



## Donor/Human Milk for Your Baby

Whānau/Family Information – Human Milk for Our Babies

Donor milk is **not** a replacement for parents' own milk. Donor milk is meant to provide a bridge or support in a nutritional emergency or if a medical need is established.

## What is a donor milk bank?

The Neonatal Unit has a Human Milk Bank. This is a facility that accepts donated breastmilk from healthy breastfeeding mothers who have met strict screening requirements. Donor milk is pasteurised (heat-treated) and tested for bacteria and viruses. The heat treatment makes the milk safe for vulnerable babies. Pasteurised milk is frozen as soon as possible to preserve the nutritive content. Pasteurised milk is only dispensed to babies that meet specified criteria in the Neonatal Unit, Maternity Unit, other wards or hospitals.

The heat-treatment/pasteurisation process has some impact on the nutritional quality and anti-infective properties of breast milk. However, 50-95% of the goodness of breast milk is preserved.

Pasteurised donor milk is **only** given to your baby with your consent.

A parent's own milk is best. Parent's own milk has a unique nutritional profile and bioactive matrix and will be prioritised above pasteurised donor milk. On the Maternity Unit/ward, the use of pasteurised donor milk will be reviewed by the health team every day. In the Neonatal Unit, using pasteurised donor milk is reviewed at 7 days. Each time you pump milk, please record how much milk is expressed. You may use a mobile/web-based application or staff can provide you with an expressing log. Early and frequent expressing (at least 8 times in 24 hours with once overnight) is essential and a crucial factor in establishing milk production. In addition, daily and prolonged skin-to-skin care (bare chest to bare chest) is essential to promote and maintain you milk production. The oxytocin hormone made with skin-to-skin contact turns off stress and helps milk making. Staff will discuss strategies for optimising your milk production.

## Why should I use donor milk?

Mother's own milk is the first choice for all babies. A human milk/breastmilk diet is particularly important for premature and critically ill babies as it digests easily and reduces the risk of certain complications.

Breastmilk contains more than 200 components that are useful for the growth and health of babies by:

- Assisting with building a healthy immune system.
- Acting to protect babies from infections.
- Containing easily digestible proteins.
- Reducing the risk of bowel problems in preterm infants.
- Contributing to nervous system and brain growth.

Research shows that maternal milk can be added to donor milk to tailor the milk with your very own microbiome. Ask the nurse.



The Human Milk Bank appreciates the support from mothers who donate their breastmilk and the Canterbury Neonatal Trust Fund

www.cdhb.health.nz/matatiki



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