

# How to Build a Full Milk Supply with a Breast Pump

By Nancy Mobrbacher, IBCLC, Ameda Products

Co-author of *Breastfeeding Made Simple* and *The Breastfeeding Answer Book*

Begin pumping by keeping your goal in mind: To pump a full milk supply—25-35 ounces (750-1050 ml) per day—by Day 7-10. Right after birth, your body is primed and ready to make milk. Don't wait too long. If you do, it may be much harder to reach this goal.

## FROM BIRTH TO DAY 4

- If you can, start pumping within the first six hours after birth.
- As soon as possible, pump at least 8-10 times every 24 hours. This is how many times each day your baby would be breastfeeding. In general, the more times each day you pump, the more milk you make. The reverse is true, too. The fewer times you pump, the less milk you make.
- If your baby is not breastfeeding, use a hospital-grade rental pump.
- Plan to double pump (both breasts at once). This saves time and may boost milk supply faster.
- Until your milk “comes in” on Day 3 or 4, pump at least 10-15 minutes per breast.
- Pump at least once during the night. Don't go longer than about 5 hours between pumpings. (Full breasts make milk slower.)
- Expect to pump just a little milk at first. Even drops are important to your baby.
- Pumping often now “puts in your order” for more milk. This tells your body to make more.

## FROM DAY 4 TO A FULL SUPPLY

When your milk increases from drops to ounces about Day 4, make these changes:

- Pump longer—two minutes after the last drop of milk or 20-30 minutes, whichever comes first. (Drained breasts make milk faster.)
- Focus on the NUMBER of pumpings each day, not the time between pumpings (that is, every 2 or 3 hours)



After birth, if you find yourself faced with a pump rather than your nursing baby, you may feel sad. It may help you to think of the pump as a useful tool to help you get ready for breastfeeding.

Many moms find it simpler to focus on their daily total. It is this daily total that seems to be most important to your milk supply. Rather than trying to pump at the same set times each day, instead think: “How can I fit in my 10 or so pumpings?” If you find you can't pump during one part of the day, pump every hour when you can.

## MAINTAINING A FULL MILK SUPPLY

When you reach 25-35 ounces (750-1050 ml) per day, you've met your goal. Most mothers can then pump fewer times each day and keep up their supply. What then?

- Try cutting back to 5-7 pumpings each day. If your supply goes down, see the next section.
- Try sleeping all night. With a full supply, many pumping mothers pump right before bed and then first thing in the morning. If you can do this without too much breast fullness, go ahead.
- Pump for a shorter time. For most mothers, 10-15 minutes of pumping is long enough.
- Once a week, add up the amount of milk you pump in a 24-hour period. Write it down and compare your totals each week. You'll know right away if your supply starts to drop.

## BOOSTING MILK SUPPLY

If you need to boost your milk supply, the sooner you work on it, the faster you'll see results. Here are some ideas to try:

- **Pump more:** 8-12 pumpings per day boosts milk supply for most mothers.
- **Pump longer:** until 2 minutes after the last drop of milk or 20-30 minutes, whichever comes first. (Drained breasts make milk faster.)
- **Check your pump flange fit** by reading "Getting a Good Flange Fit" under "Breast Pumping" on [ameda.com](http://ameda.com). Flange fit can change with time and pumping.
- **Use breast massage during pumping.** This may yield more milk.
- **Look into prescription medicines and over-the-counter preparations** that can boost supply. Consult with your physician and ask your lactation consultant to give information on these to your physician.

## MAKING THE MOVE TO BREASTFEEDING

Pumping for a non-breastfeeding baby brings many rewards. It feels great to see your baby grow and thrive on your milk. But it is not easy. Some experts recommend mother's milk for at least a baby's first year. Even so, because of the extra time involved, many mothers find it hard to make full pumping work long-term.

But there are options. Even if you've been pumping for weeks or months, you can still make the move to breastfeeding. But don't expect to do it alone. Most mothers need help to make this change. Getting help is well worth it for both you and your baby.

For many mothers, the best person to turn to for help is a board-certified lactation consultant (IBCLC). Part of her job is to know tricks to make breastfeeding work. To find one near you, go to [www.ilca.org](http://www.ilca.org).

What can you expect at a meeting with a lactation consultant? She may show you how to help your baby latch on in a new way. Sometimes tools can help. Most good lactation consultants have access to the tools you might need.



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## WEANING FROM THE PUMP

If you decide not to move to breastfeeding and wean from the pump instead, there are still things to know. First, the most comfortable weaning is a gradual one. Here are some ways to make this happen:

- **Drop one daily pumping.** Give your body two to three days to adjust. Then drop another daily pumping. Leave your first and last daily pumpings until the end. Repeat until you're fully weaned from the pump.
- **Keep the number of pumpings the same, but pump for a shorter time at each pumping.** If you were getting 4 ounces (120 ml) at each pumping, stop after 3 ounces (90 ml). Give your body two to three days to adjust and then do it again. Repeat until you no longer feel the need to pump.

**Note:** While weaning, if your breasts ever feel full, pump just long enough to make yourself comfortable. Don't pump fully. Letting your breasts stay full puts you at risk for pain and infection.

When you are fully weaned from the pump and are done pumping for good, give yourself a big pat on the back. Always remember how lucky your baby is that you were willing to work so hard to give him the best!

*This is general information and does not replace the advice of your healthcare provider. If you have a problem you cannot solve quickly, seek help right away.*

*Every baby is different, and your baby may not be average. If in doubt, contact your physician or other healthcare provider.*