Response to: 'Postpartum breastfeeding status' by Betzold

Thank you for your question¹ regarding our article 'Effect of pregnancy on disease flares in patients with systemic lupus erythematosus'.² We did not have data available on lactation status for women during the postpartum period, and we were unable to account for this in our analysis. We agree that it could be an important factor that may influence disease activity during this time period. Previous studies have found a positive association between plasma/serum prolactin levels and disease activity among patients with lupus.^{3,4} It is possible that the natural increased levels of prolactin during pregnancy and while breast feeding^{5,6} may help explain our finding of increased disease activity during pregnancy and a 3-month postpartum period. Even though we were unable to fully explore this hypothesis, our results did indicate that use of hydroxychloroquine may help reduce the risk of flare during pregnancy and post partum. Future studies could explore the effect lactation has on postpartum flare for hydroxychloroquine users and non-users, as well as analyse how prolactin levels may explain the increased risk of flare during pregnancy and post partum.

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