

STORAGE

- Sterile bottles are provided in the clinic
- Tightly close the lid, do not touch the inside
- Label according to instructions (date, time)
- Cool the milk as quickly as possible
- Place bottles at the back/top of the refrigerator/freezer
- Freeze the milk immediately if not used within 4 days
- Leave space of approx. 2cm in the bottle (milk expands during freezing)



AT ROOM TEMPERATURE*

4 - 6 hours



IN THE REFRIGERATOR BELOW 4 DEGREES CELSIUS

4 days

IN THE FREEZER

Optimal: 3 months
Maximal: 6 months

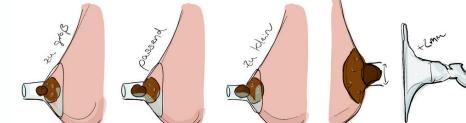
*Note: it requires 4 hours already to feed the milk to your baby. Thus, the milk should be cooled immediately.

BREAST MILK POOLING

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PAIN AND/OR SORE NIPPLES

- Be sure you're using the right funnel size
- Make sure that the nipples are in a central position in the funnel
- The suction setting of the pump should not hurt
- It is better to pump more frequently and for shorter periods than for longer periods with longer breaks
- Keep nipples clean with clean water or saline solution, change linen and nursing pads regularly
- You can let a little breast milk dry on the sore nipple for care



TRANSPORT

- During transport, the cooling chain must not be interrupted.
- The milk must be transported to the clinic immediately and without delay using a cool box with frozen cooling elements.
- Fill the empty space in the box with clean towels.
- The cooling box should be insulated, easy to clean and disinfected after each transport.

Solutions for problems during the pumping process:

BREAST ENGORGEMENT

Within the first days after birth, the initial swelling of the mammary glands occurs. This is also called lactogenesis. At this point, the colostrum changes into the mature breast milk. Your breast can feel heavy or swollen, may be flushed and painful.

What can help?

- Frequently expressing breast milk
- Warming the breast before pumping, for example with a warm and clean wash cloth
- Breast massage before pumping
- Cooling the breast after pumping, best to use a cold and wet wash cloth or a cooling pack from the fridge
- Wearing comfortable and light clothing



Initial swelling of the mammary glands often occurs conjunction with "baby blues". Many mothers experience this temporary low mood in the days following birth.

BLOCKED DUCT

Blocked duct can occur due to of stress, tight clothing or incomplete breast milk expression. You may have may experience firm spots in your breast and possibly swelling, redness and pain.

What can help?

- Frequently expressing breast milk
- Gentle breast massage when expressing breast milk
- Make sure you wear comfortable, loose clothing
- Rest and relaxation are especially important now!
- After breast milk expression, it can feel relieving to cool the affected side for 5 minutes
- Painkillers that are compatible with breastfeeding can be taken in consultation with your doctor



Important: In case of fever and/or persistent symptoms for more than 48 hours, you should see your gynaecologist.

NOT ENOUGH MILK?

4 days after birth your amount of milk should be 500ml within 24h.

What can help?

- Pumping next to your child or by looking at a foto of it can help releasing oxytocin and therefore raise your milk production
- Raising the pumping frequency to 10 times in 24 hours additionally
- Adding manual breast expression after pumping
- Doing breast massage/compression during pumping
- Additional power-pumping

BREAST COMPRESSION

During the pumping process, the breast is grasped with one hand and lightly pressed against the chest for a few seconds. This compression of the breast tissue is performed repeatedly until the end of the pumping process.

POWER - PUMPING

First, a breast massage is carried out, followed by pumping for 5 minutes on both sides. After a short break, the massage and pumping is repeated. The whole process should be repeated three times. After integrating power-pumping into the daily routine for a few days, the milk production will be stimulated.



NEO
MILK

Breast Milk

THE MOST RELEVANT INFORMATION
FOR EXPRESSING BREAST MILK



www.neo-milk.de

Dear Mom,

Thank you for providing breast milk for your child. You really do with this and every drop is precious.

Manual Breast Milk Expression:

PREPARATION

Wash your hands thoroughly and then disinfect them. Get into an upright but comfortable position and place a drink within reach.

IMPLEMENTATION

The fingers are placed on the breast tissue about 2-3 cm behind the nipple in a C-grip. An imaginary line runs between your thumb and index finger directly over the nipple. Now lift the breast slightly and gently press the breast tissue towards the ribcage. Spread your fingers slightly. Make sure that the fingers do not slip over the tissue but remain in the same position and thus take the tissue with them. Then push your thumb and index finger forward towards the nipple with light pressure. Again, the fingers should not glide on the skin but take the tissue with them. You can feel a ball of tissue about the size of a golf ball (the mammary gland tissue). This is what should be massaged. **Attention:** Breast milk expression should not be painful!



The milk drops obtained can now be withdrawn with a sterile, small syringe. In the beginning it can be helpful if your partner or the nursing staff assist you with this.

Loosen the grip to allow milk to flow in. To express milk from all areas of the breast, rotate the hand around the areola using this technique. Once you have expressed the milk of both breasts completely (approx. 5 to 10 minutes per breast), the syringe is closed with a matching cap. It is quite normal that only a few drops of milk can be obtained at the beginning. Even these few drops are important for your child.

If you cannot be with your child during expression, you can look at a photo or video of your child. This promotes the release of oxytocin, and thus the production of milk.

Short Video about Breast Milk Expression



Breast Milk Production:

If you are not able to breastfeed your child but would like to provide him/her with your breast milk:

WHAT TO DO?	Manual breast milk expression to collect the colostrum plus double-sided pumping	Double-sided pumping	Double-sided pumping
Optionally additionally	Breast massage before and/or during pumping	Breast massage before and/or during pumping	Manual breast milk expression plus double-sided pumping
How often?	Start within the first 6 hours after delivery at the latest, then 8-10 times within 24 hours, including 1-2 times at night	Up to 10 times within 24 hours, including 1-2 times at night	at least 6 times within 24 hours

Your breast milk production happens according to the principle of "supply and demand". So, if more is pumped out, more is produced. If less milk is expressed, less milk is produced.

COLOSTRUM

This is the milk that can already be produced during pregnancy (from the 16th week) and that you can obtain in the first two days of your child's life. In the beginning, it is often only a few but extremely valuable drops that can be obtained (1-20ml). Colostrum is rich in proteins and nutrients. Furthermore, it contains white blood cells that protect against infections. Colostrum is important to protect the colon and build up the immune system.

BREAST MILK

Refers to the transition milk and the mature breast milk. The amount of your breast milk **14 days** after delivery should be **500 ml in 24 hours**.

- prevents diseases
- strengthens the child's immune system
- promotes brain development

The transition from colostrum to mature breast milk occurs during the initial swelling of the mammary glands (**2-4 days after birth**). Your breasts will feel warmer and fuller, you may feel weak. It is important to keep pumping regularly now.



Cuddling with skin contact (naked breast and naked baby) on/at your breast is important for you and your baby. It calms both of you and promotes your milk production.



Hygienic Handling of Breast Milk:



PERSONAL HYGIENE

- Take a shower once every day
- Clean the breast with water, without soap
- Use a fresh towel every day to dry
- Change your nursing pads regularly and your bra daily
- Do not use care products containing paraffin



HAND HYGIENE BEFORE PUMPING

- Wash your hands thoroughly with liquid soap under running water for 20 seconds before each pumping/contact with breast pump/pump set and dry with a fresh towel or paper towel
- While being in the clinic, also disinfect your hands



CHECKING THE PUMPSET

- Visual inspection of the pump set for contamination before each pump session
- Replacement of the tubes in case of accumulation of milk or any other contamination in the tubes



CLEANING OF THE PUMP

After each pumping session, wipe down the pump's control panel with a suitable surface disinfectant



CLEANING THE PUMP SET: IN THE CLINIC

Use a new pump set every 24 hours and clean after each pumping session:

- Disassemble the pump set and rinse all parts under cold running water
- Clean the pump set with hot water and dishwashing detergent in a designated bowl and use a designated bottle brush
- Rinse the pump set parts with clear water
- Air dry on a fresh towel/paper towel
- Store the cleaned and dried pump set where it is protected from contamination

Use a new pump set for each pumping if cleaning or personal storage is problematic.



CLEANING THE PUMP SET: AT HOME

By hand it is the same as in the clinical setting. In the dishwasher, clean at 65 °C at least, put a small pump equipment in a closed basket or laundry bag, unload with washed hands, if necessary air-dry still damp parts on a paper towel or clean towel

Termal disinfection once a day:

- Boil it in water (3min) in a pot on the stove
- Do a steam sterilisation using an electric steam steriliser or a microwave oven
- If necessary, put air-dry parts that are still wet on a clean towel/paper towel
- Store the sterilised and dry pump set protected from contamination