



Australian
Breastfeeding
Association

Suggestions on using an electric breast pump

This leaflet aims to help you use your electric breast pump well so that you can provide your breastmilk for your baby. An electric breast pump is not the same as the sucking action of a baby. If your baby is feeding well, he will be better at getting milk from your breasts. Because of this, expressing breastmilk may take a little longer than breastfeeding your baby.

There are many reasons why mothers express breastmilk for their babies.

- You may work or study outside the home where you cannot be near your baby.
- Your baby may not be able to suck because he was premature or has other problems.
- Your baby may be in hospital and you cannot be there for every feed.
- You may need to go to hospital and you may not be able to take your baby with you.
- You might be using a breast pump to increase your milk supply, to relactate or to induce lactation.

For further information and support, you can contact a local Australian Breastfeeding Association counsellor or ring the Breastfeeding Helpline.

Breastfeeding Helpline
1800 mum 2 mum

1800 686 268

My counsellor's name _____

Contact no. _____

Your breastmilk is the normal food for your growing baby. Breastfeeding also protects your baby from illness and infection. Even a small amount of breastmilk provides important nutrition and health protection.

How often should you express?

If you are expressing for a newborn baby, try to express often, between 8-10 times in 24 hours. Hand expressing is usually easier until your milk comes in (usually a few days after your baby is born). At first you will get a small amount of milk. This is normal, as your newborn baby has a stomach that only holds a small amount (about a spoonful) of milk. Premature babies need even less. The more milk you take out of your breasts, the more milk you will make. You may find it easier to express for shorter periods at first but more often. The number of times you express during the day is more important than the length of time spent expressing. Many mothers find a routine of expressing every 2-3 hours during the day, with a session just before going to bed, works for them. The length of time each expressing session lasts is different for every mother so you may have to try different timing to find a pattern that suits you. Each session may be up to 20-30 minutes, or until milk no longer flows out but just drips. Some mothers set an alarm to express at night while others find this too tiring. Do what your body tells you is best for you.

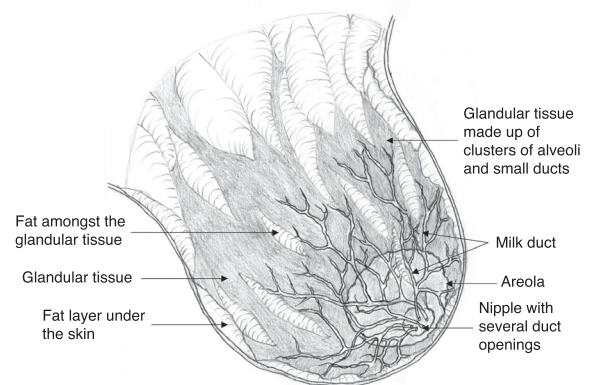
How breastmilk is made

An important factor in making breastmilk, and being able to express it, is the let-down reflex. This causes the milk to be released from the milk glands. When your baby sucks at your breast, nerves send a message to your brain, which causes the hormone oxytocin to be released. The let-down reflex happens when this hormone causes the cells around the milk glands to tighten and squeeze the milk out.

It is possible to start this reflex without a baby sucking, but it can be slowed by pain, tension or stress. When expressing, you can help the let-down reflex work by:

- relaxing and taking deep breaths
- listening to quiet music
- thinking about your baby – a photo can help
- placing a warm (not too hot) face washer over your breasts
- massaging your breast with smooth strokes from the chest towards the nipple and drawing your nipple out gently between your fingers
- sitting in a comfortable position
- making sure the phone is turned off or the answering machine is on
- having a warm or cool drink handy.

As milk is removed from your breasts, more milk will be made. Your milk supply will depend on how often you express along with how well the breasts are drained.



© Ramsay DT, Hartmann RL, Hartmann PE

Structure of the Human Breast

If you have been expressing every feed for your baby, once you start breastfeeding you may need to adjust the number of times you express. Your baby may need to learn to breastfeed well, so take each feed as it comes. When your baby is fully breastfeeding, you may no longer have to express – a great time saver! Many mothers find talking to a trained Australian Breastfeeding Association counsellor on the Breastfeeding Helpline very helpful in providing support and information at this time.

Using the breast pump – helpful suggestions

1. Assemble the clean electric breast pump kit using the maker's instructions. There will be written instructions with the kit and you would have been shown how to put it together by the breastfeeding counsellor from whom you hired the pump. If you have any questions please ring her so you know you have it connected properly.
2. Set the pump to the lowest suction setting. Try to start your let-down by using some of the ideas listed above. When putting on the breast cup, make sure the nipple is in the centre and that the cup has good skin contact all around to stop air entering. If your nipple hurts when you start expressing with the pump, stop and check to make sure the nipple is centred in the breast cup and the suction is low.
3. At first, you may find it helps to keep the session short, gradually lengthening sessions. Some mothers find it useful to change breasts several times during the session. If you use a double pump kit, the session will be shorter than expressing with a single kit. Once you are comfortable with using the pump, you can increase the suction setting. Make sure it is still comfortable for you. Keep the kit upright while you are expressing to prevent milk from going into the tubing. If milk does go into the tubing, stop the pump and rinse the tubing with water. It is best not to use the pump when the tubing is wet, particularly in pumps where the tubing connects to the inside of the pump. It can draw moisture into the pump and cause damage. In pumps with a closed kit, slight dampness or moisture in the tubing should not be a problem. However, after expressing with wet tubing, take the kit apart to allow all parts to dry.
4. In the first few days or so after the birth, you will make only small amounts of the first milk, called colostrum. It is usually best to express this by hand. You will find that you will have a lot more milk a few days later, once the milk comes in. An electric breast pump is then very useful. The milk supply settles down within a few weeks to be the right amount to meet the baby's needs. The mother of a premature baby makes slightly different milk to the mother of a term baby, because her milk is more suited to her baby's level of maturity. Be guided by your medical advisers for your baby's feeding needs. You will be able to express more milk as you get used to expressing.
5. While you still have colostrum in your breasts, the milk will have a yellow colour and may look rather creamy. It will form layers on standing. The colour of colostrum from different mothers can vary a lot, so don't be surprised if yours looks quite different to another mother's. This is quite normal. As your milk supply increases, the colour of the milk becomes more bluish-white. It still forms layers on standing, with the creamy layer at the top. Milk may look different at different times of the day and this also depends on how long it has been since you have expressed or fed your baby. Your milk is right for your baby.
6. Some mothers find that after expressing for many weeks their milk supply decreases. This is because a baby is better at getting the milk from the breast than a pump. When you are able to feed your baby at the breast, you will find that with frequent feeds, your supply will soon increase. If you are unable to feed your baby at the breast, expressing more often will help to increase your milk supply. After a week or so, you may be able to return to your previous expressing schedule. It can be helpful to finish off each session with a few minutes of hand expressing. This will help to empty your breasts and help increase your milk supply. If your supply is decreasing despite your attempts to increase it, you may wish to contact your breastfeeding counsellor to discuss other ideas.
7. Contact the breastfeeding counsellor from whom you hired the pump if any of the following happen:
 - the breast pump is not working (please check the instructions first)
 - your milk supply seems to be dropping
 - you feel the pump is not helping you
 - you need someone to talk to about breastfeeding or breastmilk.

Please contact her at least once a week to let her know how you are getting on and whether you still need the hired breast pump.

Cleaning information

A mother's own expressing equipment does not need to be disinfected or sterilised for a healthy, term baby.^{1,2}

If you are expressing several times a day for a healthy baby, your expressing equipment should be rinsed well in cold water after each use to remove the milk. Store it in a clean, closed container. You can also store the unrinsed expressing equipment in a clean, closed container or plastic bag in the fridge. If you cannot store your expressing equipment in the fridge between sessions, have extra parts, so you are not always rinsing and washing. This information is consistent with the National Health and Medical Research Council's breastmilk storage guidelines (see ABA's Expressing and storing breastmilk website article). For example, breastmilk may be stored for up to 6-8 hours at room temperature and up to 72 hours in the fridge.

The expressing equipment should be cleaned well at least once every 24 hours while it is in frequent use.³ If the expressing equipment is only being used once a day or less, clean it after each use.

Thorough cleaning is important to make sure you have removed all milk from the breast pump parts and storage containers.

1. Wash your hands well with soap and water. Dry them on clean paper towel or an unused cloth towel.
2. Take apart all containers and the breast pump so that every part can be cleaned well. Rinse in cold water to remove milk from all the parts.⁴
3. Take care to remove all traces of grease, milk and dirt with a small amount of dishwashing liquid and hot water. Use a brush kept just for this purpose.
4. Rinse at least twice in hot water.
5. Drain bottles and containers upside-down on clean paper towel or a clean cloth towel. Cover while they air dry. Before putting away, ensure no water droplets remain in the containers or on any parts. If any water remains, dry carefully.
6. Store the dry kit in a new plastic bag, plastic wrap, more paper towel or a clean, covered container until next use.^{3,4}

All containers and breast pump parts used to collect or store breastmilk (except for the sterile expressed breastmilk bags or new plastic bags) will need to be cleaned before use.

In areas where there are different water supplies for drinking and washing, use drinking water to wash and rinse the pump equipment.

If your baby is sick, be guided by the advice of your baby's medical team about cleaning your equipment. Also, if you and/or your baby have thrush or you have any type of infection on your nipples, you may need to disinfect your equipment after cleaning it. Talk to your medical adviser, child health nurse, lactation consultant or an Australian Breastfeeding Association counsellor for suggestions.

Suggested reading

Australian Breastfeeding Association booklets:

- *Breastfeeding: expressing and storing breastmilk* covers all aspects of expressing and storage of breastmilk including hand/pump expressing, when to hire/buy a pump, long-term milk expression, and correct storage and handling of breastmilk.
- *Breastfeeding: your premature baby*
- *Breastfeeding: and your supply*
- *Breastfeeding: women and work.*

Breastfeeding ... naturally 3rd edn. Australian Breastfeeding Association. You can also receive our book *Breastfeeding ... naturally* free when you become an ABA personal member!

All these booklets and book can be purchased from the Australian Breastfeeding Association online shop shop.breastfeeding.asn.au

For further information on breast pumps, see the *Which pump is best for you?* article on this website.

References

1. **Academy of Breastfeeding Medicine** (2017). *Clinical Protocol #8: Human Milk Storage Information for Home Use for Full-Term Infants*. Retrieved from <https://abm.memberclicks.net/assets/DOCUMENTS/PROTOCOLS/8-human-milk-storage-protocol-english.pdf>
2. **Pittard, W. B., III, Geddes, K. M., Brown, S., Mintz, S., & Hulsey, T. C.** (1991). Bacterial contamination of human milk: Container type and method of expression. *American Journal of Perinatology*, 81, 25-27.
3. **Gilks, J., Price, E., Hately, P., Gould, D., & Weaver, G.** (2012). Pros, cons and potential risks of on-site decontamination methods used on neonatal units for articles indirectly associated with infant feeding, including breast pump collection kits and neonatal dummies. *Journal of Infection Prevention*, 13(1), 16-23.
4. **Jones, F.** (2011). *Best practice for expressing, storing and handling human milk in hospitals, homes, and child care settings* (3rd ed.). Human Milk Banking Association of North America.

If you need more help

The Australian Breastfeeding Association has breastfeeding counsellors available throughout Australia on the Breastfeeding Helpline who are able to help mothers with any questions about breastfeeding. Call us on 1800 686 268 any time! The number is on the front of this leaflet.

Australian Breastfeeding Association website

Our website has informative articles on different topics. Australian Breastfeeding Association members can also access email counselling from the website.

breastfeeding.asn.au