Donor Milk – Increasing Access Across the State

NOVEMBER 3, 2017
BRAINERD AT MADDENS RESORT ON GULL LAKE, MINNESOTA

DONOR HUMAN MILK

- Why Donor Milk?
- Who are the donors?

Who are the Donors?

- Why do they donate their milk?
- Are they breastfeeding their own baby?
- How much milk do they donate?

Mothers Know the Value of their Own Milk

- Mothers are feeding their own babies and have extra milk and are wanting to help other mothers have milk for their babies.
- When mothers have experienced a loss of their baby, some choose to donate their milk and find it helps as they grieve.
Mothers choose to learn how they can give their milk to help other babies.
- They have stored their milk for a few months and are needing room in their freezers.
- They then go through the screening.
- Mothers are screened by the milk bank of HMBANA – Human Milk Bank Association of North America Milk Bank. The screening is done by a phone interview, a written questionnaire and blood testing.

Blood Test
1. HIV – 1
2. HIV – 2
3. Hepatitis B and C
4. HTLV-1 and 2
5. Syphilis

Cost of lab testing paid by Milk Bank

Mothers bring their milk to a Milk Depot

The Donor Number
- Each mother who passes the screening receives a donor number. IE: 17-100
- She labels her milk with her number.
- Her milk is taken to a MILK COLLECTION DEPOT.
- From the MILK DEPOT, her milk is transported to the MILK BANK.
- There her milk will be put together with 3-5 other mothers’ milk.
GENTLE PASTEURIZATION

- Milk is heated to 62.5 degrees Celsius for 30 minutes then quickly cooled.
- The milk is tested for bacteria before and after pasteurization.
- Then frozen, packed and ready to be shipped to the hospitals.

DONOR MILK AFTER BIRTH

- Helping a mother to reach her goal to breastfeed her baby exclusively.

KEY STEPS FOR DONOR MILK USE IN THE HOSPITAL

- Ensure proper freeze/refrigeration in a convenient location to keep the frozen donor milk that come in 2-4 oz bottles, temperature alarms to be sure milk is kept frozen.
- Educate Prenatally for mothers to have an understanding before birth.
- Educate the Hospital Staff

When is Donor Milk Needed Soon After Birth?

- Low or delayed maternal milk supply associated with:
  - Cesarean Birth
  - Breast Reduction
  - Late initiation of breastfeeding (mother in ICU)
  - Post Partum hemorrhage
  - IDDM
  - Hypoglycemia
  - Obesity
  - Ineffective suckling by infant
Donor Milk is a Bridge

- First give mother’s milk if baby not breastfeeding—hand expression and/or pumping
- If baby needs more milk than she is yet able to supply, donor milk is available.
- The goal is to have mother breastfeed, hand express and pump to help her own supply to increase.
- Milk is available for after discharge for purchase.
- Parents are reaching out to reduce disparity among low income families.

Supplementing With Donor Milk

- Educate family of option to give human breast milk versus formula.
- Obtain a consent to use Donor milk.
- Warm thawed donor milk.
- May use a sterile syringe to draw up the milk or pour milk into a med cup.
- Container of donor milk can be used for more than one baby to avoid waste.

Supplementing

- Supplement — volume matters. Baby needs to breastfeed 8 or more times in 24 hours. Age appropriate related to stomach size of newborn.
  - Less than 24 hours — 5 - 10 ml
  - 24 – 48 hours — 10 – 20 ml
  - 48 hours — 20 – 30 ml

MINNESOTA MILK BANK FOR BABIES

- 5,000+ babies born in Minnesota (annually) are premature or ill and may require human donor milk while hospitalized.
- Minnesota’s Human donor milk is currently sourced from Colorado and Iowa, neither of which can consistently meet our demand.
Our Progress

When we started in 2012 there were 4 hospitals using donor milk that we knew of in Minnesota. The last count was 24 hospitals who are now using human donor milk.

We have helped to developed 4 milk depots with an additional to open soon. We now collect enough milk to supply and sustain a Minnesota Bank. The milk is presently being transported to the Iowa Mother’s Milk Bank.

1. We have provided education about the importance of breastfeeding.
2. We have created community awareness about human donor milk.
The Fundraising - for the Minnesota Milk Bank for Babies.

- Two Developers have been hired. These experienced fundraisers are working outside and within the Twin City Metro making contacts. They are communicating the need and connecting us to people for funding. Grants have been submitted and more being prepared.

Expected Outcomes from the Minnesota Milk Bank for Babies

- Increased access to human milk for ill and preterm infants.
- Increased exclusivity and duration of breastfeeding.
- Decreased length of stay in neonatal intensive care units (NICUs).
- Decreased infant mortality and improved child health.

Financial support

- Goal: $300,000
- General operating and equipment

Advocate

- Land your name to our list of endorsers
- Talk to your employer and others about supporting our work
- House a milk collecting depot at your hospital, clinic

Future opportunities

- Board of Directors and Committee member roles
- Public policy advocate

Partnership Opportunities

- [The benefits of breastfeeding and associated risks of replacement with baby formulas](http://search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,uid&db=mnh&AN=28288222&site=ehost-live&scope=site)