

Making more breast milk

Parent information

The most likely reason for not making plenty of milk is that colostrum/milk is not removed from breasts frequently enough. As well as treating any underlying cause of low milk supply, the most important strategies to make more breast milk focus on the frequent and efficient removal of milk from the breasts: **SUPPLY = DEMAND!**

When your baby isn't feeding from your breasts

If your baby is not feeding directly from your breasts you will need to express frequently, right from birth. When you are expressing breast milk you are trying to mimic how a baby feeds at the breast:

- Aim to express at least 8-10 times in 24 hours; it does not need to be at regular times, so you can fit them in around your daily activities.
- Use breast massage and hand expressing (refer to "Hand Expressing" poster/information sheet) to help stimulate milk flow.
- Hand expressing is often more effective to start with, especially when volumes of colostrum are small.
- Try a breast pump when your milk is flowing more freely.
- If you are pumping only, a hospital grade pump may be more effective.
- If using a pump, increase the vacuum to a comfortable level.
- Use breast compressions while pumping (See over the page).
- Switch between sides when the flow of milk slows and try to always pump both breasts twice.
- Try using a "double" kit to express both breasts at the same time.
- Only express for 30 minutes in total (i.e., a total of 15 minutes on each breast at each session).
- Finish with hand expressing for a few minutes.
- Keep a record/log of how much you express each time and add up the total at the end of each day.
- You can have one 5-hour gap between expressions overnight, but make sure you fit in the 8-10 expressions during the day.

If after 3 days of putting these strategies in place you do not see an increase in your supply, please seek further follow up with your midwife or lactation consultant.

When your baby is breastfeeding

When you are feeding baby at the breast and you feel that baby is not getting enough, try the following:

- Hold baby skin-to-skin at the breast, baby in a nappy on your bare chest & a warm wrap over you both
- Make sure that baby is latched well
- Look for baby sucking and swallowing
- Watch for those early feeding cues (see the "Baby Feeding Cues" Poster/information sheet), and allow baby to feed often, every 2-3 hours (at least 8-10 feeds in a day)
- Offer baby each breast twice each feed (i.e. offer the first breast, then the second side, then repeat)
- Gently compress the breast (see the point "Use breast compressions" over page) as baby's sucking efforts slow
- Switch breasts when baby is no longer swallowing, even with compressions
- Express approximately 1 hour after the breastfeed so you can give baby your own milk, if needed



Consumers contributed
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- Observe and record the amount and colour of baby's wet and dirty nappies (refer to the '[Child Health Information Your guide to the first 12 months](#)').

If after 2 days of putting these strategies in place you are still concerned your baby is not getting enough milk, please seek follow up with your midwife, child health nurse or lactation consultant.

How do I do breast compressions?



You can do breast compressions by “cupping” your breast, placing your thumb on one side and fingers on the other side of your breast (see picture), then firmly compress for a number of seconds (count to “5”), release and compress again. Keep repeating this process to increase milk flow and milk removal.

What is a Milk Ejection Reflex (MER) and what makes it happen?

A Milk Ejection Reflex (MER) or “let down” occurs when a hormone called oxytocin is released, which causes the release of milk into the ducts. A MER helps the flow of milk, and it leads to baby having a slower sucking pattern when feeding or a “spray” of milk when expressing.

You can stimulate a MER by hand expressing and massaging your breasts, sitting close to baby, holding baby skin-to-skin, trying relaxation techniques, and feeding or expressing in a quiet, relaxed environment. If baby is not with you it is possible to stimulate a MER by having a photo/video of baby nearby or smell an item of baby's clothing.

To consider when your milk supply isn't meeting your baby needs

- Try to rest between baby's feeds and eat well – ask your family and friends to help you out
- Alternative therapies, such as massage and acupuncture, can be helpful for some mothers
- Prescription medications from your doctor may help but are not the first option to try to make more milk - try the steps suggested previously before considering these medicines
- Herbal remedies are not recommended, especially if you have a sick or premature baby, Herbal remedies are drugs, so can interact with any medications you are taking, can pass to the baby through your milk and there is limited evidence about their safety when breastfeeding/expressing. If you choose to use them, please discuss this with your baby's doctor first.

For more information

- Queensland Health booklet '[Child Health Information Your guide to the first 12 months](#)'
- Queensland Health Breastfeeding website: <http://www.health.qld.gov.au/breastfeeding/>
- The Australian Breastfeeding Association's Helpline 1800 mum 2 mum (1800 686 268) or <https://www.breastfeeding.asn.au/>

Any further questions?

This fact sheet provides general information. If you have any questions about your baby's care, we encourage you speak to the midwives, nurses and medical staff.