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Cisapride

Revised: October 31, 2018.

CASRN: 81098-60-4

Drug Levels and Effects

Summary of Use during Lactation

Cisapride was removed from the market in the United States by the U.S. Food and Drug Administration because of cardiac toxicity. Because of the low levels of cisapride in breastmilk, its use is acceptable in nursing mothers if it is required.

Drug Levels

Maternal Levels. Ten women who averaged 1.2 days postpartum were given cisapride 20 mg orally every 8 hours for 4 days. Cisapride milk samples obtained before and 1 hour after the midday dose on day 4 were 4.8 mcg/L and 6.2 mcg/L, respectively.[1] The peak concentration corresponds to a maximum dose of 0.93 mcg/kg daily

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which is less that the 0.6 to 0.8 mg/kg daily infant dosage and about 0.1% of the maternal weight-adjusted dosage.

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

Effects in Breastfed Infants

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

Effects on Lactation and Breastmilk

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

Alternate Drugs to Consider

Metoclopramide

References

1. Hofmeyr GJ, Sonnendecker EWW. Secretion of the gastrokinetic agent cisapride in human milk. Eur J Clin Pharmacol. 1986;30:735-6. PubMed PMID: 3770067.

Substance Identification

Substance Name

Cisapride

CAS Registry Number

81098-60-4

Drug Class

Breast Feeding

Lactation

Gastrointestinal Agents

Serotonin Agonists