



Lansinoh®

Primo-Lacto®

Colostrum Collection System

Designed to Increase the Volume of Usable Colostrum for Neonates

Primo Lacto Study Results

In a study of 67 mothers with preterm infants ranging from 25 to 38 weeks gestational age, 87 clinician observations recorded the following results:

Increased Volume of Usable Colostrum

Healthcare providers estimated more than a 40% decrease in the amount of colostrum wasted when using the Primo-Lacto® for hand expression and a 30% decrease in the amount of colostrum wasted when using the Primo-Lacto® for pump expression versus standard collection practices¹.

Improved Ease of Use for Professionals

Healthcare professionals reported a significant improvement in ease of use with the Primo-Lacto® collection system versus standard collection practice².

Increased Patient Satisfaction

Patients reported a significant increase in satisfaction when using the Primo-Lacto® versus standard collection practices³.

The Economic Impact of Colostrum

While neonatal ICU patients account for approximately 0.15 percent of the U.S. population, they account for about 0.45 percent of the total health care costs. The average cost for infants hospitalized in neonatal intensive care units is around \$3,000 per day. While the average cost to an employer of a healthy baby born at full-term, or 40 weeks of gestation, is \$2,830, the average cost for a premature baby is \$41,610. If the baby is born at 26 weeks, the cost can quickly rise to \$250,000 or more⁴.

Studies show that infants who received oral colostrum, relative to those who did not, reduced the average length of stay by 16 days; a \$48,000 saving for each infant⁵.

Furthermore, The Lancet series (2016) published there is also a strong economic case for investment in promoting breastfeeding. Modelling conducted for the series estimates that global economic losses of lower cognition from not breastfeeding reached a staggering US\$302 billion in 2012, equivalent to 0.49% of world gross national income. In high-

income countries alone, these losses amounted to US\$231.4 billion, equivalent to 0.53% of gross national income⁶.

The authors calculate that boosting breastfeeding rates for infants below 6 months of age to 90% in the USA, China, and Brazil and to 45% in the UK would cut treatment costs of common childhood illnesses (e.g., pneumonia, diarrhoea, and asthma) and save healthcare systems at least US\$2.45 billion in the USA, US\$29.5 million in the UK, US\$223.6 million in China, and US\$6.0 million in Brazil. Increased breastfeeding rates can benefit mothers by reducing 20,000 breast cancer deaths per year⁷.

1,2,3. Kristensen-Cabrera, Alexandria & Sherman, Jules & Lee, Henry. (2018). A prospective clinical study of Primo-Lacto: A closed system for colostrum collection. PLOS ONE. 13. e0206854. 10.1371/journal.pone.0206854.

4. <https://www.managedcaremag.com/archives/2010/1/how-plans-can-improve-outcomes-and-cut-costs-preterm-infant-care>

5. Uauy, Ricardo & Koletzko, Berthold. (2014). Defining the Nutritional Needs of Preterm Infants. World review of nutrition and dietetics. 110. 4-10. 10.1159/000358453.

6,7. <http://www.thelancet.com/series/breastfeeding>