breastfeeding for many women. In the US, there are three breast pumps sold for every baby born!
Pumping and bottle feeding helps you breastfeed for longer
In some situations, pumping may help a mother to increase her milk supply if she's doing this as well as breastfeeding. But in many situations, pumping can actually interfere with breastfeeding. This is because pumping, breastfeeding, and bottle-feeding is a massive workload for most women and it can become impractical. Rather than doing all three, a woman may continue to pump and bottle-feed rather than breastfeed. If you're facing some challenges breastfeeding, it's generally a good idea to seek help and support.

Pumping is the same as breastfeeding
For many women, pumping doesn't stimulate their milk supply the same way a breastfeeding baby does. Women who breastfeed will generally not have a period for six months or longer, but women who pump will usually ovulate within the first six weeks of giving birth.

You can't breastfeed babies with teeth
Babies with teeth can't bite your breast if your nipple is in the right place. Most babies never bite their mother's breast. If a baby bites, it's usually at the end of the feed when they've partially unlatched and your nipple is further forward in the mouth. If your baby does this, talk to your midwife or lactation consultant about how to stop it. This is not as big a problem as breast pump advertising sometimes suggests.

Supplementary feeds need to be given by a bottle
If your milk supply needs increasing and your baby needs extra feeds, there are ways to arrange the extra feeding so that it's delivered through a tube while the baby is suckling on your breast. This helps to increase your milk supply. Ask a lactation consultant for help with this.

Storing expressed breast milk
- Store expressed breast milk in plastic or glass containers with airtight, sealed lids. Use BPA-free plastic wherever possible. Label each bottle or container with the date and time. If you're taking the milk outside your home, write your baby's full name on the label too.
- Store milk in amounts from around 60 ml to 200 ml, making sure there's some empty space at the top of the bottle. Milk expands when freezing, and if the bottle is full it will spill over the top.
- If you're planning to express a few times a day and you're getting small amounts each time, you can put the expressed milk at the back of the fridge. When next expressing, also put the new milk in the fridge. When the second bottle of milk has cooled to fridge temperature, you can mix the two bottles. You can do this for any milk you express within 24 hours, as long as you always cool the new milk before adding it.
- Never add warm milk to cold milk or to frozen milk. This can cause some thawing of part of the milk and may lead to bacterial contamination.
- Store expressed breast milk at the back of the fridge. Fridge doors tend to get opened a lot and the back of the fridge is cooler.
- If you can’t store expressed milk in the fridge or freezer straight away, put it in a chilly bin with ice packs in contact with the bottles, for no longer than 24 hours.

**Breast milk storage guidelines for well and healthy full term babies at home**

<table>
<thead>
<tr>
<th>Storage conditions</th>
<th>Storage time</th>
<th>Handy hints</th>
</tr>
</thead>
<tbody>
<tr>
<td>In a room (&lt; 26°C)</td>
<td>4 hours</td>
<td>Cover the breast milk and keep in the coolest place possible.</td>
</tr>
<tr>
<td>In the fridge</td>
<td>48 hours</td>
<td>Store milk at the back of the fridge.</td>
</tr>
<tr>
<td>Frozen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Freezer box in fridge</td>
<td>2 weeks</td>
<td>Use the frozen breast milk to mix with your baby’s food when you introduce this from 6 months.</td>
</tr>
<tr>
<td>Separate fridge/freezer</td>
<td>3 to 6 months</td>
<td></td>
</tr>
<tr>
<td>Deep chest freezer</td>
<td>6 to 12 months</td>
<td></td>
</tr>
</tbody>
</table>

Some plastic feeding bottles are better for a baby’s health than others. Avoid any clear, hard, plastic bottles or plastic containers without a number on the bottom of the bottle. Avoid containers with the numbers 3, 6 and 7. BPA-free bottles are available.

**Using stored breast milk**

Thaw frozen breast milk slowly in the fridge. If you need to thaw it quickly, put the bottle of milk in warm water.

Never use a microwave to thaw or heat breast milk. This can cause uneven heating, which can scald a baby’s mouth. It also damages some of proteins that pass immunity to your baby.

Warm the expressed breast milk in a jug of hot water. Test the temperature of the milk by shaking a few drops on to the inside of a wrist.

Do not re-heat breast milk that has been defrosted and previously heated.

Breast milk can vary in colour and does not look like cow’s milk or formula milk. It can be yellowish, bluish, or quite pale and watery looking. All these colours are normal. Sometimes the fat separates during storage and goes to the top of the milk. If this happens, shake the bottle gently before using the milk to mix the fat back in again.