Could you become a breast milk donor?

This leaflet is for breastfeeding women considering donating their surplus breast milk in the future to the Oxford Breast Milk Bank. It aims to inform them about donor breast milk, the screening process that takes place before being accepted as a donor and the practical aspects involved in being a donor.

What is the best milk for my baby?
A mother’s own milk is the best possible food for your baby.

What is donor breast milk?
Donor milk is another mother’s breast milk, donated free by mothers who already have plenty for their own baby.

Why do some babies require donor breast milk?
Sometimes mothers are unable to feed their new baby. This may be due to the mother being unwell, or because her milk production may not have started. Some mothers with premature or very sick babies may feel under too much pressure to produce enough milk.

Is donated breast milk safe?
All registered mothers at Oxford’s Breast Milk Bank have undergone lifestyle checks and screening tests at recruitment. The breast milk is tested for bacteria and pasteurised to 62.5 degrees Celsius for added protection. United Kingdom Association for Milk Banking (UKAMB) guidelines recommend that all donor milk is heat treated. Oxford Breast Milk Bank has strict criteria; therefore, only milk that falls into this category may be given to babies.

What screening takes place?
All donor mothers are screened for the following:

- **Lifestyle:** this is to ensure a mother does not:
  - Smoke, use nicotine patches or illegal drugs or is exposed to high levels of passive smoke.
  - Drink more than 1-2 units of alcohol once or twice per week.
  - Drink a large volume of drinks containing caffeine per day.
- **Previous medical history:** Oxford Milk Bank check that mothers do not have:
A chronic or acute medical condition that requires certain medication.
A family history of TB.
A history of having received growth hormone.
At increased risk of Creutzfeldt-Jakob disease (CJD).

Infections
Although you are screened during pregnancy for HIV, Hepatitis B and Syphilis, to be compliant with other breast milk banks around the UK and the NICE guidelines, Oxford Breast Milk Bank now requires, with your consent, a post-natal blood test for the following conditions, showing negative, before they can accept you as a donor.
You will be tested for:
- Human Immunodeficiency Virus (HIV)
- Hepatitis B and C
- Human T Cell Lymphotropic Virus (HTLV)
- Syphilis

HIV is a virus which causes Acquired Immunodeficiency Syndrome (AIDS), the name given to a collection of diseases which develop because the immune system breaks down. It is possible to carry the virus for many years without becoming ill.

Hepatitis B is a virus that infects the liver cells and can cause inflammation of the liver.
Hepatitis C is also a virus that infects the liver but shows no symptoms until significant damage is done.

HTLV is from a family of retroviruses that are known to cause cancer in the white blood cells called T-cell leukemia/lymphoma.

Syphilis is a sexually transmitted bacterial infection.
Negative results conclude that you are free from these viruses and infections at the time of registration.

Could you be a breast milk donor?
It is recommended that you establish your own baby’s feeding before donating your milk. Most donors decide within the first few months that they would like to donate their surplus milk to the Breast Milk Bank. For most mums, the law of supply and demand ensures they still produce plenty of milk for their own baby.

How is milk collected?
All donors to Oxford Breast Milk Bank need to have access to their own breast pump. The Milk Bank Administrator is able to supply sterile bottles, labels, luggage tags, freezer thermometer if needed and instructions. Each bottle needs to be clearly labelled with the donor’s name and the date the milk was expressed, and put into a freezer. When a ‘batch’ of milk is ready to be collected, the donor should put it into a clean plastic bag. This should
be tied and a luggage label attached with a sticker, identifying the donor. Any medication taken should also be added to the label. Contact the Milk Bank Administrator who will organise collection of your milk.

The amount of milk collected from each donor varies from woman to woman. They are also able to accept ‘one off’ donations as every drop really does count. Premature babies will often start with less than 20mls of milk per day.

**When should I be expressing?**

Mums are encouraged to get into a routine and express around the same time each day. Milk is made on demand, so if you are not routinely expressing this may affect the amount you are able to produce. Some mums prefer to express from one breast while their baby is feeding from the other. Most importantly, to help you maintain a good milk supply, you must ensure you eat healthily and get lots of rest.

**What should I do before I express?**

All milk sent to the Milk Bank must be tested for acceptable levels of germs. We all carry germs on our skin but babies who are born ill or premature cannot cope with germs as well as normal babies can. You are asked to pay particular attention to hand washing when collecting your breast milk so that as few germs as possible enter the milk you collect. The most common reason for having to ‘reject’ donated milk is the level of germs being too high before pasteurisation, so sterile bottles are provided to use.

If you do not have a daily bath or shower, wash your breasts with soap and water once a day.

Mums are asked to sterilise equipment before expressing. Ways of sterilising equipment include cold water sterilising solution, steam sterilising or boiling.

Wash your hands before expressing or taking expressing equipment out of the container.

**How do I store the milk?**

Pour your collected milk into a sterilised bottle and put it into the fridge straight away. You may add to this bottle throughout the day. Remember frozen milk expands so leave a space at the top of the bottle. Start new bottles when necessary. At the end of a 24 hour period please put the bottle(s) in the freezer even if you have only expressed a small amount.

All milk should remain frozen during storage at home.

Expressed milk for donation can be stored before transport to the milk bank for up to 3 months in a domestic freezer at -18 degrees Celsius or lower.

All donors are asked to fill in a freezer temperature sheet every day. A thermometer is provided if needed.

You are not committing yourself to donating any particular amount or for any length of time.
**How is my milk collected?**
Once you have a batch of frozen milk, you contact the Milk Bank to arrange a collection from your home at your convenience.

**What if I am unwell?**
All donors are asked to notify the Milk Bank if their health or circumstances change or if breast infections develops. Any medication will need discussing with them as it may be necessary to suspend or stop breast milk donation.

**Can I drink alcohol?**
Yes but in moderation. Please avoid drinking more that 1-2 units once or twice a week. Please leave as much time as possible between consumption and expressing.

**Contact information**
Please contact the Infant Feeding Team at the Royal Berkshire Hospital if you have any further questions
Telephone number: 0118 322 8314
email: infantfeedingteam@royalberkshire.nhs.uk

To register as a donor please contact: Amanda Wood, Milk Bank Manager, Oxford University Hospital.
Email:Amanda.wood@ouh.nhs.uk or log onto www.ouh.nhs.uk/infantfeeding to download a registration form.

Information in this leaflet was obtained from Oxford University Hospital Milk Bank, UKAMB and NICE clinical guidelines 2012.

This document can be made available in other languages and formats upon request.

Written: Fidelma Lee, (Infant Feeding Team), April 2015
Approved by Maternity Information Group, May 2015
Review: May 2016