Prenatal Breastmilk Expression

Mayo Clinic Health System  Red Wing
Minnesota Breastfeeding Coalition 9th Annual Meeting

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Objectives

• Indicate when providing extra colostrum could be beneficial to the mom and/or baby
• Identify positive outcomes of expressing and storing colostrum prenatally
• Develop a plan for expressing and storage of colostrum
Background on colostrum collecting

• Breastfeeding Core Measures
• Review of 2014 Initiation and Exclusivity Data
  • 46% mothers received formula in first 4 hours
  • 34% of AT RISK mothers formula by discharge
• USLCA Webinar 2014, Suzanne Cox, Australia
  • Supplementing neonates with colostrum assisted with immunity, hydration, improved active feeding.
  • Increased milk supply and confidence building for mother.
MCHS Birthplace goals

• Decrease formula use in the first 4 hours
• Increase exclusive breastfeeding rates by hospital discharge
• Increase our duration rates
Indications for collecting and storing colostrum during pregnancy

- Type I, Type II and gestational diabetes
- Inflammatory bowel disease (Ulcerative colitis, Crohn’s Disease)
- Multiple Sclerosis
- Women at risk for not producing a full milk supply (breast hypoplasia, PCOS, history of breast surgery)
Education from Provider

- Candidates identified at 28 week prenatal provider visit
- Introduction to program
- Order placed for referral for a Lactation consult at 34-36 weeks gestation
supplies
Supplies given to patient

- Soft sided cooler
- Syringes/ caps
- Storage container labeled “Store in Freezer”
- Spoon
- Med cups
- Lactation services brochure
- Hand expression brochure
- Website resources
- Labels
**Hand expression**

- Start collecting at 37 weeks
- Collect into a spoon or cup
- After warm shower
- Stop if cramping starts
Labeling and Storage

- Number each syringe
- New syringe for each session
- Seal with moms MR # label
- Place in plastic container in freezer
Use of milk in Hospital

- Finger feed with 5fr NG tube
- Supplement at the breast
- Give after or during a feed for a low blood sugar
- Give during the second night when baby is more fussy
- Use as supplement for jaundice prevention
Pilot sample of 34 mothers
Intended to breastfeed and received formula

- 2014
- Prenatal BM

Formula first 4 hrs
Findings

• 8% increase of breastfeeding exclusivity rate in hospital overall

• 15% increase exclusivity rate among mothers expressing colostrum prenatally

• Decreased formula use in the first 4 hours by 17% in pilot group

• No mothers who collected colostrum went into preterm labor

• Increase in mothers confidence

• Mothers reported their milk came in sooner and had more breastmilk than expected
References


Hand Expression Websites