

INFORMATION FOR PARENTS/CARERS

Breast/chest milk and your preterm baby



Although your baby may require additional medical care, you are an essential part of their care. Even if you feel you don't want to breastfeed/chest feed your baby after discharge, please continue to read this leaflet to see if you would consider expressing your milk for your baby while they are on the neonatal unit.

Who is this leaflet for?

- Parents/carers of a baby who has been born preterm (baby born before 37 weeks of pregnancy).
- Parents/carers whose baby is at risk of being born preterm.

Why is breast/chest milk particularly important for a baby who is born preterm?

- **Protection against infection** – your breast/chest milk contains antibodies that help your baby fight infection now, and in the years to come. This is especially important in preterm babies as they are more prone to infection. The first milk you produce (colostrum) is particularly rich in infection fighting antibodies and can be given to your baby even if they are unwell, by giving them small amounts into their mouth as mouthcare.
- **Protecting the baby's gut** – preterm babies are particularly at risk of a tummy problem called necrotising enterocolitis (NEC), which can be extremely serious. We don't know the exact cause of this condition but know that babies who are given human (mother's own breast/chest milk or donor human milk) rather than artificial formula are less likely to get it.
- **Bonding** – at a stressful and worrying time, expressing your breast/chest milk, and giving it to your baby can help build a strong bond between you both. The neonatal team can also provide you with 'bonding hearts', which are small pieces of material that are swapped between parents/carers and baby. Having something which smells of your baby close to you can help your milk flow when expressing by hand or expressing by pump. Your baby will recognise your smells, which can help them feel calmer, even when you're not physically there.

- **Promote healthy growth** - your body is unique and the milk you produce in the first few weeks is higher in fat, protein, energy, and nutrients, which are essential to meet the higher nutritional needs of your preterm baby to grow.
- **Additional benefits of breastmilk are:**
 - Reducing the risk of Sudden Infant Death (SIDS), further hospital admissions, childhood leukaemia (cancer of white blood cells), obesity, allergies, your baby's ability to learn and cardiovascular disease in adulthood.
 - Health benefits for women/birthing parent. Those who breastfeed/chest feed are at a lower risk of breast cancer, ovarian cancer, osteoporosis (weak bones) and obesity. They also have lower chances of developing type 2 diabetes later in life and cardiovascular disease, as well as a reduced likelihood of postnatal depression.

How do I express milk?

- The midwives, neonatal nurses and healthcare support workers are very experienced and will be able to help show you how to express with a demonstration in a hands-off approach with knitted breasts and can provide you with the expressing equipment.
- Aim to start within the first two hours of your baby's birth. The earlier you start to express, the sooner we will be able to provide your unique breastmilk/chest milk for baby. Your midwife or the neonatal team can provide support with hand expressing and provide you with a colostrum pack to collect those precious drops of colostrum in the first few days.
- Once you have more volume you can use an electric hospital grade pump whilst in hospital and we can loan you either an electric pump or a hand pump adaptor. You can use a pump earlier if you wish to, but we recommend hand expressing initially and to mix both hand/pump if the early days to maximise your milk.
- Aim to express 8-10 times in 24 hours with no long gaps and including overnight, especially in the first few days to weeks. Try not to leave long gaps between expressing, but you can work around your day by clustering expressing sessions.

What do I do with the milk?

- Write your details and your baby's details on the syringe/bottle, along with the time and date that you expressed.

- The milk can then be placed in the fridge for up to 48 hours or a freezer for three months while in hospital (please discuss with your nurse for advice) - ready for use when appropriate.
- At home you can keep your milk in the fridge for up to five days and in the freezer for up to six months by following NHS advice online.

What happens if I can't get enough milk?

- Don't panic as this is normal to produce small amounts in the first few days. The midwife and neonatal nurse will be able to check you are using the appropriate technique and give you some pointers to help boost your milk making hormones, e.g., expressing by your baby's cot or with a photo of him/her and increasing the amount of skin to skin contact with your baby. Staff will undertake expressing assessments with you within 12 hours of your baby's birth and on day three, five, seven and nine. This can be done more frequently if you feel that you need additional support. For some babies, donor human milk may be an option for a short period while you are trying to help with your production. Your doctor or nurse can discuss this with you and see if your baby would qualify for this.
- If you have tried all the usual ways to increase milk production, please discuss this with your baby's doctor and we may be able to give you a letter for your GP asking they prescribe you a medication that may help alongside regular pumping sessions (eight to ten times in 24 hours and overnight).

Some reliable websites/online resources:

- **Bliss - Parent Information Guide:** https://issuu.com/bliss-charity/docs/parent_information_guide
- **UNICEF - You and Your Baby leaflet – Supporting you and your baby on the Neonatal Unit:** <https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/neonatal-care-resources/you-and-your-baby-supporting-love-and-nurture-on-the-neonatal-unit/>
- **Tommy's - Feeding your preterm baby:** <https://www.tommys.org/pregnancy-information/pregnancy-complications/premature-birth/your-babys-time-hospital/feeding-your-premature-baby>
- **Successfully breastfeeding your premature baby- La Leche League GB:** <https://www.laleche.org.uk>

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet (if relevant) please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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