



the women's
the royal women's hospital
victoria australia

MEDICINES IN BREASTFEEDING

Breast milk provides babies with unique nutrients that are ideal for their immune protection, growth and development. If you are concerned about the safety of any medicines you are taking while breastfeeding, seek the advice of your doctor or healthcare provider.

This factsheet contains general advice only; it is not intended to replace the individual care and advice of your healthcare provider. It does not include information about all side effects and should be read together with the product information provided with medicines.

What are medicines?

Medicines are preparations used for the treatment or prevention of disease. Medicines include:

- Prescription medicine - prescribed by doctors, dentists or other health professionals
- Over-the-counter (OTC) medicine - purchased over-the-counter at pharmacies, supermarkets or health food stores.

Medicines taken by breastfeeding mothers may pass into breast milk, usually in small quantities and rarely affects breastfed babies.

**For information on the use of herbal and traditional medicines please refer to the Herbal Medicines in Pregnancy and Breastfeeding factsheet.*

Is it safe to use prescription medicine while I am breastfeeding?

Most medicines are safe to take while breastfeeding. Talk to your doctor about the risks and benefits to you and your baby of any medicines you are prescribed. Also, ask your doctor about ways to reduce the amount of medicine passed into your breast milk. For example, it may be possible to take a lower dose of your medicine, take it for a shorter period or be able to take a quicker acting form to help reduce how much is passed into your breast milk.

When taking any medicine, watch for signs of possible side effects in your baby, such as increased sleepiness, rash and severe diarrhoea.

It is important to understand why you are taking a medicine and how to use it effectively and safely. Please talk to your doctor or pharmacist before starting any new medicines or stopping medicines while breastfeeding.

Is it safe to use over-the-counter (OTC) medicine while I am breastfeeding?

It is usually safe to take OTC medicines while breastfeeding. However, the label on non-prescription or OTC medicines usually advises breastfeeding women to speak to their doctor or pharmacist before using the medicine.

The following information contains general advice on treating common conditions with OTC medicines while you are breastfeeding.

What can I take for aches and pain?

Paracetamol may be used while breastfeeding¹ at the recommended dose to treat mild pain, such as headaches, toothaches, muscular pains or to reduce fever.

Non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen or diclofenac may be taken to help relieve pain and inflammation.

Low doses of aspirin, less than 150mg daily, are considered safe to take. Avoid large doses of aspirin while breastfeeding as it may be harmful to your breastfed baby.^{3,4}

What can I take for allergies and hayfever?

Allergies and hayfever symptoms include a runny and blocked nose, sneezing, itching of the nose, eyes, ears or throat and watery, red irritated eyes. Avoid aggravating factors where possible, such as pollen, house dust mites and animal dander (tiny flakes of skin shed by animals and pets, similar to human dandruff only smaller), where possible.

Antihistamines

Less sedating antihistamines such as loratadine can be used while breastfeeding for the relief of allergies and hayfever.⁵ Sedating antihistamines are not recommended because the medicine may pass into your breast milk and make your baby drowsy.

Eye drops

Topical eye drops for allergies and hayfever may be used as the amount transferred into breastmilk is likely to be low. Apply pressure against the inner corner of the eye (over the tear duct) for one to two minutes and blot away any excess drops – this will help lessen how much medicine gets into your system.

Nasal sprays

Corticosteroid nasal sprays containing beclomethasone and budesonide are considered safe to use during breastfeeding. Decongestant nasal sprays containing oxymetazoline, xylometazoline or tramazoline may be used if corticosteroid and antihistamine nasal sprays have not relieved the symptoms.

What can I take for cold and flu?

The common cold is caused by a virus. It is best to treat the individual symptoms of the common cold or flu. Single ingredient products are usually preferred for short term use at the recommended doses. If you are feeling very unwell because of a cold, the flu or sinus problems, you should contact your doctor.

Cough

For a dry cough, a cough suppressant such as pholcodine or dextromethorphan is considered safe while breastfeeding. A dry, irritating cough is usually associated with a postnasal drip.

For a chesty or productive cough, an expectorant such as guaifenesin or a mucolytic such as bromhexine may be used at the recommended dose.

Nasal symptoms

Steam inhalations and sodium chloride 0.9% nasal drops or sprays may be used to relieve a blocked nose in breastfeeding women. In general, a decongestant nasal spray containing oxymetazoline, xylometazoline or tramazoline may be used for 3 to 5 days. There is an increased risk of developing rebound congestion from prolonged use of nasal decongestants.

Avoid oral decongestants such as pseudoephedrine or phenylephrine as they may reduce breast milk supply.⁶

Sore throat

Throat lozenges containing local anaesthetic, antibacterial agents or benzydamine may be used while breastfeeding. Avoid excessive use as it may cause unwanted side effects such as diarrhoea.

Gargling salt water or drinking lemon and honey products may also help to ease a sore throat.

Avoid throat gargles containing povidone-iodine because it may affect the thyroid function of both you and your baby.⁷

What can I use for cold sores?

Prevention of cold sores is always better than treatment. To prevent cold sores, it is recommended that you:

- use lip-balm with SPF 15+
- avoid stress
- avoid too much sun and wind exposure
- avoid injury to the lips or skin
- avoid foods or drinks that can trigger an outbreak.

The recommended treatment for cold sores is ice applied to the affected area as well as using lip balms to keep the area moist. Aciclovir cream can be used at the recommended dose during breastfeeding. Famciclovir tablets are not recommended for use during breastfeeding. If the cold sore is severe, or if further treatment is needed, speak to your doctor for a prescription medicine.

What can I take for constipation?

It is always better to try adding more fibre to your diet (for example, fruit, vegetable, cereals, etc.) and drinking plenty of water (aim for eight glasses a day) before taking medicines. Remember that dietitians can help you with dietary advice. If you do require a laxative, your doctor or pharmacist will advise you on the most suitable product.

Stool softeners such as docusate or osmotic laxatives such as lactulose, glycerol or macrogol are safe to use at the recommended doses while breastfeeding.

Stimulant laxatives such as senna or bisacodyl may pass into the breast milk and cause diarrhoea in your baby.

What can I take for diarrhoea?

Most cases of diarrhoea are short-lived and do not require treatment with medicines.

Oral rehydration solutions are recommended to replace the loss of fluid and electrolytes.

Loperamide may be used while breastfeeding to treat the symptoms of diarrhoea. There is no need to stop breastfeeding if you have diarrhoea. If the diarrhoea is profuse, watery, bloody, accompanied by other symptoms such as fever or severe abdominal pain, or persists for longer than 48 hours you should see your doctor.

What can I take for heartburn?

Most cases of heartburn do not require treatment with medicine. Dietary and lifestyle changes can relieve mild symptoms. Try eating small, frequent meals and avoid rich or spicy meals, chocolate, citrus foods and coffee. Avoid lying down straight after a meal. If you need some symptom relief, use an antacid or ranitidine to ease discomfort. Talk to your pharmacist or doctor for advice if symptoms persist.

What can I use for head lice?

To treat head lice, use the “comb and conditioner” method to remove head lice and eggs every second day until no live lice have been found for 10 days.

Topical preparations containing permethrin are the treatment of choice while breastfeeding. Dimeticone or pyrethrin/piperonyl butoxide can also be used if needed. Your doctor or pharmacist can advise you on the most suitable preparation.

Treatment should be repeated in 7 days to kill lice that have hatched. Examine family members and close contacts for head lice infestation. If showing signs and symptoms of infestation, treat at the same time to prevent the spread of the infection. Bedding and clothing should be removed and washed in hot water.

What can I use for scabies?

If you suspect you may have scabies, speak to your doctor for treatment options while breastfeeding. Permethrin is the treatment of choice for breastfeeding women.

The nipple area should be cleaned of any topical products before your baby attaches to the breast to feed. Reapply the product to the washed area after feeding.

Treatment of the affected person, all household/family members and close contacts (even if they do not have symptoms) should occur at the same time to avoid re-infestation and further transmission.

What can I use for mouth ulcers?

Most mouth ulcers generally heal by themselves. Some over-the-counter creams or gels may be used to ease the pain or discomfort. Creams and protective pastes are safe to use while breastfeeding. Salicylic acid or benzydamine containing products may also be used. Talk to your doctor or pharmacist for further advice before using any of these products.

What can I use for vaginal thrush?

Topical antifungal cream and pessaries containing clotrimazole, miconazole and nystatin are safe to use while breastfeeding. A single dose of oral fluconazole is considered safe when oral treatment is preferred. A small amount of fluconazole is transferred into the breast milk, but it is unlikely to produce any harmful effects in your breastfed infant. Talk to your doctor or pharmacist for further advice.

What can I use for haemorrhoids?

The use of anorectal products such as ointments or suppositories to treat haemorrhoids are safe while breastfeeding as it is unlikely to be passed into breast milk. The best treatment is prevention. It is important to eat additional fruit and fibre and drink plenty of fluid in order to avoid constipation.

What can I use for worm infections?

Both pyrantel and mebendazole are safe to use to treat worm infections while breastfeeding as they are poorly absorbed from the gut and unlikely to be passed into breast milk.

To prevent another worm infection:

- Wash hands and nails thoroughly with soap and water, particularly after going to the toilet, after changing nappies, before preparing food and before eating food.
- Discourage scratching of the bottom and nail biting.
- Keep fingernails short.
- Bathe or shower daily.
- Wash all sheets, bed linen, pyjamas and sleepwear in hot water to kill any pinworm eggs.
- Clean the toilet seat regularly with disinfectant.

