

Breastfeeding and Medication



Polycystic Ovary Syndrome (PCOS)

Description

The 3 main features of PCOS are:

- irregular periods and therefore irregular ovulation
- high levels of testosterone, which may cause physical signs such as excess facial or body hair
- enlarged ovaries which contain many fluid-filled sacs (follicles) that surround the eggs

Diagnosis is made on the presence of at least 2 of these features. It is estimated to affect 1 in 10 women, but more than half may have no symptoms. Diagnosis is usually made in the late teens. The cause is unknown, but it runs in families although there is no genetic link. It is also associated with weight gain, thinning hair and hair loss from the head, oily skin or acne. In later life there is an increased risk of developing health problems in later life, such as gestational diabetes, type 2 diabetes, pre-eclampsia and high cholesterol levels due to insulin resistance.

Period problems occur in about 7 in 10 women with PCOS. In addition, there may be no ovulation so fertility problems result. PCOS is one of the commonest causes of infertility.

Treatment

Losing weight helps to reduce the high insulin level that occurs in PCOS which in turn reduces the testosterone level. However, this is not always easy with PCOS.

? Fertility may be decreased but lack of ovulation is difficult to predict. Some women find the combined **oral contraceptive pill** helps to regulate periods but should be avoided until several months after birth as oestrogen can inhibit prolactin and thence milk supply.

? **Clomiphene** (Clomid [™]) is often recommended to help ovulation and therefore successful pregnancy. If a second pregnancy is considered whilst still breastfeeding the first baby continues, many mothers wish to repeat clomiphene. There is no data on passage into milk other than that it has been used to stop lactation in the early post-natal period.

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May 2022 The information on this sheet is based upon my professional experience as a pharmacist with a specialised interest in the safety of drugs in breastmilk, supported by evidence from expert sources. However, I cannot take responsibility for the prescription of medication which remains with the healthcare professionals involved. I am happy to discuss the evidence by email wendy@breastfeeding-and-medication.co.uk

<https://www.ncbi.nlm.nih.gov/books/NBK501525/>. Concerns have been raised about accumulation in breastmilk due to the extended half-life of 5 days.



Metformin is widely used to lower insulin and blood sugar levels in women with PCOS. Metformin is not licensed for treating PCOS in the UK, but because many women with PCOS have insulin resistance, it can be used "off-label" in certain circumstances to encourage fertility and control the symptoms of PCOS. Possible side effects of metformin include nausea, vomiting, stomach pain, diarrhoea and loss of appetite. The side effects are often limited by increasing dose slowly. Some women have found that taking metformin supports an improved milk supply. Little passes into milk and does not affect the blood sugars of the nursing infant.



Inositol: Many breastfeeding women with PCOS have asked about the use of inositol (Myo-inositol) which is a natural substance, found in plants and animals, which it is claimed may help to regulate insulin in a similar way to metformin <https://breastfeeding.support/polycystic-ovary-syndrome-breastfeeding/>. Elactancia (<https://www.e-lactancia.org/breastfeeding/inositol-hexaphosphate-ip6-inositolhexaphosphoric-acid/synonym/>) categorises it as of low risk although there are no studies on the transfer into breastmilk. Decisions on use must be taken by individuals. Other herbs are also advocated by the Breastfeeding Support article, to increase milk supply. Compatibility with breastfeeding can be found in the free to access database LactMed <https://www.ncbi.nlm.nih.gov/books/NBK501922/>. I am, I admit, not a fan of supplementary galactagogues on which there is little if any research so would not promote the use of any of these herbs <https://www.breastfeedingnetwork.org.uk/galactagogues/>

Further information

Verity <https://www.verity-pcos.org.uk/>

PCOS Support <https://pcoschallenge.org/pcos-support/>

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