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First set of comments:

I have been consulting on medications and breastfeeding (and occasionally on pregnancy) for over 40 years.

Please check out my website for further information that is available.

Insufficient milk supply as addressed several times by Diane Spatz. Along with medication use, insufficient milk supply (aka, hypoprolactinemia), is one of the three most common reasons why women do not breastfeed or discontinue breastfeeding. She also mentioned domperidone and also the information that is available from Dr. Tom Hale, who is at Texas Tech University. In fact, Tom Hale will be running two clinical trials as part of the Orphan Drug Status given to the FDA to domperidone, which should fit in perfectly with your Task Forces' objectives. Also, please check out his Medications and Mothers' Milk and his website as valuable breastfeeding resources, as mentioned by Diane Spatz.

"Extremely limited literature in lactation women": More data exists on medications and breastfeeding than you may realize. Please again check out Dr. Tom Hale and my website. I have also attached two of my articles (<https://nicebreastfeeding.com/wp-content/uploads/2016/09/Medications-and-Breastfeeding-Current-Concepts.pdf> and https://nicebreastfeeding.com/wp-content/uploads/2016/09/Selection_and_Use_of_Galactogogues.pdf). As an aside, I spent many years at the NINDS as Assistant Director of the Clinical Neurosciences Program.

"Limited Assays": Please see above regarding breastfeeding and lactation

"Benefits of breastfeeding vs medications in women": It is really: Benefits of breastfeeding and benefits of the medication vs risks of not breastfeeding (aka, risks of artificial formula) vs risks of the medication.

Please see my article: Medications and Breastfeeding: Current Concepts (<https://nicebreastfeeding.com/wp-content/uploads/2016/09/Medications-and-Breastfeeding-Current-Concepts.pdf>)

Inclusion of OTCs and supplements and supplements and "complimentary" (it is really "complementary") medications: As for breastfeeding women, OTCs and herbal medications, especially herbal galactogogues (see both articles) appear to be used much more widely than prescription drugs.

PS: It was hard to hear some speakers who did not speak directly into their microphones. Also, I regret that as an offline participant that I could not actively participate in your discussion. Therefore, thank you for considering the information in my email.

Second set of comments:

I believe that in the past two days, I did not hear anyone discuss or mention Lactation Consultants.

I have found that in my experience that Lactation Consultants appear to be the most knowledgeable healthcare professionals (yes, even more than doctors and pharmacists) concerning medication (including galactogogues) use in breastfeeding mothers. Medication use is part of their board certification (a very rigorous program) as Lactation Consultants (yes, most are nurses). Some of them have excellent websites that discuss medication use, among many other issues. KellyMom does provide an excellent service, despite what Diane Spatz said today, and does reach a large population of the breastfeeding community.

I believe your Task Force should collaborate with the International Lactation Consultant Association (ILCA) and the United States Lactation Consultant Association (USLCA) and even with LaLeche League International (LLLI).

Once again, I believe there are more evidence based medications and breastfeeding studies out there than was stated yesterday and then repeated today. I use this data every day in counseling breastfeeding mothers on medication use. Yes; I admit that they are not all controlled clinical trials, but stating that a paucity of information and data exists, results in medication use being one of the three most common reasons why women do not breastfeed or discontinue breastfeeding. In my 40 years of practice, I have had to advise less than a dozen women to discontinue breastfeeding because of a drug they had to take. I discuss all the tools and techniques and data that I use to help women that are breastfeeding and must take a medication to continue to breastfeed. That is all covered in my seminal article, "Medications and Breastfeeding: Current Concepts" that I forwarded to you yesterday and on my website.

In all these cases, I collaborate with Lactation Consultants to obtain our positive outcomes.

Please do not make the current breastfeeding situation as dire as you do but also keep up your Task Force work on breastfeeding because both healthcare providers and breastfeeding mothers, babies, and families need all the support they can get, especially concerning medication use.

Once again, thank you for all that you do.

PS: Concerning recreational drug use, I have also just published my book: "Recreational Drugs and Drugs Used To Treat Addicted Mothers: Impact on Pregnancy and Breastfeeding" that you can also find on my website.