



# Induced Lactation for Women with Endometriosis

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### Background:

Induced lactation is a process that enables breastfeeding in non-gestating mothers by mimicking the hormonal driven development of the breasts during pregnancy. This is done by using combined hormonal contraceptives together with domperidone, to artificially elevate progesterone, estrogen and prolactin levels.

Endometriosis is an estrogen-dependent condition in which endometrium cells, grow outside the uterus. The main symptoms are pelvic pain and infertility. Women with endometriosis, often are treated with medications to balance their symptoms. One of the most effective treatments for the pain is a hormonal treatment that aims to suppress ovulation and endometrial growth.

For these women, it may be challenging to use the required hormones in the induced lactation protocol.

### Methods:

4 case studies of women with endometriosis were referred to our clinic for induced lactation process. All were in a surrogacy process and were treated with progestin.

The protocol at our clinic included:

- Combined birth control pills instead of the progestin
  - Domperidone 10 mg X3 /day
  - Herbal Galactagogues
  - Pectoralis massage
  - About two months before the estimated due date: hands-on pumping X8 /day.
- \* Eventually, only one of the women took the hormonal contraceptives while the other three continued taking the progestin.

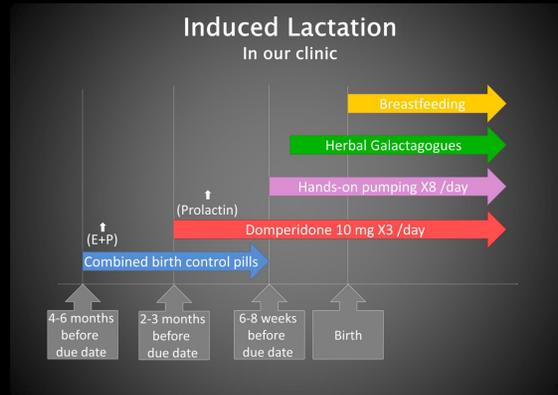
### Results:

All 4 women were able to produce certain amounts of milk before the surrogate's birth. After birth they all breastfed their babies with various amounts of supplementations and defined their breastfeeding experience as a success.

### Conclusions:

Using frequent breast stimulation together with Domperidone to increase prolactin levels may be sufficient for producing milk in non-gestating mothers.

One of the main factors contributing to the success of this process was the determination and dedication of the women to the process, in particular to the intensive pumping plan.



## Induced lactation - a process that enables breastfeeding in non-gestating mothers

### CASE 1, FIRST CHILD, AGE 34

Age 34, first child, surrogate at 16 weeks gestation.

Background: Endometriosis stage 4, treated with progestin; 2 ectopic pregnancies.

Plan: combined birth control pills (E+P); Domperidone; milk expression X 8-10/ Day; herbal galactagogues.

\*After 6 weeks, due to severe pelvic pain: progestin instead of the combined pill.

By DD: pumped ~250 ml/day.  
After birth: exclusive BF for the first 3 days, BF with supplements (2 bottles a day) for 6 months and continued breastfeeding with complementary foods.

### CASE 2, SECOND CHILD, AGE 36

Age 36, second child, surrogate at 28 weeks gestation. First child 7 years old, breastfed.

Background: Endometriosis stage 4, treated with progestin

Plan: Continue taking progestin; Domperidone; milk expression X 8-10/ Day; herbal galactagogues.

By DD: pumped ~300 ml/day.  
After birth: exclusive BF for the first week and continued BF with supplements until the age of 3.

### CASE 3, SECOND CHILD, AGE 33

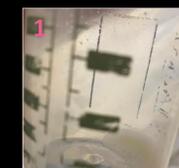
Age 33, second child, surrogate at 30 weeks gestation. First child 4 years old, breastfed.

Background: Endometriosis; a second pregnancy ended a year and a half ago empty-handed at week 38

Plan: Domperidone; milk expression X 8-10/ Day; herbal galactagogues.

By DD: pumped ~150 ml/day.  
After birth: exclusive BF for the first 3 days and continued BF with supplements for few months.

"You turned breastfeeding from a dream into a wonderful experience"



"I am a breastfeeding mother"

"This process restored my confidence in my body"



Using frequent breast stimulation together with Domperidone to increase prolactin levels, may be sufficient for producing milk in non-gestating mothers

### Reference:

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