Drugs taken by a breastfeeding mother may pass into the milk through her bloodstream, usually in very small amounts. The extent to which this happens depends on a number of factors, including the nature of the drug concerned, the fat content of the breastmilk and the drug level in the mother’s body. Some medications do not need to be avoided if you’re breastfeeding. When you do need medication, however, feed your baby just before your next dose is due to reduce your baby’s exposure to the drug. Use this fact sheet as a ready reference to work out which common drugs are safe to take. If in doubt, talk to your doctor or pharmacist before taking the drug.

**Maintain breastfeeding**

Breastfeeding is the normal way to feed babies and has many advantages for both you and your baby. Its benefits are so important that breastfeeding should only be discontinued if there is strong evidence that a drug taken by the mother will harm the infant and there is no alternative treatment.

**Choose the right medication**

Breastfeeding mothers should not be given a medication unless there is convincing evidence that it will really help the mother’s condition at the time. A worsening illness can have a greater affect on a mother’s breastfeeding ability than some medical treatments. If there is a range of suitable drugs available, your doctor or pharmacist should choose the drug that is the absolute safest, based on evidence.

**Exposure in the womb**

Babies are exposed to more medication in the womb than through breastfeeding. If you have been taking medications during your pregnancy – for example, drugs to control epilepsy – your baby will already have been exposed to more drugs in the womb than through your breastmilk.

**Common breastfeeding concerns**

**Drugs and breastfeeding**

**Remember…**

- Drugs taken by a breastfeeding mother may pass into the milk.
- Make sure you tell your doctor you are breastfeeding.
- Most drugs prescribed by a health professional do not need to be avoided.
- Some over-the-counter drugs are safe. Check this fact sheet, and ask your doctor or pharmacist if you are still unsure.
- Feed your baby just before you take your medication.
- Some vitamin and mineral supplements are safe.
- Reduce the amount of alcohol you drink, and stop or decrease smoking as much as possible.
- Avoid taking illegal drugs and drugs prescribed for someone else.

Drugs to relieve headache, aches, pain or fever

Paracetamol, when taken as directed, is quite safe to take while breastfeeding. Common brand names for paracetamol include Panadol, Dymadon and Panamax.

Aspirin (including Disprin, Aspro and Solprin) is safe to take for pain occasionally, but not regularly.

If possible avoid breastfeeding for 1–2 hours after the dose to minimise the amount to baby.

More severe pain can be treated with stronger products, such as paracetamol-codeine combinations. These include Panadeine, Dymadon Co and Codalgin.

For period or muscular pain, you can take the above drugs. As well, anti-inflammatory drugs such as ibuprofen (Nurofen, Actiprofen) and diclofenac (Voltaren) are very effective, but should be taken in low doses for short periods of time only.

Creams and sprays available for muscle aches and pains are safe to use. Mefenamic acid (found in Ponstan) and Indomethacin (eg. Indoicid) are best avoided by breastfeeding mothers. Other anti-inflammatory drugs such as Ibuprofen or diclofenac are preferred.

**Cold, flu and asthma drugs**

Breastfeeding mothers should try to avoid cold and flu tablets containing pseudoephedrine and phenylephrine, such as Sudafed and Demazin. That’s because these agents can sometimes cause breastfeeding babies to become irritable and restless. Pseudoephedrine can also cause a significant reduction in milk volume.

Try Imidazole nasal spray decongestants instead, like Sinex and Otrivin. Lozenges and gargles are safe for sore throats, though it is best to avoid gargles containing povidone-iodine, such as found in Betadine and Viodine.

Most cough mixtures are safe, but avoid products containing pseudoephedrine and phenylephrine.

Asthma treatment should be the same for breastfeeding women as for those who are not breastfeeding, and is quite safe.

**Hayfever and allergies**

There are some antihistamines on the market such as loratadine (Claratyne), fexofenadine (Telfast), and cetirizine (Zytrec) that do not cause sleepiness. Of these, loratadine (Claratyne) is the safest for you to use.

Older antihistamines such as dexchlorpheniramine (Polaramine), promethazine (Phenergan) and pheniramine (Avil) may cause drowsiness as a side effect. Use with caution while breastfeeding and observe infant for side effects such as sedation. Avoid sustained release preparations (such as Polaramine Repetabs).

Nasal sprays such as budesonide (Rhinocort) and beclomethasone (Aldecin and Beconase) are quite safe and may be prescribed for you by your doctor.
**Contraception**

If you want to take the contraceptive pill while breastfeeding, you should only be prescribed the mini-pill. Common brand names include Microlut, Noriday, Locilan and Micronor.

Combined oral contraceptive pills – like Nordette, Microgynon, Triphasil, Triquilar and many others – should not be taken.

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

Depo-Provera and Depo-Ralovera (both three-monthly injectable contraceptives) are excreted into breastmilk in very low amounts, and are also safe for use. They should be given about six weeks after the birth.

If you are planning to use implanted contraceptive devices (such as Implanon or Mirena) small amounts are excreted into the breastmilk and you should discuss the risks and benefits with your doctor prior to implantation.

**Constipation**

If breastfeeding, the safest laxatives to use are fibre-based products, such as Metamucil and Fybogel, followed by docusate (Coloxyl).

Large doses of senna (as found in Senokot, Coloxyl with Senna and Nulax) or bisacodyl (Duro lax) can cause diarrhoea in your baby.

**Vitamins, minerals and herbal preparations**

Some vitamin and mineral supplements are safe to use during the breastfeeding period.

In fact, B-group vitamins in normal recommended doses may be particularly beneficial to mothers lacking energy.

Be aware, though, that natural drugs like herbal preparations may be natural, but they may not necessarily be harmless. Many herbal drugs contain chemical substances that may be dangerous to the infant and numerous poisonings have been reported in the past.

So, if you are breastfeeding and want to take a herbal supplement, check with your pharmacist, doctor or child health nurse about its safety first.

For example, high doses of garlic can really irritate breastfed babies, so it’s best to avoid garlic as a supplement.

At all times, do not use more than the recommended standard dose of herbal products, and use single ingredient products rather than combination products of unknown herbs.

**Alcohol**

If a breastfeeding mother drinks alcohol, the alcohol concentration in her breastmilk is the same as in her bloodstream.

Currently, it’s recommended that, for each standard drink you consume, your baby should not be breastfed again for 2–3 hours. This gives the alcohol level a chance to reduce.

While you are breastfeeding, your alcohol consumption should not be regular or heavy.

**Smoking**

If you’re breastfeeding, you should try to stop or decrease your smoking as much as possible.

If you do smoke, make sure you smoke only after feeding your baby, and never in the same room as your baby.

Nicotine patches or gum used to quit smoking are safer than continued smoking, as long as you do not smoke as well.

Mothers who use nicotine gum, which produces higher nicotine levels than patches, should not breastfeed for 2–3 hours after using the gum.

Smoking, apart from the adverse effects on babies, has also been shown to reduce breastmilk production.

**Illicit drugs**

Illicit drugs include illegal drugs – like marijuana, heroin and amphetamines – and prescription drugs prescribed for another person.

You should avoid the use of illegal drugs or prescription drugs prescribed for another person if you are breastfeeding.

Stimulant drugs, such as amphetamines, can lead to your baby being irritable.

Opioid drugs – including illegal drugs like heroin and prescription drugs like morphine, methadone or oxycodone – can lead to your baby being excessively drowsy and feeding poorly. Marijuana also has a sedative effect.

Prolonged exposure to these drugs can also result in both the mother and the baby becoming dependent on the drugs.

**For more information**

Keep this fact sheet as a handy reference.

If you want more details, talk to your pharmacist, doctor or child health nurse, or call the Medication Helpline on 1300 888 763 or 13 HEALTH (13 432 584).

**Acknowledgement**

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

To access the full set of fact sheets, go to http://www.health.qld.gov.au/childyouth/factsheets.