

Patient Name:

DOB:

Address:

.....

Infant name:

Dear Dr

The above mother has been struggling to maintain her breast milk supply. She has received support with additional breastfeeding management techniques, including increased frequency of feeding with optimal attachment and additional expressing.

Although we know that at least 98% of women can establish and maintain a normal milk supply, there is evidence that this is more difficult when mothers and babies are separated after delivery, e.g. premature delivery, suffering from hormonal problems or when good breastfeeding is not achieved initially.

Domperidone is a dopamine antagonist and has been shown to significantly increase prolactin levels in most (although possibly not all) lactating mothers. It is not licensed as a galactagogue, but is considered the treatment of choice to enhance breast milk supply in specific circumstances. Studies have shown that the levels passing through breastmilk are very small because of extensive first-pass metabolism and poor bio-availability.

Domperidone was recently reviewed by the MHRA and due to a small increased risk of cardiac side effects, restrictions on its use for licensed indications were introduced. A higher risk was observed in patients older than 60 years, adults taking daily oral doses of more than 30mg, and those taking QT-prolonging medicines or CYP3A4 inhibitors concomitantly.

Domperidone should be used for the shortest possible time and should not be used if the mother or infant:

- has evidence of cardiac problems
- are receiving any medication that may prolong the QT interval or potent CYP 3A4 inhibitors e.g. ketoconazole, clarithromycin, tricyclic antidepressants, citalopram/escitalopram, erythromycin
- has severe hepatic impairment
- has high or low levels of potassium, or low levels of magnesium

I have discussed the use of domperidone with the mother and given her the information leaflet produced by [The Breastfeeding Network](#). I would be grateful if you could check whether there are any pre-existing contra-indications to the use of domperidone in her case. If not, it would be most helpful if you could assist this mother to improve her milk supply by providing the recommended treatment. The suggested prescription is **domperidone 10mg three times a day for 7 days**, after which use should be re-assessed but if the benefits are thought to outweigh the risks, may need to be continued.

Yours Sincerely,