



Expressing breastmilk for your baby

Patient information

Reasons to express

These may include:

- Separation from your baby
- Supplementing a preterm, small or vulnerable baby who requires additional breastmilk after a breastfeed
- Establishing and supporting your breastmilk supply if you have difficulties attaching your baby to the breast
- Nipple pain and trauma
- Management of localised areas of inflammation, engorgement, or mastitis

Why is it important?

Early, frequent and effective removal of milk from the breast is important to stimulate and establish a breastmilk supply that meets your baby's future needs.

When should I express?

If you are separated from your baby, your first expression should be within the first hour after birth. Delayed stimulation of the breasts could impact your breastmilk supply.

A newborn baby will feed 8 to 12 times a day, so aim to express every 3 hours and wake to express overnight.

In the early days, hand express to collect colostrum in a small syringe or cup that you can feed to your baby.

After a few minutes of hand expressing, begin to use a hospital-grade electric breast pump. This mimics the action of a healthy term baby and will help build your supply.



Your midwife or lactation consultant can advise on the appropriate pump and equipment to use (eg: flange size).

Expressing can also be beneficial if you are experiencing difficulties attaching your baby to the breast. Softening the nipple/areola before the breastfeed, for example, may help your baby to attach to the breast.

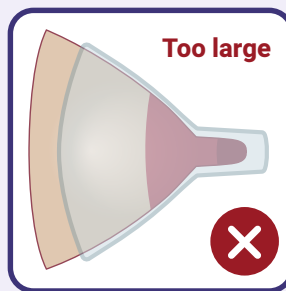
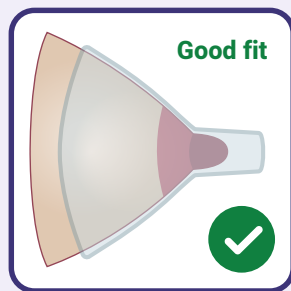
Treatment of nipple trauma often requires expressing. This will provide your breasts with stimulation to build and support your supply and additional breastmilk to feed baby.

Expressing post feed to soften the breasts is important when treating engorgement or mastitis. (Scan the QR code on the next page for additional resources.)



Correct fitting of breast flanges

Centre your nipple in the middle of the flange, then turn the pump on to check:
Is the nipple moving freely with no/minimal areola being drawn into the tunnel?



Make sure it's not too large, as seen by the space around the nipple and the areola being drawn in. A midwife or lactation consultant can assist with correct sizing.

How to express

In the first few days, you will need to express both breasts for 10 to 15 minutes with a double pump to stimulate and build your breastmilk supply.

When your milk supply increases (comes in) express until your breasts feel soft, comfortable, lump free, and the milk flow has slowed.

Adjust the pump pressure to suit you; it should be comfortable and stimulate a letdown/flow of breastmilk. If it is too high and uncomfortable, there is the potential to cause nipple trauma. Flange size is also important.

The amount of milk you express may change throughout the day and it is normal for one breast to produce more milk than the other.

Cleaning the equipment

You will need to clean the equipment after each expression. Separate all the pieces (apart from the tubing), rinse in cold water then wash in hot, soapy water, rinse and air dry. Store in a clean and dry container. Your midwife or lactation consultant can advise you further if required.

Support and follow-up

Support to transition to exclusive breastfeeding is available. This is particularly important if your baby was in the Neonatal Intensive Care Unit or vulnerable at birth, as the process may take several weeks.

For individual lactation support, contact the Breastfeeding Centre of WA on (08) 6458 1844, Monday to Friday, 8am to 4pm.



For more information about breastfeeding, scan the QR code.



The information provided is for information purposes only. If you are a patient using this publication, you should seek assistance from a healthcare professional when interpreting these materials and applying them to your individual circumstances.



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