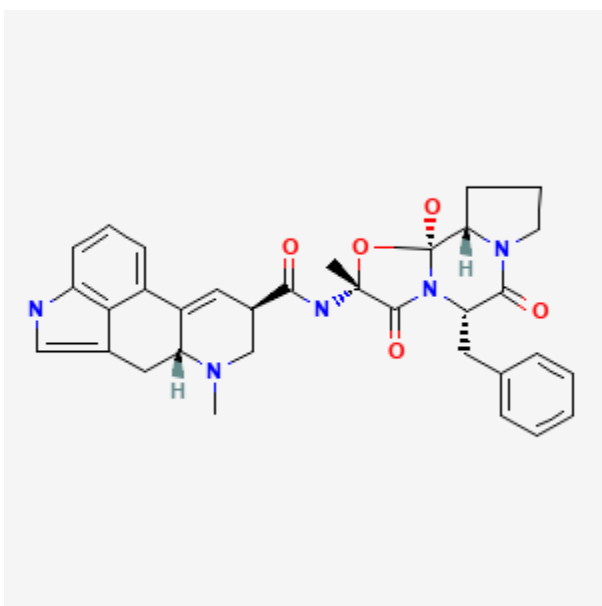




Ergotamine

Revised: July 15, 2023.

CASRN: 113-15-5



Drug Levels and Effects

Summary of Use during Lactation

There is limited published experience with ergotamine during breastfeeding and it might cause adverse effects in the infant and decrease milk supply. Most authorities consider ergotamine to be contraindicated during nursing. [1-5]

Drug Levels

Maternal Levels. Relevant published information was not found as of the revision date.

Infant Levels. Relevant published information was not found as of the revision date.

Disclaimer: Information presented in this database is not meant as a substitute for professional judgment. You should consult your healthcare provider for breastfeeding advice related to your particular situation. The U.S. government does not warrant or assume any liability or responsibility for the accuracy or completeness of the information on this Site.

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Effects in Breastfed Infants

A study in which ergotamine was administered to mothers of newborns immediately postpartum in a dose of 1 mg 3 times daily for 6 days found no effect on weight gain in the breastfed infants.[6] Milk intake, and therefore infant dosage, might have been minimal during the first few days before the mothers' milk came in fully.

Effects on Lactation and Breastmilk

Thirty women who delivered fullterm infants received a single intramuscular dose of methylergonovine 0.2 mg after delivery, followed by oral ergotamine 1 mg 3 times daily for 6 days. Compared to 28 women who delivered fullterm infants and received no ergot derivatives, there was no difference in the milk production, as measured by weight differences before and after nursing, between the 2 groups during the first 6 days postpartum.[6]

A woman who was given ergotamine postpartum for lochia retention experienced severe nipple pain consistent with vasospasm of the nipple or Raynaud syndrome. She was unable to nurse her infant directly, but pumped and fed expressed milk by bottle. The drug had no apparent adverse effect on the milk supply or the infant.[7]

Alternate Drugs to Consider

Eletriptan, Rizatriptan, Sumatriptan, Zolmitriptan

References

1. Moretti ME, Lee A, Ito S. Which drugs are contraindicated during breastfeeding? *Can Fam Physician*. 2000;46:1753–7. PubMed PMID: 11013791.
2. WHO Department of Child and Adolescent Health and Development. Breastfeeding and maternal medication. Recommendations for drugs in the eleventh WHO model list of essential drugs. 2002.
3. Davanzo R, Bua J, Paloni G, et al. Breastfeeding and migraine drugs. *Eur J Clin Pharmacol*. 2014;70:1313–24. PubMed PMID: 25217187.
4. MacGregor EA. Migraine in pregnancy and lactation. *Neurol Sci*. 2014;35 Suppl 1:61–4.
5. Anderson PO. Migraine drug therapy during breastfeeding. *Breastfeed Med*. 2019;14:445–7. PubMed PMID: 31347910.
6. Jolivet A, Robyn C, Huraux-Rendu C, et al. *J Gynecol Obstet Biol Reprod (Paris)*. 1978;7:129–34. [Effect of ergot alkaloid derivatives on milk secretion in the immediate postpartum period]. PubMed PMID: 641312.
7. Morze K. Finding a path in a maze. identification of an adverse reaction during lactation based on a case study of ergotamine. *Breastfeed Med*. 2023;18:A3. doi: [10.1089/bfm.2023.29239.abstracts](https://doi.org/10.1089/bfm.2023.29239.abstracts).

Substance Identification

Substance Name

Ergotamine

CAS Registry Number

113-15-5

Drug Class

Breast Feeding

Lactation

Milk, Human

Adrenergic Alpha-Agonists

Analgesics, Non-Narcotic

Ergot Alkaloids

Vasoconstrictor Agents