



Prenatal Milk Expression Talking Points for WIC Staff

1. What is prenatal milk expression?

- a. Defined as the removal of colostrum (via hand expression, pump or other extraction device) during pregnancy.
 - i. May be referred to as antenatal breast milk expression, prenatal colostrum collection, or prenatal colostrum harvesting

2. Is prenatal milk expression helpful, harmful or both?

- a. There is a lack of high-quality evidence on the effects of prenatal milk expression on maternal and newborn outcomes.
- b. It may increase the risk of parental anxiety, over (or under) production, and uterine contractions (and therefore, may not be recommended before 36-37 weeks). (1)
- c. It may allow clients to get comfortable with their own body, mammary tissue, hand expression and breast massage prior to delivery.

3. What can I do to support WIC clients who have expressed interest in prenatal milk expression?

- a. Listen to their questions, concerns or comments.
- b. Ask open-ended questions
 - i. What have you heard about prenatal milk expression?
 - ii. Tell me more about why you are interested in prenatal milk expression.
 - iii. How do you feel about prenatal milk expression?
- c. Validate and affirm their questions, concerns or comments.
- d. Educate (see guidance below)

4. **Guidance:** Based on current evidence, there are no established guidelines to safely say when or how prenatal milk expression should be done. (1)

- a. Refer clients who are interested in prenatal milk expression to their healthcare provider to discuss the risks and benefits according to their medical history, such as diabetes, hypoparathyroidism or cervical/pelvic concerns.
- b. Educate clients prenatally about breast/chestfeeding according to your [scope of practice](#) and clients' issues and concerns. This may include normal breast/chest changes, colostrum, how milk is made, hand expression, normal milk production, skin to skin, etc.
- c. Encourage clients to attend local agency infant feeding classes and support groups. Provide contact information for lactation support so clients know where to find evidence-based information.
- d. If a client has received clearance from their healthcare provider (including when to start and how often) the following best practices are encouraged:
 - i. Peer Counselors should consult with the agency's IBCLC to discuss (each) individual case.
 - ii. After IBCLC consult, Peer Counselors may then educate the client on proper [hand expression](#) technique and [milk storage](#) guidelines (referring back to the IBCLC as needed).
 - iii. Document in the MI-WIC system that the client received clearance from their healthcare provider, the circumstances of why prenatal milk expression was recommended, the education that was provided and referrals made.

Source:

1. Foudil-Bey, I., Murphy, M.S.Q., Dunn, S. *et al.* Evaluating antenatal breastmilk expression outcomes: a scoping review. *Int Breastfeed J* 16, 25 (2021). <https://doi.org/10.1186/s13006-021-00371-7>.