



Getting a Breast Pump

Pumps can be bought or rented and come with all the equipment you need. They also come with instructions on how to use the pump. If you will be pumping for a long time, it may be cheaper to buy a pump. Ask your nurse for information on **“Where to get a breast pump”**

Full-Sized Electric Pump

This pump is best if your baby is born very early, is sick or you will be pumping for a long time. It allows you to “double pump” or pump both breasts at the same time. This is best because:

- it will decrease the amount of time you will spend pumping.
- it helps increase your “milk hormone” levels and the amount of milk you will produce.

Mini-Electric

If you will only be pumping for a short time, you may be able to use a mini-electric pump. This pump is good if you only need to pump 2-3 times a day, such as:

- if your baby is in hospital and you are using the hospital pump most of the time.
- if your baby is mostly breastfed but you offer a bottle a few times a day.

Hand Pump

These pumps are for mothers who have a full milk supply and do not pump often. This type of pump is not good enough for mothers whose baby is sick or very small.

Using a Breast Pump in the Hospital

While you and your baby are in the hospital you can use a breast pump at the Women’s Hospital or in the unit where your baby is staying.

- Ask the nurse or the clerk at the desk for a kit to use with the pump.
- If you have any questions about how to put the equipment together, ask your nurse or the lactation consultant (LC).
- After use, wash your kit with warm soapy water and allow it to air dry in the bin given to you by the nurse.

Pumping Breast Milk

Follow the guide, which comes with each breast pump on how to put it together and clean it.

1. Wash your hands well with soap and water. Rinse and dry them.
2. Set up all of your equipment on a clean surface.
3. Prepare yourself before you pump. Relax, have a glass of water handy. Think about your baby to help your milk “let down”.
4. Prepare your breasts to get the milk down so the pump can collect it. Doing the same steps each time will condition your body to “let down”:
 - Use a warm wet face cloth to massage your breasts in a circular motion from outside toward your nipples.
 - Gently stroke your breasts with your fingertips toward the nipples. Stroke all of the breast. This will help to cause a “let down” reflex which helps squeeze milk out of the milk ducts.
 - Lean forward and shake your breasts. This allows gravity to help the milk flow.
5. Set the pump to the lowest setting. Slowly increase it to a comfortable level as you are pumping.
6. Center your nipples in the flange so that they don’t rub against the edge.
7. When you are finished pumping, allow your nipples to air dry. Use dry breast pads if necessary.
8. After each time you pump, wash your equipment (bottles and flanges) in hot soapy water and rinse well. Sterilize the equipment once a day. This will prevent germs from getting into your milk.

Cleaning Equipment at Home

Sterilize your equipment once a week until your baby's age is 4 months after his due date.

1. Wash all equipment in hot soapy water and rinse well.
2. Place it in a pot with a cloth on the bottom. This will prevent glass from banging and rubber from sticking. Cover with water.
3. Boil for 10 minutes.
4. Remove the pot from the heat, drain the water, and put the cover on.
5. Store the equipment in the covered pot until you are ready to use it again.
6. A microwave steam sterilizing unit or bag can also be used instead of boiling. Follow the directions that come with it.

Storing Breast Milk

- If you and your baby are in hospital, the hospital will give you plastic containers to store your milk.
- Use a new one each time you pump.
- Label each container with your first and last name, and date and time of expression. Place a sticker with your baby's name on each bottle. The nurse or unit clerk will give them to you. If you have twins or more, put labels from both on each bottle.
- Put your milk in the fridge as soon as you finish pumping. Freeze your milk if your baby will not be feeding for a while. Discuss this with your baby's nurse.
- In the hospital, milk is used within **48 hours**; unused milk is then frozen and thawed when needed.
- Use an insulated container with a **freezer gel pack** to transport fresh or frozen milk to the hospital. Ice has a higher temperature than frozen milk and will thaw the milk.
- If you live out of the city and cannot bring your milk in, your nurse will tell you how to send it in.
- If you and your baby are at home, store milk in clean containers with lids, milk storage bags, or liners from a disposable infant feeding system that are doubled to prevent breakage during freezing milk.
- At home, milk can be stored:
 - At room temperature for 8 hours.
 - In the fridge for 8 days.
 - In the back of freezer (within fridge) for 2 weeks.
 - In the back of freezer (with separate door but attached to fridge) for 6 months.
 - In the back or bottom of a separate chest or upright freezer for 12 months.

Preventing Problems

- Wear a well-fitting bra that gives enough support.
- If you wear breast pads, use ones that **do not** have a waterproof backing. Change them whenever they are wet or damp.
- Clean your nipples in the bath or shower with water and allow them to air dry.
- Avoid using soaps, creams, lotions or ointments on your nipples.
- Keep your breasts as clean and dry as possible.

Engorgement

This is when breasts become hard and painful during the first week after you have your baby. If occurs, it usually goes away within 1 or 2 days when you start to empty your breasts more often.

You can prevent engorged breasts by pumping your breasts more often, up to 8 or 12 times a day.

How to treat it

Before you pump or breastfeed:

- Take a hot shower, or apply hot, moist towels to your breasts for about 2-5 minutes.
- Gently massage your breasts to soften them.
- Try to relax, this will help the milk to flow better.
- Empty your breasts every 3 hours by pumping or breastfeeding
- Use ice cold compresses after breastfeeding or pumping

To relieve pain or discomfort:

- Use acetaminophen (Tylenol). This will not affect your breastmilk.

Tender / Sore Nipples

How to prevent it

- When you are breastfeeding, make sure your baby is in a good position and is properly latched on. Make sure that the baby is "on target" to the nipple before bringing the baby close to the breast, so that when the baby sucks the nipple is not pulled to one side.
- When you are pumping, make sure the nipple is centered in the opening and that you do not have the pump pressure set too high.
- Keep your nipples clean and dry.
- Allow your nipples to air-dry when they are damp, after bathing, pumping or breastfeeding.

How to treat it

- Hand-express a few drops of milk onto your nipples, rub in and allow to air dry.
- Use a thin layer of purified lanolin (Purlan or Lansinoh) after pumping or breastfeeding. This does not have to be washed off before you pump or breastfeed.
- Talk to a LC to help you resolve the problem that caused the sore nipples (such as latch/position)

Plugged Milk Ducts / Mastitis

Plugged milk ducts happen because of a back up of milk or an obstruction that prevents the milk from flowing. The problem begins with a tender spot, lump or redness in the breast. The pain is mild and is felt just around the area of the plugged duct.

Mastitis is a breast infection. It may start in the same way as plugged milk ducts, with a tender spot, lump or redness in the breast. It is usually only in one breast. It differs from plugged milk ducts in that:

- you may have a fever
- the breast may become hot, red and swollen, with intense pain
- you will probably feel unwell

How to prevent it

- Breastfeed and/or pump your breasts for at least 10 minutes on each side, every 3 hours.
- Make sure there is no pressure on the breast from a bra or clothing.
- Check to be sure your baby is latched onto the breast and is sucking well during breastfeeding.

How to treat it

- Breastfeed or pump your breasts 8-12 times per day.
- Use a hot cloth on the sore breast before pumping or breastfeeding to increase milk flow.
- Pump or breastfeed on the sore side first unless your baby is vigorous.
- Massage the sore area while feeding or pumping.
- Vary your baby's position when breastfeeding. Use positions that place the baby's nose or chin pointing at the sore spot.
- Use Acetaminophen (Tylenol) for pain or fever relief. It will not affect your breast milk.
- See a doctor as soon as possible to be treated with antibiotics if you have any of the signs of mastitis.

Decreased Milk Supply

What it is

Mothers may have a decrease in their milk supply if they are pumping and not yet breastfeeding their babies. It is less common with mothers who are breastfeeding.

If your milk supply has decreased to less than what the baby needs, or to half of what you had before, you may need some help to increase it.

Breastfeeding is best for all babies. It does not matter how small your baby is, how early your baby is born, or how sick your baby is.

How to treat it

- Use a full-sized electric pump that allows you to pump both breasts at the same time.
- Pump more often, every 2-3 hours during the day and at least 8 times every 24 hours. At night, take no longer than one 6 hour break. If your baby is close to discharge, you may want to pump every 3 hours during the night as well.
- Use measures to help your milk "let-down".
- Make sure you eat well, drink when you are thirsty, and get enough rest.
- If you are breastfeeding, make sure your baby is latching on well and is sucking right.
- Pump after you breastfeed or do kangaroo care with your baby. This will help your milk let down.
- Talk to your nurse or public health nurse.

Power pumping to increase milk supply – once a day (for a 1 hour period):

- Pump for 20 minutes; rest 10 minutes
- Pump for 10 minutes, rest 10 minutes
- Pump for 10 minutes – finished

How to help your milk "let down":

- express your milk in a familiar and comfortable setting
- decrease distractions
- have a picture of your baby with you
- relax by listening to quiet music, watching TV or reading a book
- pump at your baby's bedside, after kangaroo care, or after holding your baby
- focus all your senses on your baby
- use other relaxation techniques

Taken from the MARMET TECHNIQUE OF HAND EXPRESSION

IF YOU HAVE QUESTIONS

If you have any questions about breastfeeding or pumping:

- In the hospital – talk to your baby's nurse
- At home, talk to your public health nurse
- Phone the Breastfeeding Hotline 204-788-8667 (24 hours per day, 7 days a week)