Your Baby Needs Your Milk

At UC San Diego Health, we believe that a mother’s milk is the best nutrition for ill or premature infants. We ask every mother to pump milk for their babies for at least the time that they are in the Neonatal Intensive Care Unit (NICU).

All babies need their mother’s milk, but preemies and infants who are ill may benefit even more from it. Preemies that are fed their mother’s milk during their NICU stay tend to have:

- Less life-threatening infections and feeding problems and a shorter hospital stay
- Lower risk of developing necrotizing enterocolitis (NEC)
- Better brain development and higher IQs when they are older
- Lower risk of having to return to the hospital after they go home

Mother’s milk has more than 600 biological factors that contribute to better health in babies. It contains brain-boosting and nutritious fats, sugar and protein to jumpstart growth, and hormones that help the baby’s intestines
move and digest. Mother’s milk also has antibodies and live cells that help prevent and fight against infections — no artificial formula can compare!

Making Milk for Your Baby

A full-term baby feeds at the breast eight to 12 times per day during the first few days following birth, which stimulates milk production. Sick or premature babies are usually unable to do this, so mothers of these babies need to use a pump — at least initially — until their babies are ready to breastfeed. It’s important to start pumping within four hours of delivery because mothers who pump soon after delivery make twice as much milk as those who wait.

When you first pump, you may see drops of milk or no milk at all. This is normal. Try to be patient, continue pumping and log your milk volume in the NICU Pumping Log in this booklet — you will be surprised how quickly it increases. Be sure to fill out your logbook every day and bring it with you when you visit your baby. Please talk to the lactation consultant if you have questions or concerns. This early milk, called colostrum, is especially important because it contains concentrated antibodies to provide protection from infection. So every milliliter of this early milk is a benefit to your baby.

It is very important to have an established milk supply early so that there is always enough milk for your baby. A good goal is to make 500 mL or more of milk each day by the end of the second week. This amount is what your baby will need by the time he or she is ready to go home.

Studies have shown that feeding premature infants mother’s milk instead of formula can decrease the chance of babies developing a disease called necrotizing enterocolitis (NEC). It is a serious intestinal infection that can make babies very ill and unable to feed for weeks at a time. These periods of illness and poor nutrition can lead to long-term problems with growth and development.
How do I pump?

We recommend pumping after holding your baby. You can pump at the bedside with a privacy screen, with a pumping cover or in the mother’s pumping room. To pump, follow these steps:

1. Wash your hands (no need to wash your breasts, a daily shower is adequate).
2. Get comfortable.
3. Take a minute to massage your breasts in a circular motion.
4. Center the breast flanges on your nipples.
5. Hold the flanges gently, so you’re not pushing them into your breasts.
6. Start the pump at a low suction and increase it slowly as you figure out what is most comfortable for you.
7. Pump both breasts at the same time for about 15 to 20 minutes.
8. Pump until your breasts are softer (this may take longer than 20 minutes).
9. Pay special attention to your flow of milk. When it slows down and your breasts feel softer, you’re done.

Getting Started

→ Start pumping within four hours of delivery.
→ Pump for 15 to 20 minutes every four hours (six times a day).
→ Try to pump after holding your baby.
→ These first days after birth and when you go home are CRITICAL for good milk production.

SPIN MOMMAS

If you would like to talk to a mother who had a baby in our NICU unit, ask your nurse or social worker about SPIN MOMMAS volunteers.
What can I do if pumping feels uncomfortable?

If pumping hurts or your nipple doesn’t move easily inside the plastic flange, ask for help. You may need a different size flange or may be able to reduce the friction by lubricating the flange with a little milk, lanolin, coconut oil or olive oil.

Hands-free pumping may make pumping easier. You can buy a special pumping bra or make one out of an old bra by cutting holes for the flanges.

Is it normal for my breasts to feel swollen and lumpy?

When your milk first comes in, your breasts may be full, heavy and large from a combination of swelling and milk production, and you may feel lumps in your breasts caused by the filling of milk glands. This is normal. To help soften the lumps, you can gently massage your breasts prior to pumping and/or during pumping. To help decrease swelling, you can use ibuprofen and cool compresses. If you are full, it is very important to empty your breasts. This is the key to good milk production.

How often should I pump?

You should pump six or more times in 24 hours: once every four hours during the day and once at night. It is important to pump once between 1 a.m. and 5 a.m. when your hormone levels are the highest.

In the first few days following delivery, if your breasts feel very full, you might pump more often to empty your breasts. Full breasts signal the brain to stop producing milk, so emptying your breasts will help with your milk production. The number of times you pump is more important than the length of time you spend doing it. Pumping milk is a lot of work, but your effort will pay off later when you have a good milk supply.