



TAKING MEDICATIONS SAFELY WHILE BREASTFEEDING

Most drugs that go into your body will also go into your milk, so before you take any medication, you need to consider how it will affect your baby and whether or not it has any effects on lactation. While most medications are safe to take while breastfeeding, it's wise to talk to your doctor or your baby's doctor before taking anything.

WILL THE DRUG AFFECT BABY?

Many drugs taken by a mother make their way into her milk. The important question is not whether the drug gets into milk, but whether the levels in the milk are such that they will affect the baby.

Here are some of the factors that influence how much of a drug gets into a mother's milk and how it affects her baby.

- While most drugs do pass into your milk, most appear in only minute amounts - usually around one percent or less of the amount taken by the mother.
- The route of administration influences how fast the medication enters and clears from your blood, and therefore your milk. For example, some medications come in both oral and inhalant forms, which have different clearing times.
- It's better to use a short-acting medicine that is taken three or four times a day than to use a long-acting, once-a-day form of the medication. . Although less convenient, short-acting medications clear from your blood and milk faster. They're also easier for babies to metabolize, so there is less risk of the drug accumulating in the infant's system.
- Consider the age of your baby. More caution is called for when giving medication to a mother who is breastfeeding a premature or newborn infant ten times a day than when prescribing medication for a woman breastfeeding a one-year-old four times a day. An infant that feeds more frequently naturally gets more of the medicine, and the smaller size of the younger infant means the drug will be more concentrated in the baby's body. . Also, the liver and the kidneys of older infants are better able to metabolize and eliminate the drug.
- Most drugs taken by the mother are of less concern while breastfeeding than if she were taking them during pregnancy. If a drug is safe to use during pregnancy, it is probably safe during lactation. There is more reason to be concerned about the effects of a drug on a growing fetus than on a fully developed infant.
- If there are concerns about possible effects on your baby, can the doctor monitor the baby during the time you are taking the drug? This might involve checking levels of the drug in your milk or the baby's blood, or watching carefully for changes in your baby's behavior.
- Be particularly cautious about taking more than one drug while breastfeeding. While each drug taken separately may be listed in the safe category, together they may be unsafe (if not for your baby, for you). Be sure to tell your doctor about any medications you are already taking before he prescribes another. Pharmacists are often the most reliable source of information on drug interactions.

TIMING THE DOSAGE

Ask your doctor or pharmacist for any information about the medicine that would help you time the dosage and the baby's feedings to get the most medicine into you, but the least into your milk.

- If the medication is one that should be used with caution, it may help to take the medication right after feeding your baby. Most milk is freshly made during the feeding and the breast stores only a small quantity. While baby is feeding, the blood flow to the breasts and, therefore, the potential delivery of the drug to your milk is highest. It decreases after the feed.
- Most drugs reach their maximum concentration in the breastmilk 1-2 hours after being taken. So, taking medication right after you feed allows much of the medicine to be cleared from your milk before the next feeding.

- Best to take once-a-day medications just before your baby's longest feeding interval (usually right after putting your baby to sleep at night), unless the side effects of the medication could keep you and/or your baby awake. With once-a-day medication, when you take the medicine has less effect on the concentration of the drug in breastmilk than with medications taken 3-4 times a day.
- While timing your dosage may help to minimize your baby's exposure to the drug in your milk, don't make yourself and your baby crazy trying to delay or schedule feedings. If you have a baby who nurses frequently throughout the day and night, you will probably both be calmer and better off if you take the medicine as directed and nurse your baby on cue.

COMMON MEDICATIONS THAT ARE SAFE TO USE WHILE BREASTFEEDING

The safety of the following medications is established for short-term use only. If you are required to take one of these for more than one or two weeks, consult a physician.

acetaminophen	asthma medications (cromolyn, inhalant bronchodilators)	Kaopectate
acyclovir	barium	laxatives
anesthetics local (e.g., dental work)	chloroquine (antimalarial)	muscle relaxants
antacids	cortisone	pinworm medications
antibiotics (tetracycline* and sulfa**)	decongestants	propranolol
anticoagulants	digitalis	propylthiouracil
anticonvulsants	diuretics	silicone from implants
antihistamines	ibuprofen	thyroid medications
aspartame	insulin	vaccines
		vitamins
* Avoid taking tetracycline for longer than ten days		
** Avoid in newborn period		

DRUGS THAT REQUIRE CAREFUL MONITORING BY A PHYSICIAN WHEN TAKEN WHILE BREASTFEEDING

Whether these drugs and medications are safe to take while breastfeeding depends on many factors: the dosage, age of infant, duration of therapy, and timing of dosage and breastfeeding. Consult a physician knowledgeable about drugs during breastfeeding if you need to take any of the following medications long-term.

alcohol	general anesthetics*	morphine
antidepressants	indomethacin	Zoloft
aspirin	isoniazid	Paxil
codeine	lithium**	phenobarbital
Demerol	metoclopramide	Prozac
ergots	metronidazole (Flagyl)***	Valium