Lactation Services

Breast milk is the ideal nutrition for all babies and fosters optimal infant health, especially for the most preterm babies. Often referred to as "liquid gold," it contains a unique combination of nutrients that are specific to the baby's growth and development. The unique substances and living cells in breast milk help to fight off infection, build up the baby's immune system and decrease their risk of later allergies. Breast milk is the equivalent to a wonderful medicine.

At Brigham and Women's Hospital (BWH) we have a unique lactation team consisting of lactation consultants from our Newborn Intensive Care Unit (NICU), who are international board-certified lactation consultants, as well as NICU nurses at BWH. They bring many years of experience, not only in lactation, but also in caring for infants in the NICU.

Because we are committed to ensuring that every baby has access to the best nutrition available, we strongly encourage all mothers to breast feed or provide pumped breast milk for their babies.

Even though most NICU babies aren't ready to feed right away, we work closely with every mother to ensure successful breastfeeding—in the NICU and once your baby is at home. We take several approaches to optimize a mother's chances of successfully breastfeeding.

- The lactation team shows mothers how to begin pumping breast milk and storing it until their babies are ready to feed.
- Once the baby is able to start breastfeeding, skilled bedside nurses as well as lactation support consultants will assist baby and mother with positioning and latching onto the breast.
- Upon discharge, lactation consultants and the baby's nursing team will help each mother to create a plan for breastfeeding at home.
- The team also provides a list of lactation resources to support ongoing breastfeeding.





Breastfeeding Challenges

Our lactation consultants specialize in identifying breastfeeding issues and providing optimal outcomes for both mother and baby.

For the mother: Breastfeeding mothers sometimes encounter challenges such as low milk supply, over supply, mastitis, blocked milk ducts, breast engorgement, nipple pain and breast infections that can interfere with lactation.

For the baby: While in the NICU, infants may also have challenges when it comes to learning to coordinate all aspects of breastfeeding. These challenges vary from baby to baby and can be complicated by certain medical conditions.

Our consultants work in collaboration with the nurses at the bedside caring for your baby to ensure all the breastfeeding needs of you and your baby are met. Your baby's nurse will alert you to any feeding or milk supply issues and can assist a mother with putting the baby to breast and will initiate a lactation consult if help is needed.

Human Donor Milk

The Human Donor Milk program is for extremely premature and/or very low birth weight infants whose parents request that the baby be fed with pasteurized human donor milk until his or her mother has established a good breast milk supply. This is a short-term substitute for formula if a mother's own milk is delayed or low in volume.

The best nutrition for any infant is his or her mother's breast milk and—until a regular supply of mother's milk is in the mother's breast (3-5 days after delivery)—pasteurized human donor milk can be very helpful and better tolerated by the baby than formula. Research has shown that premature infants who receive all or mostly breast milk during their hospitalization may have fewer complications, better health outcomes, and even a decreased length of stay in the NICU.

When a mother has difficulty with milk production in the first few days after giving birth, she is given the option to supplement with donor milk for a short period of time until her milk comes in. All of our donor milk comes from Mother's Milk Bank Northeast in Newton, MA. All milk donors undergo an extensive screening process. The donated milk is pasteurized and monitored to ensure its safety.



