Domperidone (Motilium)

What is Domperidone?
Domperidone (Motilium) is a prescription drug often used to treat disorders of the gastrointestinal (GI) tract, but it also increases prolactin. Prolactin is the hormone needed for milk production. Usually, a woman’s prolactin increases during pregnancy and stays high after birth if the baby breastfeeds often (8 times a day or more).

When is it needed?
Domperidone can be useful for mothers who have been unable to make enough breast milk, even if they are breastfeeding or pumping often.

Before using Domperidone, talk with a lactation consultant. She will look for factors that might be causing your low supply and will usually suggest other ways to boost your milk supply. If your supply doesn’t improve within 5 days, you may decide to try Domperidone. Remember that even while taking Domperidone, you must continue to breastfeed or pump at least 8 times a day.

Domperidone works best for women who have low prolactin levels even when they are pumping or breastfeeding often. It is not yet common practice, but a blood draw to check your prolactin level might help determine if Domperidone will work for you. Prolactin levels should be checked 3 hours after nursing or pumping.

Where do I get it?
You will need a prescription for Domperidone. Your obstetrician, midwife, primary care provider, or nurse practitioner can write a prescription for you. As of now, only compounding pharmacies can fill this prescription. Custom Prescriptions (425-289-0347) is one of the pharmacies that has filled this prescription for our patients.

Using Domperidone
The dose is 10 to 20 mg (1 to 2 capsules of 10 mg each), 3 to 4 times a day for the first week. It may take 3 to 5 days before you see an effect. Some mothers notice an effect within 24 hours.
Questions?

Call 206-598-4628

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Lactation Services:
206-598-4628
Weekdays:
9 a.m. to 9 p.m.
Weekends and holidays:
9 a.m. to 1 p.m.

If your milk supply improves with the Domperidone, you will cut back to 3 times a day for the second week, 2 times a day for the third week, 1 time a day for the fourth week, then once every other day for the fifth week (see table).

<table>
<thead>
<tr>
<th>Week</th>
<th>Dosage</th>
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<tbody>
<tr>
<td>Week 1</td>
<td>3 to 4 times a day</td>
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<tr>
<td>Week 2</td>
<td>2 to 3 times a day</td>
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<tr>
<td>Week 3</td>
<td>1 to 2 times a day</td>
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<tr>
<td>Week 4</td>
<td>1 time a day</td>
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<tr>
<td>Week 5</td>
<td>1 every other day</td>
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</tbody>
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Side Effects

The amount of Domperidone that gets into the breast milk is tiny. Side effects in the baby have not been reported.

Side effects for the mother are rare. They may include:

- Dry mouth and thirst.
- Rash and itching.
- Headache.
- Abdominal cramps or diarrhea.
- Drowsiness.
- Possible **arrhythmias** (irregular heartbeats) in patients with low potassium or in patients who are prone to arrhythmias.
- Seizures (very rarely).

In 2004, the Food and Drug Administration (FDA) issued a warning that cautioned women against using Domperidone for increasing milk supply. The warning was based on old information where this medicine was used intravenously in cancer patients who were receiving chemotherapy. The dose caused arrhythmia in these patients. At this time, there is no published research that shows that Domperidone taken by mouth causes arrhythmia in otherwise healthy breastfeeding mothers.

To Learn More

Books


Web Sites

**Breastfeeding Online** (Jack Newman, M.D.)
www.breastfeedingonline.com/domperidone.shtml

**Breastfeeding Pharmacology** (Texas Tech University Health Sciences Center, Thomas W. Hale, R.Ph, Ph.D.)
http://neonatal.ttuhs.com/lact