

## INFORMATION FOR PATIENTS

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# Donor human milk



### What is donor milk?

Donor human milk is recommended by the World Health Organisation (WHO) when a woman/birthing parent's own breast/chest milk may not be available for babies that are born early or with a low birth weight before using a preterm formula milk.

Women/birthing parents who have chosen to donate their own breast/chest milk often have a surplus amount which is then screened and pasteurised by NHS milk banks.

Donors are screened prior to donating their milk (to ensure that it is safe) by having blood tests. Not all women/birthing parents can donate their milk. Their milk is also screened and tested for bacterial growth prior to being heat treated (pasteurised) by the milk banks. Any donor milk that is sent to us will have identity batch donation numbers, bottle numbers and expiry dates, which are all checked by two healthcare professionals before being given to babies.

Donor milk may be premature (P) and mature (M). This means that the donor expressed this within the first four weeks if their baby was born before 37 weeks gestation (premature) or after two weeks (mature) and is mature if the baby was born after 37 weeks or after four weeks of their baby being born.

Premature milk naturally has more protein content than mature milk. Mature milk may therefore require Human Milk Fortifier (HMF) adding in by the nursing team, with your consent. This ensures your baby receives optimum protein for brain and bone growth and development.

### Why would my baby need donor milk?

Your baby may need this for a short period whilst you are establishing your own milk production within the first few days or weeks. As your own milk increases, less donor milk can be given to your baby.

Your baby will need to fit criteria to be eligible for donor human milk. The main criteria are:

- Born less than 32 week gestation.
- Born less than 1.5kg.
- Born between 32 and 34 week gestation where you wish to exclusively breast/chest feed.

The medical and nursing team will discuss this with you.

### **What are the benefits of donor human milk?**

Donor milk has similar properties to your own milk:

- Increased enteral tolerance compared to formula milk.
- Reduced incidence of infections, including bowel infections such as necrotising enterocolitis (NEC).
- Anti-infective properties.

### **What are the differences between a woman's own milk and donor human milk?**

Donor milk goes through a process where it is expressed, frozen, transported, pasteurised, re-frozen and re-transported. It will go through up to five container changes and two freeze-thaw cycles in this process. Due to this process, the macronutrients will be affected compared to a woman/birthing parent's own fresh or frozen milk, as well as the container changes will affect the fat (lipid) content of the donor milk.

Your own milk has the optimal benefits for you baby, donor milk is used to 'bridge the gap' until you have established your own production. Donor milk does not replace your own milk as this is designed for your baby. Your own milk contains live components such as antibodies that help fight infection, which are lost within the pasteurisation process in donor milk, or the donor may have an older baby where the components will differ.

You can hand express or express by pump ideally within the first one to two hours of your baby being born. Expressing eight to ten times in 24 hours, with at least once overnight will encourage your own milk production. It is best to be close to your baby or use mementos (bonding squares, clothing, videos, photos) that will help you release the happy hormone (oxytocin) that will help your milk production. There is an expressing log leaflet with more information available in your admission pack. Please ask a member of the team for support.

### **How long can donor milk be used for?**

Donor milk can be used on a temporary basis for up to three weeks (21 days) if required, and then the nursing and medical staff will discuss options for weaning onto formula milk or stopping donor milk with your consent. If your milk production increases, donor milk would naturally decrease or stop.

Your colostrum (first milk) is the preferred milk to give to your baby in the first few days as this is rich in nutrients and antibody factors. This is usually in small amounts designed for your baby and can be given as mouthcare for your baby. We can mix donor human milk with your own milk as you express.

### **What safety checks are completed by the neonatal team?**

Donor milk paperwork and traceability is currently kept by the Trust for 30 years. This will include your baby's details (name, date of birth, NHS number) and the batches of donor milk given to your baby. These may be shared securely with the Milk Bank if required.

Each batch number is identified by the Milk Bank, along with bottle numbers and expiry dates. Donor milk is pasteurised, screened, and is processed within 12 weeks of the earliest date of expression with a six month expiry date from the earliest date of expression.

Donor milk will be checked by two healthcare professionals prior to being given to your baby.

Paperwork is completed which ensures traceability from the batch numbers and the babies that are receiving donor milk. Your baby will have paperwork within their medical notes which will show which batch and bottle numbers were used, what date and time, as well as the volume given per feed.

### **Further sources of information**

NHS Choices: [www.nhs.uk/conditions](http://www.nhs.uk/conditions)

Our website: [www.sfh-tr.nhs.uk](http://www.sfh-tr.nhs.uk)

Chester Milk Bank: [www.milkbankatchester.org.uk](http://www.milkbankatchester.org.uk)

### **Patient Experience Team (PET)**

PET is available to help with any of your compliments, concerns, or complaints, and will ensure a prompt and efficient service.

**King's Mill Hospital:** 01623 672222

**Newark Hospital:** 01636 685692

**Email:** [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net)

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net).

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