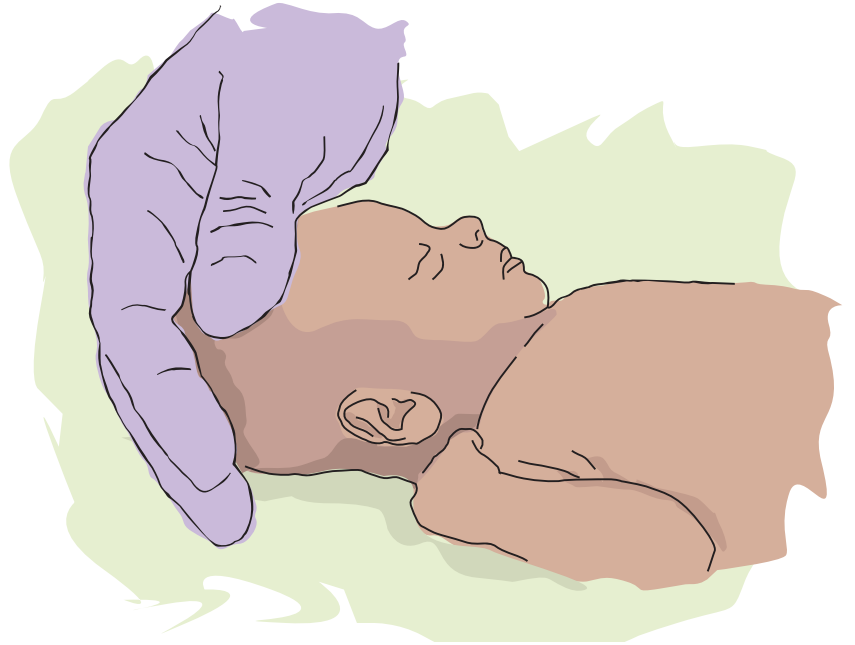


100% HUMAN MILK DIET

The Best Nutrition for Your Preemie



No other nutrition provides the benefits offered by breastmilk

You have likely heard that breastmilk is best for babies—and it is! So, when it comes to your premature baby in the neonatal intensive care unit (NICU), it's important to know that the American Academy of Pediatrics recommends all premature babies receive pasteurized, human donor breastmilk if mother's own milk is unavailable.¹ This is because breastmilk is full of antibodies and other immune-boosting properties to help fight infections, and it is gentle on the immature digestive tract of your premature baby.¹ Breastmilk is also associated with enhanced neurodevelopmental outcomes and healthy early postnatal growth patterns.¹

Why preemies need fortified breastmilk

Babies born early need more nutrients than mother's own milk or donor breastmilk alone can provide. This is why fortifiers need to be added to your breastmilk or donor breastmilk. Fortifiers give your baby additional calories, protein, and minerals necessary to help them grow and thrive.

Did you know that most human milk fortifiers are made from cow's milk? Cow milk-based fortifiers and formulas are associated with an increased risk of complications among premature babies.²

Glossary of Terms:

Pasteurization: The process of inactivating viruses and bacteria from donor breastmilk

Mother's own milk: Breastmilk produced from the baby's own mother

Donor breastmilk: Breastmilk donated by women with a surplus of milk; this donated breastmilk is pasteurized

Human milk fortifiers: Generic term used to describe fortifiers made from either cow milk or donor breastmilk; these fortifiers are added to mother's own milk or donor breastmilk

Human milk-based fortifiers: Fortifiers made from 100% pasteurized donor breastmilk with added essential minerals,¹ manufactured exclusively by Prolacta Bioscience

100% human milk diet: Mother's own milk or donor breastmilk combined with Prolacta's 100% human milk-based products

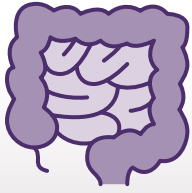
Prolact+ H²MF[®] is a fortifier that is made exclusively from 100% human milk.*

*100% pasteurized donor breastmilk with added essential minerals.¹

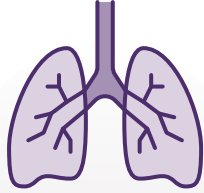
The benefits of a 100% human milk diet

Research has shown that among babies born weighing less than 1250 grams, a 100% human milk diet is associated with increased survival,^{2,3} a shorter hospital stay,⁴ and a lower incidence of complications^{3,5} when compared with babies who receive cow milk-based fortifiers or formulas.

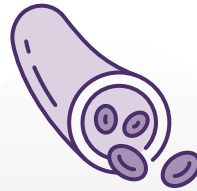
Studies have shown that Prolacta's 100% human milk diet is associated with a decrease in the following complications:



Necrotizing enterocolitis
(a serious intestinal disease)^{3,4}



Bronchopulmonary dysplasia
(a serious form of chronic lung disease)^{3,4,5}



Late-onset sepsis
(a blood infection)^{3,6}

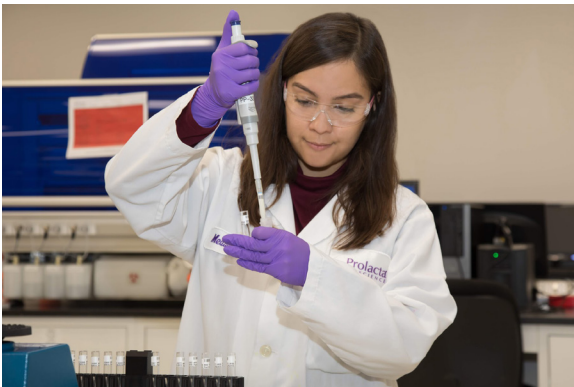


Retinopathy of prematurity
(an eye disease that can lead to vision impairment)^{3,4}

Achieve a 100% human milk diet in the hospital

A 100% human milk diet is only achieved when 100% of the protein, fat, and carbohydrate in an infant's diet are derived from human milk. In addition to mother's own milk or donor breastmilk, this diet includes Prolacta's human milk-based fortifiers.

To learn more about the benefits of a 100% human milk diet, visit [Prolacta.com](https://www.prolacta.com).



Prolacta has the highest safety standards in the industry for nutritional products made from breastmilk. Learn more about our strict donor screening and other ways we ensure the safest and highest quality products for the most fragile babies.

[Prolacta.com/safety](https://www.prolacta.com/safety)



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instagram.com/prolacta_bioscience



twitter.com/prolacta



youtube.com/user/prolactabioscience

¹ American Academy of Pediatrics. Breastfeeding and the use of human milk. Section on Breastfeeding. *Pediatrics*. 2012;129(3):e827-e841. doi:10.1542/peds.2011-3552 ² Abrams SA, Schanler RJ, Lee ML, Rechtman DJ. Greater mortality and morbidity in extremely preterm infants fed a diet containing cow milk protein products. *Breastfeed Med*. 2014;9(6):281-285. doi:10.1089/bfm.2014.0024 ³ Hair AB, Peluso AM, Hawthorne KM, et al. Beyond necrotizing enterocolitis prevention: improving outcomes with an exclusive human milk-based diet. *Breastfeed Med*. 2016;11(2):70-74. doi:10.1089/bfm.2015.0134. Published correction appears in *Breastfeed Med*. 2017;12(10):663. doi:10.1089/bfm.2015.0134.correx ⁴ Assad M, Elliott MJ, Abraham JH. Decreased cost and improved feeding tolerance in VLBW infants fed an exclusive human milk diet. *J Perinatol*. 2016;36(3):216-220. doi:10.1038/jp.2015.168 ⁵ Delaney Manthe E, Perks PH, Swanson JR. Team-based implementation of an exclusive human milk diet. *Adv Neonatal Care*. 2019;19(6):460-467. doi:10.1097/ANC.0000000000000676 ⁶ O'Connor DL, Kiss A, Tomlinson C, et al. Nutrient enrichment of human milk with human and bovine milk-based fortifiers for infants born weighing <1250 g: a randomized clinical trial. *Am J Clin Nutr*. 2018;108(1):108-116. doi:10.1093/ajcn/nqy067. Published corrections appear in *Am J Clin Nutr*. 2019;110(2):529. doi:10.1093/ajcn/nqz091 and *Am J Clin Nutr*. 2020;111(5):1112. doi:10.1093/ajcn/nqaa042