Domperidone can increase milk supply for preterm infants

Clinical question
How effective are medications for increasing milk supply in mothers expressing breast milk for their preterm hospitalised infants?

Bottom line
There were modest improvements in short-term expressed breast milk volumes when a medication (domperidone) was used after insufficient expressed breast milk occurred in mothers following preterm delivery. Domperidone was commenced ≥14 days post delivery and following insufficient expressed breast milk supply with other lactation supports. Both trials gave the same dose of domperidone (10 mg three times per day) with a duration of seven days in the smaller trial and 14 days in the larger trial. Neither trial showed significant improvements in longer-term outcomes of breastfeeding in a preterm population. No adverse effects were reported.

Caveat
The review included only two studies involving 59 participants. Currently, no studies support prophylactic use of a galactagogue medication at any gestation. Use of such medications has only been examined at more than 14 days post delivery and after full lactation support has been given.

Context
Breast milk remains the optimal form of enteral nutrition for term and preterm infants until up to six months of age. Mothers of premature and sick infants are separated from their infants while they are receiving hospital-based care. These mothers often have difficulty supporting lactation, when milk production is solely maintained by breast expression.

Cochrane Systematic Review
Donovan T and Buchanan K. Medications for increasing milk supply in mothers expressing breastmilk for their preterm hospitalised infants. Cochrane Reviews, 2012, Issue 3. Article No. CD005544. DOI: 10.1002/14651858.CD005544.pub2. This review contains two studies involving 59 participants.

PEARLS No. 363, July 2012, written by Brian R McAvoy.

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners – developed by the Cochrane Primary Care Field, New Zealand Branch of the Australasian Cochrane Centre at the Department of General Practice and Primary Health Care, University of Auckland and funded by the Ministry of Health. New Zealanders can access the Cochrane Library free via www.cochrane.org.nz

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases. View PEARLS online at: www.nzdoctor.co.nz; www.cochraneprimarycare.org