

MY BREASTMILK IS A STRANGE COLOR...IS THAT OKAY?

Breast milk can be a variety of colors. Most of the time it's clear, white, bluish, tan or yellow. But at some point during the course of your breastfeeding experience, you may be surprised to find that your milk can be other colors as well. In general, human milk tends to be clear or have a bluish tint when it first starts to flow, either in the beginning of a feeding or at the start of a pumping session. This is the lower-fat foremilk. As the feeding progresses from foremilk to hindmilk, the fat content increases and the milk becomes creamier and whiter. However, certain foods, herbs, nutritional supplements and medications can change the milk's color to shades of pink, orange, red, brown, green and even black. These additives can also alter the color of your urine or your baby's urine. Although it might be shocking and scary to see, the changes in the color of breast milk are usually diet-related and not at all dangerous.

Green Milk: Green milk can be produced after the ingestion of green foods or foods containing green dyes. Drinking green-colored beverages, eating spinach or seaweed, and taking certain herbs or supplements can turn breast milk green.

Pink, Orange, Red, and Brown Milk: Breast milk can take on a red, pink or orange hue from foods that are naturally red, pink, and orange in color or foods that contain red, yellow and orange food dyes. Beets, orange soda, and red or orange fruit drinks can cause your milk to turn different shades of pink, red and orange. If blood from inside your breasts leaks into your milk ducts, the milk may appear brown and rust-colored. This is called rusty pipe syndrome because the milk looks like dirty water from an old rusty pipe. Sometimes a little bit of blood from cracked nipples will get into your milk and create red or pink streaks. A small amount of blood in the milk supply is not harmful to your baby. There is no need to stop breastfeeding. In most cases, the bleeding will go away on its own in a few days. If the issue has not resolved after a week, check with your doctor.

Black Milk: The production of black milk has been linked to the antibiotic minocycline (Minocin). Minocycline also causes darkening of the skin. The use of minocycline is not recommended while you are nursing. Always let your doctor know that you are breastfeeding before taking any medication.

Sources: Lawrence, Ruth A., MD, Lawrence, Robert M., MD. Breastfeeding A Guide For The Medical Profession Sixth Edition. Mosby. Philadelphia. 2005.

MY BREASTMILK IS FOAMY WHEN I PUMP...IS THAT OKAY?

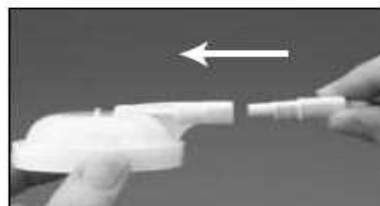
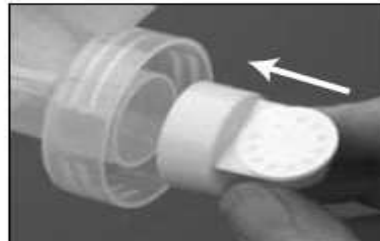
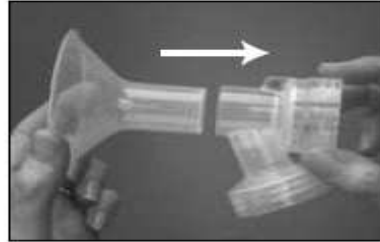
Yes, this typically is caused by a loose connection in your pump parts. Make sure that all of the connections are fitted properly. Don't forget to check the white membrane caps inside the connector (make sure they are snapped in tightly). See the next question for additional information.



HOW DO I PUT TOGETHER MY SYMPHONY KIT?

Symphony® Assembly & Operation Kit Assembly

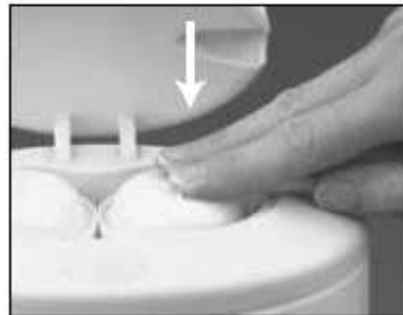
1. Follow cleaning instructions on pages 2-3.
2. Insert the small end of the Breastshields into the small end of the connectors. (Prior to cleaning, separate these two pieces.)
3. Snap white membranes onto yellow valves until membrane lies completely flat. (Prior to cleaning, separate these two pieces.)
4. Push assembled valves and membranes onto the breastshield connector.
5. Screw containers onto the breastshield connector.
6. Insert hard yellow ends of tubing into openings in the breastshield connector.
7. Assemble protective membranes onto membrane caps. Push triangular ends of tubing into the small openings in the membrane caps.



- 8.** To unlock case, press the oval release button on top of the Symphony® Breastpump. Keeping button depressed, lift up on the handle to open case and access pumping mechanisms.



- 9.** Push membrane/cap into place on pumping mechanism. A “click” will be heard once properly seated. To ensure proper fit, be sure to center the membrane caps’ tube ports directly over the crevice on the pump housing.

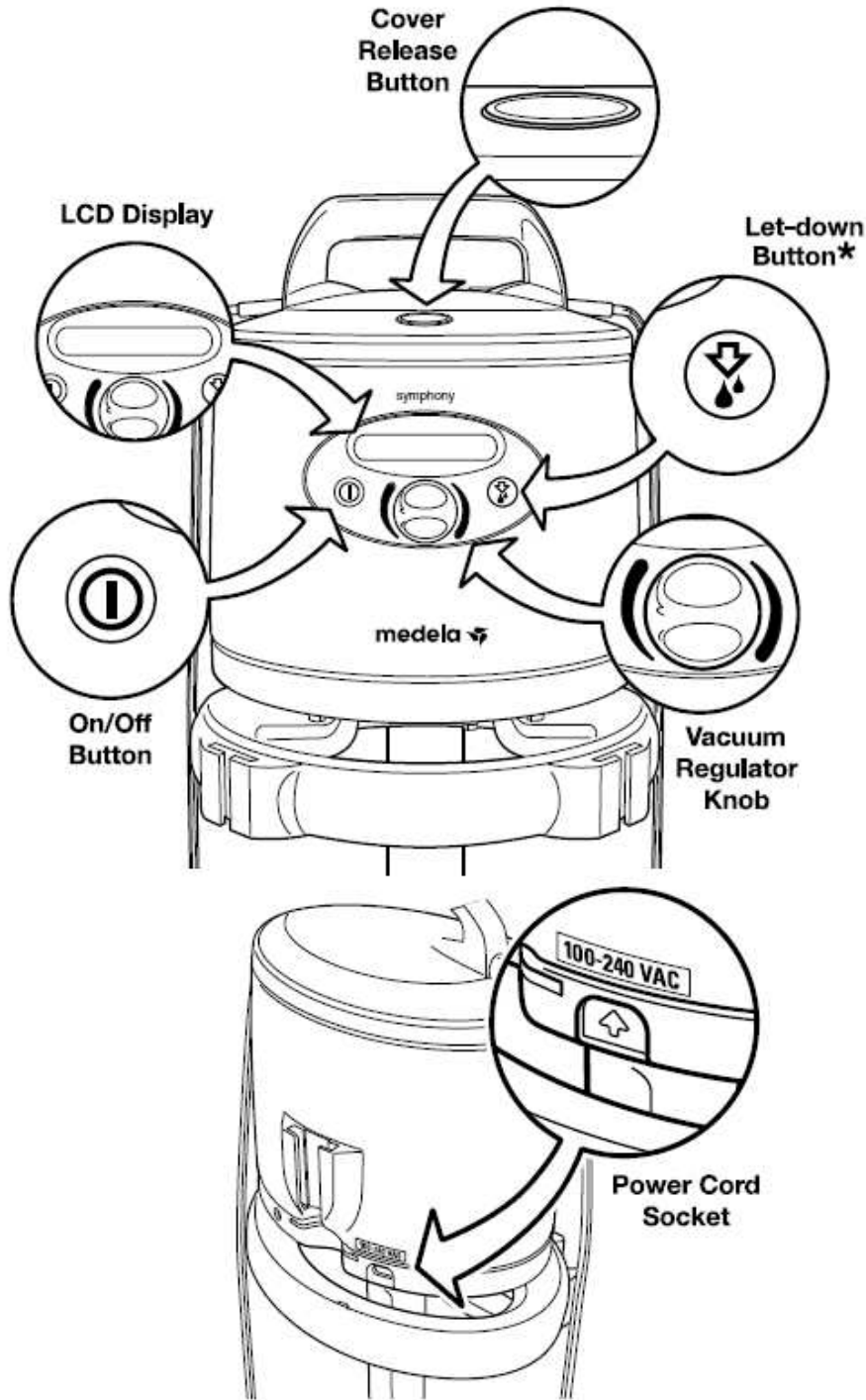


- 10.** Power the Symphony Breastpump (or charge its battery if included) by connecting the power cord to a wall outlet and the socket in the back of the pump. |



HOW DO I USE MY SYMPHONY RENTAL PUMP?

Symphony® Controls



* (Press if let-down occurs before expression phase starts, when using the Standard 2.0 program.)

I HAVE QUESTIONS ABOUT PUMP CARE...

Tubing Care: Inspect tubing after each pumping session for condensation and or milk.

If condensation appears in tubing: To eliminate condensation after you have completed pumping, continue running the pump with the tubing(s) attached for another 1-2 minutes or until dry, while you attend to storing your pumped breast milk.

If milk appears in tubing:

1. Turn off the pump and unplug from power source.
2. Remove and disassemble the tubing, protective membrane and membrane cap. Wash in soapy water then rinse in cold clear water.
3. Shake water droplets out and hang to air-dry. For faster drying, attach tubings to pump and run pump 1-2 minutes or until dry, or pour a small amount of isopropyl alcohol through the tubings to dry.
4. Make sure that valve membranes are undamaged and clean. Replace if necessary.
5. Use a damp cloth to wipe the pump and the diaphragm. Do not immerse the pump in water.
6. When components are completely dry, reassemble breast pump and kit.

To Sanitize at Home:

Disassemble. Sanitize by boiling for 10 minutes.

After each use:

- Disassemble and wash all parts that come in contact with the breast and milk in warm soapy water.
- Rinse in clear water.
- Air-dry on clean towel and cover parts when not in use.

All parts may also be washed in top rack of dishwasher.

For Quicker Cleaning: Medela offers Quick Clean™ Micro-Steam™ Bags for daily kit disinfection.

WHAT CAN I DO TO MAKE PUMPING MORE COMFORTABLE?

Choose the best pump for your situation, and the correct width breast shields for your breasts. Medela makes PersonalFit™ breast shields in five widths. **Correct sizing can improve flow and comfort for moms who are pumping. If you are sore when pumping, try turning down the suction level, or pumping for a shorter time. If you have the correct size breast shield, you can apply some Lanolin cream or Nipple Butter to help lubricate the nipple and avoid chaffing.**

To determine whether you think you might need a Large or Extra Large breastshield, look at your nipple as it is drawn into the tunnel of the shield during pumping. It should move freely and easily, and should not rub against the sides of the tunnel. If the breastshield fits tightly, your nipple will rub against the sides of the tunnel with each vacuum movement of the pump. After

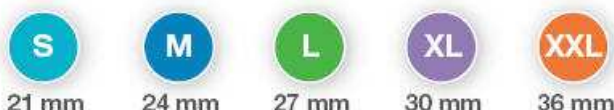
several pumpings, you may notice that the outside of the nipple (rather than the nipple tip) is tender or sore. You may also see a little ring of skin flecks in the tunnel of the breastshield after you pump. While a little circle of milk in the tunnel is normal, a ring of skin flecks probably indicates that the tunnel is too small, and that you would be more comfortable with a larger breastshield. When your nipple moves freely in the tunnel of the breastshield, you will also note a gentle pulling movement in the areola each time the pump cycles. If you do not see any movement in the areola with the pump vacuum, the breastshield is probably too small.

A tight breastshield can affect breast emptying and lead to problems with milk supply. During pumping, your milk flows out of the breast due to a combination of the pump's vacuum and your milk ejection (or let-down) reflex. However, a tightly-fitting breastshield does not allow good breast emptying--even with the best breast pump and a strong milk ejection reflex--because it squeezes the small ducts inside the nipple that carry your milk out of the breast. Ordinarily, these ducts increase in size when you feel milk ejection so that the milk can flow out of the breasts quickly and easily. However, if the ducts are squeezed by a tightly-fitting breastshield, some milk stays behind in the breast. Eventually, this incomplete milk removal can lead to plugged ducts, mastitis, and problems with low milk volume. You may note breast engorgement that seems to last a long time--or little "knots" or hardened areas in the breast that do not seem to empty with milk expression.

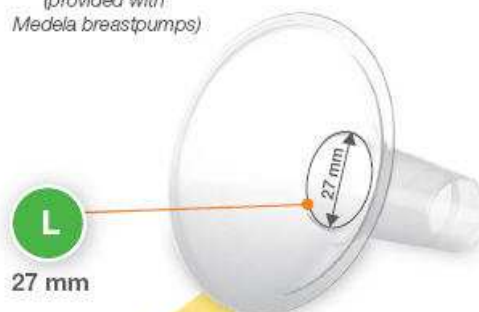


Medela offers PersonalFit™ breastshields to help ensure comfort and efficient pumping. Use with PersonalFit connectors (sold separately).

Our size range ensures that you'll find the right fit for you:



(provided with Medela breastpumps)



CAUTION: If you experience discomfort while pumping, contact a breastfeeding specialist. You may need a different size PersonalFit™ breastshield to reduce the possibility of nipple irritation or injury. Call 1-800-TELL YOU to locate a breastfeeding specialist in your area.

QUESTIONS?

Call Medela Customer Service at 1-800-435-8316 or visit www.medela.com