



Milking the benefits

A breast pump can help a mother when she is away from her baby. **Joyce Teo** looks at the different types available

Before Mrs W. T. Lim returned to work after her maternity leave, she bought a breast pump as she wanted to continue breastfeeding her baby. She chose a single manual pump from one of the popular brands in the market for less than \$100.

However, using it was too painful as the tunnel of the breast shield was too small for either of her nipples, she said.

In the end, she had to pay a lot more. She shelled out \$420 for an electric double pump from a top-end brand from an online shop.

This pump had suction cups in different sizes and she was able to pick one that fit her.

"The double cups also cut pumping time by half, which was great as my boy later refused to nurse and I ended up pumping more frequently than I had intended to," she said.

A breast pump allows a mother to express milk when she is away from her baby, so she can keep up her milk supply and continue breastfeeding.

Ms Lim Peng Im, lactation consultant at the department of obstetrics & gynaecology at National University Hospital Women's Centre, said: "Using a pump is useful when the baby is away from the mother or if the baby does not latch and suckle effectively on the breast."

Mothers should invest in a good quality pump, as the quality of a breast pump does affect the success rate of breastfeeding, experts said.

Good quality pumps can help draw milk more effectively, by acting like a baby suckling directly on the breasts, said Mrs Wong Boh Boi, assistant director (clinical) and senior lactation consultant at Thomson ParentCraft Centre at Thomson Medical Centre.

If the pump is of poor quality, it will be ineffective in drawing milk out from the mother and it will take too much time to pump, she said.

If milk is not being expressed sufficiently, the ducts can become blocked and this, in turn, may lead to an infection, she added.

So, while buying and using a breast pump may seem to be a simple affair, it pays to do a little homework.

ELECTRIC OR MANUAL

Breast pumps fall into two categories: electric and manual. In either category, they can be in the form of a single pump or a double pump that allows the mother to pump both breasts at the same time.

Mothers should consider if they are going to use the pump often or infrequently.

Typically, the pumping sessions will replace the nursing sessions. If mothers spend long hours at work, they may need to use the pump two to three times a day, so it may be wise to invest in an electric breast pump.

It usually works faster than a manual pump, unless they have strong hands. On average, a session with a good electric pump can last about 10 to 15 minutes or so, or up to about half an hour if each breast is pumped separately.

Mrs Wong said: "Generally, electric dual pumps



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If a baby does not latch and suckle effectively on the breast, using a breast pump may be an option.



An electric pump (above) works faster than a manual one.

while a single electric pump costs about \$200 to \$300 and an electric double pump can cost from \$420 to \$800 or more.

If mothers will not be using the pump very often, they may wish to buy a manual breast pump, especially if they have a budget to keep to.

However, they have to be prepared to spend more time pumping.

They should also consider if they will be nursing their babies directly.

Mrs Wong said: "Electric pumps are effective in stimulating milk production if the mother is not nursing her baby directly, while manual pumps are useful for a mother who has already established lactation and may not want to spend on a costlier breast pump."

Generally, electric pumps are easier to use than manual ones as they do not require much effort.

Unless mothers are watching their wallets or want to use the pump only occasionally, it is a good idea to go for an electric one.

GO FOR QUALITY

In general, check that the pump is made of material that is free of bisphenol A (BPA). BPA is an industrial chemical that is found in

are more efficient and usually preferred by working mothers. However, they are more expensive than manual ones."

Depending on the brand, a manual pump costs about \$50 to \$100,

polycarbonate plastic. It has been shown to be potentially harmful to human health.

Also, consider the size and the fit of the pump, and try it if possible. A pump which does not fit your body type may be painful to use.

Thomson ParentCraft Centre, for instance, allows mothers to test the various breast pumps there to see which one they like.

"The breast pump should fit well without causing any friction on the areola and nipples," said Mrs Wong.

Look out for whether it has adjustable suction levels and mimics a baby's suckling pattern for comfort and effectiveness, she said.

Ms Lim said: "Most electric pumps give the mother flexibility to control the degree of suction and comes with different-sized pump parts to fit her breasts and nipples."

Electric breast pumps can be noisy when they are being used. If a mother plans to use the pump in her office, she will need a quieter model.

As it needs a power source, make sure there is a place with a socket to use it. Otherwise, choose a pump that comes with a battery pack.

Other factors to consider when picking a breast pump, both electric and manual, include whether the pump is easy to assemble and user-friendly, said Mrs Wong.

Ms Lim said: "Inexpensive pumps tend to be simpler in terms of their features and, therefore, may not be suitable for long-term or frequent pumping."

"Investing in a durable pump that enables the mother to express effectively will naturally help increase milk production."

However, an expensive pump does not ensure success in expressing milk, if it is not used properly or it is not suited for the mother's needs, she said.

Use breast pump after establishing milk supply

While the breast pump is an essential tool for breastfeeding mothers when they are away from their babies, mothers should generally avoid using the breast pump in the first few weeks.

Dr Mythili Pandi, president of the Breastfeeding Mothers' Support Group in Singapore, said: "Getting a good flow of milk is very hard with pumps. Mothers get discouraged and often give up breastfeeding and resort to formula milk."

The pump should be used only after the mother has established her milk supply. Nothing beats the baby's suckle when it comes to stimulating the mother's milk production.

However, in instances where this is not possible, say, when the baby cannot latch and suckle effectively on the breast, a pump will come in handy.

The most important breastfeeding skill to learn is correctly latching the baby on to the breast to establish milk flow, experts said.

To ensure a correct latch, tuck the baby close to the mother and when he opens his mouth wide, quickly move him onto the breast, said Ms Wendy Deshpande, a freelance lactation consultant.

She said: "If the latch is right, it will not hurt. And look out for signs that the baby is getting enough milk, such as wet and dirty nappies."

Dr Pandi, who is also a general practitioner, added that a correct latch "helps the baby to develop good eyesight and jaw muscles for good speech development and promotes a close bond between mother and child".

New mothers often fret that they do not have enough milk to continue breastfeeding.

Dr Yvonne Ng, consultant at the department of neonatology at the National University Hospital, said: "Some parents have the misconception that breast milk is produced instantly after birth in large quantities and so misconstrue colostrum (a mother's pre-milk liquid) as inadequate milk."

Ms Deshpande said: "Only very few mothers do not have enough milk for their babies. The more you breastfeed your baby, the more milk you will produce. It's good for mothers to read up on breastfeeding beforehand, so that they know what to expect. For instance, it is normal for newborn babies to feed 10 to 12 times a day."

Dr Pandi said: "The important thing to let all mothers know is the principle: supply equals demand. The more the baby is allowed to latch on, the more milk is made. It's the natural response of the mother's body."

"Mothers have to persist and believe in themselves. Only a small number of medical conditions make it difficult for mothers to breastfeed."

Dr Ng said that, in some cases, a true delay of milk production can happen.

It is usually due to a combination of factors, including pre-existing medical problems in the mother, post-delivery pain and discomfort, inadequate stimulation from poor latching, a pre-term baby or a baby who does not suckle well, a mother who is not prepared to breastfeed exclusively and even social or emotional factors.

"When there is a deviation from a normal pattern of breastfeeding, trained staff will advise mothers to express their milk or use supplemental formula feeds," she said.

The staff educate parents on how to recognise effective breastfeeding and seek help if they suspect their milk supply is inadequate.

Dr Pandi said: "Right now, many mothers don't know where to go for help. The common problems that will come with breastfeeding, such as engorgement and sore nipples, can all be solved with the right support."

The Breastfeeding Mothers' Support Group in Singapore provides breastfeeding workshops quarterly and antenatal education on breastfeeding.

It also has a helpline manned by volunteers with breastfeeding experience and a database of lactation consultants to whom it can refer mothers who need additional help.

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