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NLM Citation: Drugs and Lactation Database (LactMed) [Internet]. Bethesda (MD): National Library of Medicine (US); 2006-. Moringa. [Updated 2018 Dec 3].
Bookshelf URL: https://www.ncbi.nlm.nih.gov/books/

Moringa

Revised: December 3, 2018.

Drug Levels and Effects

Summary of Use during Lactation

Moringa (Moringa oleifera) leaves contain vitamins, minerals, and essential amino acids as well as a number of glycosides. It is used as a galactogogue in Asia,[1] particularly in the Philippines where it is called malunggay. Two small studies from the Philippines indicate that it might have some activity as a galactogogue in mothers of preterm infants.[2][3] Galactogogues should never replace evaluation and counseling on modifiable factors that affect milk production.[4] Moringa oleifera leaves are widely used as a food and medicine in Asia and Africa and one small study found no adverse effects in nursing mothers who ingested moringa leaves.[2] No data exist on the safety of Moringa in nursing infants.

Dietary supplements do not require extensive pre-marketing approval from the U.S. Food and Drug Administration. Manufacturers are responsible to ensure the safety, but do not need to *prove* the safety and effectiveness of dietary supplements before they are marketed. Dietary supplements may contain multiple ingredients, and differences are often found between labeled and actual ingredients or their amounts. A manufacturer may contract with an independent organization to verify the quality of a product or its ingredients, but that does *not* certify the safety or effectiveness of a product. Because of the above issues, clinical testing results on one product may not be applicable to other products. More detailed information about dietary supplements is available elsewhere on the LactMed Web site.

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.

Effects in Breastfed Infants

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

Effects on Lactation and Breastmilk

Mothers who delivered an infant before week 37 of gestation were randomized to receive commercial capsules containing Moringa oleifera leaves 250 mg (n = 31) or identical placebo capsules containing flour (n = 37) twice

daily from day 3 postpartum. Mothers were given instruction on using a breast pump, then pumped their breasts every 4 hours and recorded the volume of milk produced from days 3 to 5. At baseline, control mothers collected a much lower volume of milk than mothers in the treatment group. (87 vs 114 mL). Mothers in the treatment group had a greater increase in milk volume on day 4 (67% vs 42%) and day 5 (180% vs 38%) than mothers in the placebo group. Milk volumes on day 5 were 320 mL in the treatment group and 120 mL in the control group. [2] Although well designed, problems with this study include the small number of patients, the large difference in milk volumes at baseline, a high dropout rate in each group, and lack of intent-to-treat analysis.

A study presented in abstract form only studied 40 mothers with infants less than 37 weeks of gestation and producing less than 100 mL of milk on day 2 postpartum. Mothers were randomized to receive unspecified doses of domperidone, metoclopramide, Moringa oliefera leaves (dosage form not stated), or placebo. Mothers used a breast pump to collect milk at unspecified intervals and serum prolactin was measured on days 3, 7 and 14 postpartum. Baseline milk production was equivalent among the groups. On days 7 and 14, milk volume in all of the treatment groups was greater than in the placebo group. The highest volume was in the domperidone group, followed by metoclopramide, and Moringa oliefera. No correlation was found between serum prolactin and milk volume.[3]

References

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2. Estrella MC, Mantaring JB, David GZ, Taup MA. A double-blind, randomized controlled trial on the use of malunggay (Moringa oleifera) for augmentation of the volume of breastmilk among non-nursing mothers of preterm infants. Philipp J Pediatr. 2000;49:3-6.
3. Co MM, Hernandez EA, Co BG. A comparative study on the efficacy of the different galactogogues among mothers with lactational insufficiency. Presented at the American Academy of Pediatrics Section on Breastfeeding. 2002;NCE. Abstract.
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Substance Identification

Substance Name

Moringa

Scientific Name

Moringa oleifera

Drug Class

Breast Feeding

Lactation

Complementary Therapies

Food

Galactogogues

Phytotherapy

Plants, Medicinal