Breastfeeding and Drugs

Drugs taken by a breastfeeding mother may pass into her breastmilk. The word ‘drug’ includes all alcohol, tobacco, illegal drugs, over-the-counter medications, prescription medications or any other substance that causes changes in mood, behaviour, cognition or awareness (National drug strategy 2010–2015).

This fact sheet can help you work out which common drugs are safe to take while breastfeeding. This is a general guide only. Before taking any drug, talk to your doctor or pharmacist. You can also call the Medicines Line on 1300 Medicine (1300 633 424).

Remember...

- Always tell your doctor or pharmacist if you are breastfeeding.
- If you are prescribed medication, try feeding your baby just before you take the medication to limit the amount passed into your breastmilk.
- Limit or avoid drinking alcohol or smoking while breastfeeding.
- Illegal drugs and drugs prescribed for someone else are harmful for you and your baby.

All drugs you take while breastfeeding may pass into your breastmilk. This is often in very small amounts. The amount that passes into the milk depends on:

- the type of drug
- the dose
- the level of the drug in your body when the baby breastfeeds. This is lowest just before you take the next dose. This is a good time to feed your baby.

Continue to breastfeed

Many medications prescribed for you do not need to be avoided when you are breastfeeding. Breastfeeding has many advantages for you and your baby. You should only stop breastfeeding if a drug you take will harm your baby and there is no other treatment option. Your baby may have already been exposed to more medications while you were pregnant than through breastmilk.

Choose the right medication

A doctor should not prescribe you a medication to take while breastfeeding unless it will really help your condition.

Not treating an illness can be more harmful than taking some medications. There may be more than one type of medication that can treat a condition. Your doctor or pharmacist will choose the safest drug for you.

Drugs to relieve headache, aches, pain or fever

- Paracetamol is safe to take while breastfeeding if taken as directed. Common brand names are Panadol, Dymadon and Panamax.
- Aspirin is safe to take for pain occasionally. Try not to breastfeed for 1 to 2 hours after taking the dose to minimise the amount in your breastmilk. Common brand names are Disprin, Aspro and Solprin.
- Creams and sprays for muscle pain are safe to use.
- Ibuprofen (Nurofen, Actiprofen) or diclofenac (Voltaren) are the preferred anti-inflammatory drugs to use while breastfeeding. Take them only in low doses and only for a short time.

Drugs for cold, flu and asthma

- Avoid cold and flu products containing pseudoephedrine and phenylephrine. These include Sudafed and Demazin. These drugs can cause babies to be restless. Pseudoephedrine can also reduce the amount of breastmilk your body can make.
- Lozenges and gurgles for sore throats are often safe. It is best to avoid gurgles containing povidone-iodine (for example Betadine and Viodine) while breastfeeding.
- Normal asthma treatment is often safe and can be continued.

Drugs for hay fever and allergies

- Some antihistamines can cause sleepiness and should be used with caution. Loratadine (Claratyne), cetirizine (Zyrtec) and fexofenadine (Telfast) do not cause sleepiness in small doses. Loratadine (Claratyne) and cetirizine (Zyrtec) are preferred.
- Nasal sprays such as budesonide (Rhinocort) and beclomethasone (Aldecin and Beconase) are often safe to use. These may be prescribed by your doctor if needed.

Drugs for preventing pregnancy (contraception)
Breastfeeding mothers planning to take the contraceptive pill should only be prescribed the mini-pill. Common brand names include Microlut, Noriday, and Micronor.

Combined oral contraceptive pills should not be taken. Talk to your doctor or pharmacist for more information about this.

The morning-after pill (Postinor-2) is quite safe for emergency contraception.

Depo-Provera and Depo-Ralovera (3-monthly injectable contraceptives) are also safe for use. They should be given to you about 6 weeks after the birth.

Talk to your doctor if you are planning to use implanted contraceptive devices. Small amounts will pass into your breastmilk.

Drugs for constipation

- Fibre-based laxatives are preferred while breastfeeding. Common brand names are Metamucil and Fybogel.
- Large doses of other laxatives may cause your baby to have diarrhoea. Check your dose with your doctor or pharmacist.

Vitamins, minerals and herbal preparations

- Some vitamin and mineral supplements are safe to use during breastfeeding. B vitamins in normal doses may even be helpful for mothers lacking energy.
- Drugs with natural ingredients are not always safer to use. Natural drugs like herbal preparations may contain ingredients that can be dangerous to your baby. Always check with your pharmacist or doctor if you want to take a herbal supplement while you are breastfeeding.

Alcohol

Alcohol passes into breastmilk. It may still be in the milk some hours after drinking.

- The safest option is to avoid drinking alcohol altogether.
- If you do decide to drink alcohol, limit the amount you drink. Try to avoid alcohol in the first month until breastfeeding is well established. After this, limit alcohol to 2 standard drinks per day.
- If you need to drink, it is safest to wait until after a breastfeed. Aim to wait about 2 hours after each standard alcoholic drink before you breastfeed. This gives the alcohol in your body time to decrease.
- Try expressing breastmilk in advance if you plan to drink alcohol.
- Alcohol can affect your coordination and reaction time and cause drowsiness. When you and your baby’s carer have these effects, your baby may be at increased risk of injury.
- If you continue drinking alcohol, talk to your doctor or a breastfeeding-trained health professional for more information about minimising the harm to your baby.

Smoking

Smoking can have harmful effects on babies and can reduce how much breastmilk your body makes. All parents and carers should try to stop or decrease smoking as much as possible.

- Oral forms of nicotine replacement therapy (NRT) such as gum, lozenges, mist and inhalators are best for breastfeeding women.
- NRT patches can also be used to help you quit while you’re breastfeeding, on the advice of your doctor.
- NRT is always safer than smoking.
- If you do smoke, make sure you smoke only after feeding your baby. Avoid smoking in the same room as your baby (smoke outside if possible).

Illegal and non-prescribed drugs

Illegal and non-prescribed drugs include marijuana, heroin, amphetamines, and prescription drugs prescribed for another person. These drugs can pass into breastmilk and are harmful to the baby. Continued use can also cause both the mother and baby to be dependent on the drugs. It is always best to avoid illegal and non-prescribed drugs during breastfeeding.

If you decide to take illegal or non-prescribed drugs, you may be able to minimise the harm to your baby by breastfeeding immediately before drug use, or expressing milk before taking drugs so you have a safe supply ready to go for your baby. It is also very important to plan for a trusted person to care for your baby if you are taking drugs that make you feel drowsy or tired.

- Stimulant drugs (e.g. amphetamines) can make your baby irritable.
- Opioid drugs can make your baby drowsy and feed poorly. These include illegal drugs like heroin and prescription drugs like morphine, methadone or oxycodone.
- Marijuana can cause you and your baby to be sleepy.
- Drugs prescribed for someone else are not safe for you to use while breastfeeding.
For more information

For more details, talk to your pharmacist, doctor or child health nurse. You can also:

- call the Medicines Line on 1300 Medicine (1300 633 424)
- visit the National Prescribing Service website (http://www.nps.org.au/)
- call the Queensland Health line on 13 HEALTH (13 43 25 84)
- call Quitline on 13 78 48.

Resources for parents, families and carers


Acknowledgement

This fact sheet is consistent with the National breastfeeding strategy 2010–2015.

Information is drawn from:

- Children’s Health Queensland Hospital and Health Service 2015, Child health information: Your guide to the first 12 months.
- National Health and Medical Research Council 2012, Infant feeding guidelines.

This fact sheet is the result of input and effort from many health professionals in Queensland. Their help with the content is greatly appreciated.

This information is provided as general information only and should not be relied upon as professional or medical advice. Professional and medical advice should be sought for particular health concerns or events. Best efforts have been used to develop this information, which is considered correct and current in accordance with accepted best practice in Queensland as at the date of production. The State of Queensland (Queensland Health) does not accept liability to any person for the information provided in this fact sheet nor does it warrant that the information will remain correct and current. The State of Queensland (Queensland Health) does not promote, endorse or create any association with any third party by publication or use of any references or terminology in this fact sheet.