

Perinatal Outreach Breastfeeding Newsletter

ISSUE 12

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Hand Expression & Colostrum Collection

By Kara Kaikini

Hello, breastfeeding champions. Well, 2020 is behind us and we have begun a new year! For some that may mean writing resolutions, intentions, or goals with hopes for smoother seas ahead and a year that is much more manageable.

For others, it may not feel any different at all. You're still caring for your families, your patients, your clients, and hopefully, yourselves. You're still working hard, doing the best you can to support the people you work with by encouraging them and educating them on how to be safe and healthy, and helping them meet their goals as parents.

Included in this newsletter is information about hand expression and prenatal colostrum collection. These are significant ways lactating parents can get their milk supply off to a healthy start, and prevent unwanted formula supplementation. You'll read about research related to prenatal colostrum collection, resources for you and parents you work with about hand expression, and a Provider Pearl sharing her practice of supporting expectant mothers with prenatal colostrum collection.

However you feel about 2021 so far, I hope you can take a moment to celebrate making it through a super challenging year that was 2020, and welcome the feeling of a fresh start to this one.



**Before I agree to 2021, I need
to see some terms & conditions.**



As always, please contact me anytime with any questions,

~Kara Kaikini, MS, IBCLC

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Prenatal Colostrum Collection

When reviewing recent literature about antenatal hand expression, I found these common themes:

- Benefits of prenatal/antenatal hand expression
 1. Increases maternal confidence in hand expression and her milk supply
 2. Colostrum is collected in advance of birth and is therefore available if/when baby needs extra milk than what he/she is able to receive from latching or latch attempts
 3. Shorter time from initiation to full establishment of milk supply
 - Research and practical considerations
 1. A recent randomized control trial¹ suggests antenatal milk expression for women with diabetes in pregnancy at low risk of complications is safe after 36 weeks gestation.
 2. Prenatal colostrum collection research has only been done using hands, not breast pumps, therefore using a breast pump is not recommended prenatally.
 3. If mothers are leaking colostrum, they may be able to simply collect it without actively expressing by wearing milk collection cups in their bras (ie. Milkies, Elvie Catch, Medela soft shells, Lacticups, etc.)
 4. Encourage mothers to contact their local IBCLC for a phone consult, or to schedule an in-person or telehealth appointment to learn more about prenatal hand expression. Here are some ideas of what could be covered in a consult, in addition to the basics of how to hand express:
 1. Any concerns specific to her. Is she at risk for preterm labor? Are there concerns about her cervix, placenta, or amniotic fluid?
 1. Any signs of concern to look out for (i.e. [preterm labor](#))
 2. Information about collection and storage of colostrum and supplies (ie. syringes, collection containers).
 3. Communication between the IBCLC and the mother's healthcare provider regarding potential risks and prenatal colostrum collection plan of care.
 - Patient education materials:
 - Here is some patient education from [Canada](#) and the [United Kingdom](#).
 - **Are there any prenatal hand expression materials you use?** Please [share!](#)
1. Forster DA, Moorhead AM, Jacobs SE, Davis PG, Walker SP, McEgan KM, Opie GF, Donath SM, Gold L, McNamara C, Aylward A, East C, Ford R, Amir LH. Advising women with diabetes in pregnancy to express breastmilk in late pregnancy (Diabetes and Antenatal Milk Expressing [DAME]): a multicentre, unblinded, randomised controlled trial. *Lancet*. 2017 Jun 3;389(10085):2204-2213. doi: 10.1016/S0140-6736(17)31373-9. PMID: 28589894.

References about prenatal hand expression from **Academy of Breastfeeding Medicine Hypoglycemia Protocol** (2014)
<https://www.bfmed.org/assets/DOCUMENTS/PROTOCOLS/1-hypoglycemia-protocol-english.pdf>

- [Cox SG. Expressing and storing colostrum antenatally for use in the newborn period. *Breastfeed Rev* 2006;14: 11–16.](#)
- [Chapman T, Pincombe J, Harris M. Antenatal breast expression: A critical review of the literature. *Midwifery* 2013;29:203–210.](#)
- [Chapman T, Pincombe J, Harris M, et al. Antenatal breast expression: Exploration and extent of teaching practices amongst International Board Certified Lactation Consultant midwives across Australia. *Women Birth* 2013; 26:41–48.](#)
- [Forster DA, McEgan K, Ford R, et al. Diabetes and antenatal milk expressing: A pilot project to inform the development of a randomised controlled trial. *Midwifery* 2011;27:209–214.](#)
- [Soltani H, Scott AM. Antenatal breast expression in women with diabetes: Outcomes from a retrospective cohort study. *Int Breastfeed J* 2012;7:18.](#)
- [Tozier, P.K. Colostrum Versus Formula Supplementation for Glucose Stabilization in Newborns of Diabetic Mothers. *Journal of Obstetric, Gynecologic & Neonatal Nursing*, Volume 42, Issue 6, 619 – 628](#)



Appendix A Video Stills



Figure A1. The lactation consultant discusses syringes and storage.



Figure A2. Close up of the colostrum collection during one of the demonstrations.



This [article](#) describes how use of a hand expression video was effective in educating women about prenatal hand expression, and increasing their confidence about the process. Images on the left are from the article and hand expression video.

O’Sullivan TA, Cooke J, McCafferty C, Giglia R. Online Video Instruction on Hand Expression of Colostrum in Pregnancy is an Effective Educational Tool. *Nutrients*. 2019; 11(4):883.



If you’re looking for a model prenatal hand expression policy for your hospital, **Maine Medical Center’s Family Birth Center** recently had their “*Prenatal Hand Expression of Breastmilk*” guideline approved. Consider this a resource for creating/adapting one for your own hospital. It is attached to the email that you received with this newsletter.

Note: this is a statement of MMC policy and not a recommendation for your use. If you choose to use, please adapt to your own facility’s needs and ensure all evidence within is current.

If you have any questions about this Guideline, please contact Sharon Economides at SEconomide@mmc.org.

RESOURCES & CONTINUING EDUCATION

Resources to Learn More

- [First Droplets website](#): Dr. Jane Morton and her Stanford team's resource with information about the ABC's of breastfeeding, including videos and information about hand expression
- [Kellymom.com](#) - excellent parent resource for hand expression info
- [Newborn Hypoglycemia Prevention webinar](#), Pamela Tozier, RN, IBCLC
 - Go right to 22 minutes in the presentation to learn about prenatal colostrum collection
- Mayo Clinic:
 - News story: [Mayo Clinic: Collecting Pre-Birth Colostrum to Boost Infant Health](#)
 - [Presentation \(pdf\) about Prenatal Breastmilk Expression](#)



Continuing Education Opportunities

1. [The Value of Prenatal Hand Expression of Colostrum](#)
 - Live presentation: February 16th 5pm EST
 - Included in [Main Conference Registration](#) (\$140)



The Value of Prenatal Hand Expression of Colostrum

Speaker: [Almereau Prollius](#), *MBChB, MMED (O&G), FCOG (SA), FRCSC*

Speaker: [Naida Hawkins](#), *RN BscN, IBCLC*

Presentation Type:

Duration: 60 Mins

Credits:

Abstract:

Exclusive breastfeeding for the first six months of life is currently recommended by numerous health authorities including the World Health Organization and UNICEF, and should be encouraged and supported prenatally, perinatally and postpartum. Despite these recommendations, the rate of sustained breastfeeding to six months of life remain low. Prenatal hand expression (PHE) is a method used to assist with colostrum collection beginning near term pregnancy. This technique is low-cost and easy to teach and learn. It has been shown to reduce problems with milk stasis, mastitis and breast engorgement by mobilizing colostrum and breastmilk. Learn more about how this technique can improve breastfeeding exclusivity and duration and how to implement it in your practice.



2. [First Touch, First Food, First Hour... in a mother's hands](#)

- Recorded (60min) presentation, part of a Lactation Lecture bundle (CE hours available)
- \$45

Watch Today!

[View Lecture](#)

Note: Currently only available through a bundled series of lectures

First Touch, First Food, First Hour ...in a mother's hands

by Jane A. Morton, MD; Adjunct Clinical Professor of Pediatrics

Duration: 60 Mins

Credits: 1 CERP, 1 L-CERP

Learning Format: Webinar

Handout: No

Origin: GOLD Learning

Abstract:

The risk of early termination of breastfeeding typically relate to complications with a) attachment, b) breastmilk production, or c) the caloric intake of the infant. Simply put, A, B and C. Could hand expression taught in Labor and Delivery to every mother reduce early termination and the health, financial and emotional morbidity associated with breastfeeding complications in both low and high risk infants? This presentation will examine this question, focusing on the purpose of teaching early hand expression, the available science and the practice of integrating this technique into first hour care.

Learning Objectives:

Objective 1: Discuss why first hour hand expression could provide mothers with a skill during a time sensitive period to potentially prevent complications which lead to early termination of breastfeeding.

Objective 2: Discuss the salient science demonstrating the time sensitive nature of preventing complications with A, B and C and the supportive science behind hand expression of colostrum.

Objective 3: Discuss how hand expression could be encouraged as a useful and natural part of first hour breastfeeding.

COMING UP: Prenatal Breastfeeding Education Webinar



Perinatal Outreach Presents 2021 Webinar Series

Prenatal Breastfeeding Education
1st Wednesday of every odd month

March 3 , 2021 12:00-1:00pm
**Can I use Marijuana While I'm
Breastfeeding**

Learning Outcomes:

1. Identify the current data related to marijuana use in Maine.
2. Explain the recommendations for marijuana use in the perinatal period.
3. Demonstrate ways to discuss and educate new and expectant parents about breastfeeding and marijuana use.

Presenter: Kara Kaikini, MS, IBCLC

[Click here to register](#)



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1.0 Contact Hours



Joint Provider



PROVIDER PEARL

Angela Pizzo Tillotson, FNP-BC

Diabetes Specialist

InterMed, P.A., Portland, ME



Kara: Thank you for sharing more about your work with new and expectant mothers. Can you tell us more about your role at InterMed?

Angela Tillotson: I am a Family Nurse Practitioner functioning as one of two Diabetes Specialists at InterMed; I have been working in the field of diabetes/endocrinology for 16 years. A large part of my role at InterMed is to see our Women's Health patients who have been diagnosed with gestational diabetes (GDM). I instruct on home blood glucose monitoring, carb counting, meal planning, and initiate/teach insulin if needed.

Kara: How do you work with breastfeeding women?

Angela: I work with patients prenatally which is a great time to provide education on breastfeeding. Part of my initial visit with patients includes education on the benefits of breastfeeding and the option of the collection of colostrum prenatally. At a follow up visit I go more in depth about the option of colostrum collection; this collection can take place at 37-38 weeks gestation. Colostrum is protein-rich and nutrient-dense, and is the perfect treatment if the baby experienced hypoglycemia at birth, which can be a complication of GDM. I provide the lactation line number and resources and patients are able to set up a visit at 37-38 weeks gestation with the lactation nurse for help with this hand expression; patients collect, freeze, then bring in the colostrum at the time of delivery to have on hand.

Kara: What advice would you give other practices who are interested in implementing a prenatal support like this?

Angela: Talk to your lactation nurses to start the collaboration! They are fantastic resources but many times do not have the opportunity to meet with women until the postpartum period. You can provide their contact information to your patients, encouraging these connections prior to delivery. My patients report feeling more confident meeting with the lactation team prenatally and having the opportunity to store colostrum to bring to their delivery.

If you have any questions, requests for specific education, or something you'd like to include in a future newsletter, please contact us!

Also, if you received this email from a colleague and would like to be added to the distribution list, please contact Kara.

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