Breastfeeding - Mother's Medicines and Smoking

Definition

- Breastfeeding questions about mother's medicines, drugs or smoking. Main concern is how much gets into breastmilk and could this affect the baby.

Topics Covered

Go to the topic that relates to your question for advice:

1. Over-the-counter medicines
2. Herbal products
3. Prescription medicines
4. Internet resources for medicine use in nursing women
5. Vaccines
6. Marijuana or other drug use
7. Smoking or tobacco use

Care Advice

1. **Over-the-Counter Medicines That Are Safe to Use While Breastfeeding:**
   - It's best to take your medicine(s) at the end of a feeding. Reason: It will be out of your system by the next feeding.
   - Most common drugs are safe. These include Tylenol, Motrin or Advil, stool softeners, and cough drops (including honey). Nose sprays, eye drops, and skin creams are also safe.
   - **Pain or Fever:** Acetaminophen (such as Tylenol) and ibuprofen (such as Advil) are safe. Aspirin should be avoided. (Reason: risk for bleeding or Reye syndrome). Baby aspirin (81 mg) once daily for mothers with special medical issues is safe.
   - **Decongestants (like Sudafed):** Do not use these meds. They can reduce milk supply in some mothers.
   - **Nose Sprays:** Nose sprays can be used. A decongestant spray (such as Afrin) is a safe choice while nursing. Do not use for more than 3 days. A steroid nose spray can also be used for a longer time. Saline nose sprays are safe to use as needed for stuffy noses.
   - **Allergy Meds:** These drugs for allergy symptoms are OK during breastfeeding. Non-sedating allergy meds (long-acting ones such as Claritin) are preferred. They can be given as needed once per day at bedtime. Do not use combination products with decongestants. Benadryl can decrease milk supply.
   - **Cough Meds:** Dextromethorphan (DM) is okay to use while nursing with caution. Breastfed babies should be watched for sleepiness or poor feeding. Cough drops and honey are safe to use by moms for a cough. (Caution: Do not give honey to infants less than 1 year old).
   - Talk with your doctor or nurse about other medicines before using.
2. **Herbs - Use with Caution:**
   - Herbs are sometimes suggested to help increase milk supply. But, there is a lack of research that supports that they actually work.
   - Ask your child's doctor or lactation specialist before you use herbal products.
   - The quality of herbal products isn't regulated which can pose a safety risk.
   - They can interact with other needed drugs and cause side effects.

3. **Prescription Medicines That Are Safe to Use While Breastfeeding:**
   - It's best to take your medicine(s) at the end of a feeding. Reason: It will be out of your system by the next feeding.
   - Some common safe prescription drugs are penicillin, erythromycin, cephalosporins, or antiviral medicines. Stool softeners, nosedrops, eyedrops, and skin creams are also safe.
   - Don't use sulfa drugs like Septra and Bactrim until baby is 4 weeks old.
   - **Hydrocodone and oxycodone.** Lower doses (5 mg) taken occasionally are generally safe to use after surgery. These drugs are present in very low levels in the milk. Higher doses (10 mg) and frequent/prolonged use may lead to a sleepy baby. Watch your baby closely. Newborns and premature babies are at higher risk for sedation. Don't take more than 30 mg oxycodone per day. Switch to Motrin or TYLENOL when pain lessens and as soon as you can.
   - **Meperidine (Demerol).** Not advised if breastfeeding.
   - **BCPs.** Hormone-based birth control pills (BCP's) can decrease your milk volume. Make sure your milk supply is well established before starting this type of birth control. This means at least 6 weeks or longer. BCPs that use only progestin (mini-pills) are advised. You can also use Depo-Provera or Implanon. These products will have the least effect on your milk volume.
   - **Pain medicines used in surgery.** The gas that you breathe in during surgery (general anesthesia) clears quickly from your body. Milk levels are low. It is safe to breastfeed once you are alert enough. To be safe, you could pump and dump the milk right after surgery.
   - Talk with your doctor or nurse about other medicines before using.

4. **Internet Resources for Mother's Meds and Breastfeeding:**
   - For all other drugs, call your doctor or use one of these resources.
   - **Infant Risk Call Center.** Provides current information on the use of medications during pregnancy and breastfeeding. Organized by Dr. Tom Hale at Texas Tech University Health Sciences Center. They answer calls Monday-Friday 8 am - 5 pm central time. (806)-352-2519. Website at [www.infantrisk.com](http://www.infantrisk.com).

5. **Vaccines:**
   - All vaccines are safe for a mother to get if she is nursing.
   - Live vaccines (such as MMR) are not given to women who are pregnant.
   - Check the CDC website ([www.cdc.gov/breastfeeding](http://www.cdc.gov/breastfeeding)) for more info.
6. **Marijuana or Other Drug Use:**
   - **Marijuana.** Marijuana use by nursing mothers is strongly discouraged. It is found in breastmilk at an 8 times higher level than in blood. It stays in your baby's body for up to 3 weeks. Early exposure may cause long-term changes in your child's behavior and development.
   - **Other Illegal Drugs.** Nursing mothers should avoid all illegal mind-altering drugs. Drugs like heroin are found in the milk at high levels. They are passed quickly on to the baby. Exposure can be harmful to your baby. Breastfeeding should be stopped in cases of chronic substance abuse.

7. **Maternal Smoking or Tobacco:**
   - It is best to not use tobacco. But, the benefit of nursing your baby generally outweighs the risks of smoking.
   - Nicotine passes into the milk. It may cause restlessness, increased heart rate, and loose stools. Heavy tobacco use (over 1/2 pack per day) can decrease your milk supply. It can also affect milk letdown.
   - If you smoke, do not smoke around your baby.
   - Feed your baby before you smoke. Hold off on feeding your baby after you smoke as long as you can.
   - Talk to your doctor about starting a smoking cessation program.
   - Products like nicotine gum or a patch are better for your baby than smoking.
   - If you can't quit, cut back on the number of cigarettes you smoke daily.
   - If you must smoke, use low-nicotine cigarettes.

**Call Your Doctor Back If...**

- Your baby becomes sick
- Your baby starts to look or act abnormal
- You have other questions or concerns

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*This handout is intended for informational purposes only and should not be used as a substitute for the care and advice of a medical professional. The accuracy of the information contained in this handout is not guaranteed and there may be variations in treatment that your doctor or nurse may recommend based on individual facts and circumstances.*

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