

A Guide to Pumping Your Milk



Breastfeeding mothers may find themselves in a variety of situations in which it seems necessary for them to pump their milk. If you find the need to use a breast pump, you may want to know which type is best suited to your needs. With practice, almost any type of pump will work, but different situations may make one type of pump preferable to another. You may also want to become familiar with manual or hand-expression as this can be useful in many situations. Information on manual expression can be found in LLL publications, *The Womanly Art of Breastfeeding* and *Manual Expression of Breast Milk—Marmet Technique*, or by contacting a La Leche League Leader in your area.

The following describes the most common reasons mothers use breast pumps and the considerations that might make one type of pump preferable over another.

When Baby Is Unable to Come to Breast or Can't Breastfeed Well

Sometimes a baby is unable to come to breast or can't drain the breasts well enough to maintain mother's milk supply. Such situations can include prematurity, hospitalization for serious illness, a physical condition such as cleft palate, and other conditions. If you must establish a milk supply for a baby who cannot do so, your best choice is a hospital-grade breast pump. These pumps are very expensive to purchase (usually over \$1,000 when new), so they are usually rented, though some mothers choose to purchase them.

The ability of the breasts to produce enough milk for a larger baby is set during the early postpartum weeks. Even if you have a tiny premature baby, you want to be able to express about 30 ounces (900 ml) every 24 hours by two weeks postpartum. If you are not producing that much milk by two weeks, you may want to contact an LLL Leader or lactation consultant for suggestions for increasing your milk supply. The best way to establish optimum milk production is to mimic the nursing frequency of a newborn. Mothers should pump at least eight to 10 times every 24 hours. You may choose to pump every three hours, or you may choose to pump every two to two and a half hours during the day and take one longer, five-hour stretch at night. (Timing is counted from the start of one pumping session to the start of the next pumping session.) Most mothers stimulate a higher prolactin level and therefore a larger milk supply if they pump both breasts at the same time ("double pumping"), rather than pumping one breast and then the other. Double pumping also saves significant time through the course of the day. Pumping 10 to 15 minutes for a single baby or 20 minutes if you have multiples is usually sufficient.

A middle-of-the-night pumping session is very important in establishing a full milk supply. Once a full supply (30 ounces every 24 hours) has been established for about two weeks, some mothers

find that they can forgo the middle-of-the-night pumping. Other mothers need to maintain that middle-of-the-night pumping in order to protect their all-day supply until they are about four months postpartum.

Some mothers find that once they have had an established full milk supply for about two weeks, they can return the rental hospital-grade pump and purchase a retail electric double pump. The packaging for such a pump should not say "For Occasional Use." However, these double pumps were not really designed for maintaining a milk supply when baby is unable to come to breast or feed well at breast. Other mothers find that if they try to switch away from a hospital-grade pump, their milk supply starts to drop in a week or two, and they need to go back to using the hospital-grade pump to rebuild and maintain their milk supply.

Some mothers dislike the sound of an electric breast pump so much that they have a hard time releasing (letting down) their milk. For some of these mothers, using two one-handed manual pumps or a pedal pump may be a better choice. However, when using manual pumps to maintain supply for a baby who can't nurse well, it is very important that the mother pay very close attention to making every suction stroke as similar as possible to each other, and that she perform 50 to 55 suction strokes per minute.

When Mother is Separated from Baby Due to Work, School, or Travel

Most mothers who experience separation of five hours or more (perhaps even several days due to travel) will need to pump their milk to protect their milk supply. Any retail double breast pumps that do not state "For Occasional Use" are very good for this situation. There are also some non-hospital-grade rental pumps available, usually for a cheaper fee than hospital-grade pumps, that can be used for this type of pumping. Again, a mother should make



Pumping should not be painful! No matter which type of pump is used, it is imperative that the pump flange (also called breast shield) fits well. If possible, choose a brand of pump that offers a variety of flange sizes. There is usually an additional cost for extra sizes, but the cost is minimal and well worth it so that pumping is comfortable and produces the largest amount of milk. Some brands of pumps do not offer additional sizes of pump flanges and these pumps can be quite uncomfortable if they don't happen to fit the mother well. For most mothers, the best fit is when the nipple plus approximately a half-inch (1.3 cm) of breast tissue is drawn down into the nipple tunnel during suction. Mothers may need to experiment to find the size that allows them to use the pump at their own highest comfortable suction level (which may not be the pump's highest possible suction level).

sure the pump flanges (breast shields) are the correct size, and most mothers should use the pump at the highest comfortable suction level.

Ideally, a mother will pump as many times as her baby would have eaten during the separation, usually for 10-15 minutes with a double pump (20 minutes for multiple babies). Some mothers have enough storage capacity in their breasts that they can still pump enough milk even if they can't pump as many times as their baby eats. Other mothers find that they need to fit in an additional pumping time in the evening or early morning, or give the baby some formula if extra pumping is not possible.

Many mothers find that their supply drops a bit if they must leave their baby for a few days, even if they were able to pump regularly during the separation. Nursing frequently when you get back home will usually rebuild the supply quickly. If your older baby is frustrated with the reduced supply and won't stay at breast, you may need to follow each feeding with five minutes of pumping for two to three days.

Breastfeed your baby as usual whenever you are together.

For Occasional Separation

Almost any type of pump that is comfortable to use will be sufficient for occasional separations. Most mothers find the best time to pump is for 10 minutes immediately after the baby's first morning feeding, because they usually have the most extra milk in the morning. Although you will get more milk if you wait an hour after the feeding, you are then pumping out a good part of the milk that is building up for baby's next feeding, so your baby may not fill up well then. It may take several days to stockpile enough milk for one feeding. You may also need to pump your breasts while you are away from your baby to avoid uncomfortable engorgement and possible mastitis. Many mothers avoid this situation by simply taking the baby with them. A La Leche League Leader can give you tips for breastfeeding discreetly in public.

What Can I Do to Pump More Effectively?

Gentle breast massage can be effective preparation for some mothers. Go easy at first, using the lowest setting or the least amount of suction to get started. Center your nipple in the flange of the pump, using the size that allows you the most comfort. Gradually increase the suction level to your own highest comfortable suction level.

Your body is used to letting down your milk to the feel of your

baby's soft skin and his suck. When you sit down to pump, a photo of your baby, a blanket, a piece of his clothing that he recently wore and which still contains his scent, or even a recording of your baby's cry can bring your baby to mind, making it easier for you to let down (release) your milk. Pumping is a learned skill and pumping effectiveness tends to improve with practice. Training your body to let down your milk to the feel of the pump is as much psychological as it is physical.

Whether at home or elsewhere, you will need to find a place where you can relax and have some privacy. Some corporations provide lactation rooms for their employees. It is important for you to be relaxed because stress can inhibit your milk release (let-down) and decrease the amount of milk you can pump.

Additional Tips

- No one can predict how much milk your baby will take from a cup, spoon, bottle, syringe, finger feeder, or supplemental nursing device. It is usually best to store milk in two- to four-ounce quantities. These can be quickly thawed if your baby is not satisfied with what was first offered. The baby's caregiver will be able to tell you after a few feedings how much your baby usually takes, and you can then start to adjust the stored amount.
- Some babies drink more milk than they actually need and cause mothers to think they don't have enough milk. This can happen if they are fed with an easy-flowing bottle nipple. A technique that some mothers have found helpful to discourage babies from overfeeding is the Kassing Method of Bottle-Feeding. The method, developed by a La Leche League Leader, requires babies to work for their feeding in a manner similar to breastfeeding. Information about the Kassing Method can be found at www.bfar.org/bottlefeeding.pdf.
- Try to thaw only the amount of milk your baby is expected to drink. Milk can be thawed in the refrigerator overnight, or it can be thawed under cool and then warm running water. Do not allow your milk to sit at room temperature to thaw. If more is needed, the caregiver can quickly thaw more if the milk has been frozen in small amounts (two to four ounces). Mother's milk can be kept refrigerated before use for up to 24 hours after it is thawed, but it cannot be refrozen. (Milk storage guidelines can be found on the LLLI publication, *Storing Human Milk*, or by contacting an LLL Leader.)

La Leche League Leaders are accredited volunteers who are available to help with breastfeeding questions in person, over the phone, and online. Locate an LLL Leader @ www.llli.org.