Attach patient addressograph here:

Date: …………………….

Infant name: ……………………………………

Infant NHS / hospital number: ………………………

Dear Dr

**Request to prescribe off label domperidone to enhance breast milk production.**

The above mother/birthing parent is unable to maintain their breast milk production. They have been assessed by a breastfeeding specialist\* and all other methods and support for increasing breastmilk are in place, including regular feeding/expressing (at least eight times per 24 hours), positioning, attachment optimisation (including consideration of other issues, such as tongue tie) and correct expressing technique.

\*breastfeeding specialist may include a community midwife or other registered healthcare professional experienced in infant feeding support.

The use of domperidone has been discussed with the mother/birthing parent and they have been given the information leaflet produced by [The Breastfeeding Network](https://www.breastfeedingnetwork.org.uk/domperidone/). Advice has been given that domperidone may only be effective if accompanied with expressing both breasts, at least eight times per 24 hours, including overnight.

**I would be grateful if you could check whether there are any pre-existing contraindications to the use of domperidone in this individual case – see** [**APC prescribing information**](https://www.nottsapc.nhs.uk/media/1729/domperidone-info-sheet.pdf) **for detail. If not, it would be most helpful if you could prescribe domperidone (off-licence indication) to help to improve milk production.**

**Recommended dose and duration:**

**Oral domperidone 10mg THREE times a day for 7 days then review.**

Off-label domperidone is the medicine of choice for lactation stimulation, however it should be avoided in the following situations:

* where either mother/birthing parent or baby has any evidence of cardiac abnormalities, underlying cardiac diseases and specifically arrhythmia. ECG monitoring should be considered.
* is receiving other medications known to prolong QT interval or potent CYP3A4 inhibitors see [APC domperidone prescribing information](https://www.nottsapc.nhs.uk/media/1729/domperidone-info-sheet.pdf)
* where severe hepatic impairment has been identified in mother/birthing parent or baby
* where either mother/birthing parent or baby has known high or low levels of potassium, or low levels of magnesium

See [APC prescribing information sheet](https://www.nottsapc.nhs.uk/media/1729/domperidone-info-sheet.pdf) for full list of contraindications and interactions.

Note that MHRA guidance (for licensed indications) recommends that the maximum treatment duration should not usually exceed one week, therefore ongoing monitoring and support should continue whilst domperidone is in use and thereafter as necessary.

In addition to the small increased risk of serious cardiac side effects, adverse effects of domperidone include abdominal cramping, dry mouth, depressed mood and headache. Please advise the mother/birthing parent to report maternal fainting or palpitations or any changes in their baby’s behaviour immediately.

**Further information**. Please see [APC domperidone prescribing information](https://www.nottsapc.nhs.uk/media/1729/domperidone-info-sheet.pdf) / attached for further details.

Yours Sincerely,

Signature

Name (printed)

Position – Breast feeding specialist.