Is It Safe to Take This While I’m Breastfeeding?

This chapter explains what we know about how some common drugs and substances affect breast milk and breastfeeding. UWMC lactation consultants are happy to talk with you about how medicines, recreational drugs, and other substances may affect your breast milk.

Alcohol

Alcohol goes into breast milk very quickly. It can limit the “let-down” reflex, so your baby may get less breast milk.

If you choose to drink once in a while:

- **Do not breastfeed for 3 hours** after having 1 drink. (“1 drink” is 4 ounces of wine, 12 ounces of beer, or 1 ounce of hard liquor.)
- **Add 1 more hour** not to breastfeed for each drink after your first one.

If you drink every day or you “binge” drink, talk with your health care provider.

Anesthesia

Sometimes breastfeeding mothers are told to pump and throw away their milk after they receive anesthesia drugs, but that is not necessary. Very little of these medicines enter the milk, and even less are absorbed by the baby. The American Academy of Pediatrics (AAP) and other medical authorities agree that anesthesia and most pain medicines do not affect breastfeeding.

If you receive anesthesia, you can start breastfeeding again as soon as you have recovered from its effects.
Contraceptives (Birth Control Methods)

Your risk of getting pregnant in the first 6 months after giving birth is low:

- **If** you are feeding your baby only by breastfeeding.
- **And** your menstrual periods have not returned.

Still, you may want to use a contraceptive to decrease the chance that you might get pregnant right away. Birth control methods that are safe for your baby, do not contain hormones, and do not affect your milk supply are:

- Condoms
- Diaphragms
- Cervical caps
- Some IUDs

But, contraceptives that contain estrogen (some pills, patches, and vaginal rings) may reduce your milk supply. Contraceptives that contain progesterone (some pills, some IUDs, shots, and implants) seem to be a better choice during breastfeeding. Some experts caution mothers to wait to start using the hormones until after their milk supply is established.

Please talk with your doctor about family planning:

- At your prenatal care visits
- In the hospital after you give birth
- At your 6-week postpartum visit

This will help ensure you have a good plan for contraception after your baby is born.

Caffeine

Caffeine enters breast milk in fairly small amounts. Two servings a day for mothers is considered safe for breastfed babies. One serving is about 150 mg of caffeine, or 8 ounces of coffee.

Breastfed infants whose mothers drank 8 to 9 servings of caffeine a day had sleeping problems and were more fussy than usual.
**Cocaine**

**If you use cocaine, do not breastfeed.** Babies have almost died from exposure to cocaine through breast milk. They can have:

- Seizures
- Extreme fussiness
- Diarrhea
- Vomiting

If you plan to stop using cocaine so that you can breastfeed, get help from a drug treatment program.

If you are breastfeeding and you use cocaine, pump and discard your milk for at least 36 hours after using the drug.

Secondhand smoke from freebased cocaine can cause the same symptoms in your baby as it does in the user. Do **not** let people use cocaine around your baby.

**Cold Medicines**

The AAP approves the use of decongestants by breastfeeding mothers, but they may reduce milk supply. If your milk production is already low, do not use decongestants.

A saline nasal spray or nasal wash with sterile water can be very helpful for clearing nasal congestion. It can also help you recover from a cold faster.

**Local and Dental Anesthetics**

Numbing medicines (anesthetics) that are used for dental work or medical procedures are usually found only at very low levels in breast milk. There is no need to interrupt breastfeeding if you are given these local anesthetics.

**Marijuana**

Marijuana may reach high levels in breast milk, and it may affect your baby. Marijuana:

- Delays your baby’s motor development
- May inhibit the hormones you need for breast milk production
- May impair your ability to care for your baby well

Do not breastfeed for several hours after occasional marijuana use.

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*Talk with your health care provider about taking cold medicines while you are breastfeeding.*
Methadone

Women who are on methadone maintenance can breastfeed their infants, according to the AAP.

Pain Medicines

- **Acetaminophen (Tylenol and other brands):** Only small amounts of acetaminophen get into breast milk. The AAP approves the use of acetaminophen by breastfeeding mothers.

- **Ibuprofen (Advil, Motrin, and other brands):** Ibuprofen gets into milk in very low levels. The AAP approves ibuprofen for use by breastfeeding mothers.

- **Naproxen (Aleve, Naprosyn, and other brands):** Naproxen is approved for use by the AAP. But, because it stays in your body longer than acetaminophen or ibuprofen, some nursing mothers choose those pain medicines instead.

Tobacco

Nicotine passes easily into breast milk. The more cigarettes you smoke, the more nicotine is in your breast milk. Nicotine can:

- Decrease your milk supply
- Cause these symptoms in your baby:
  - Vomiting
  - Diarrhea
  - Restlessness
  - Colic

Make every effort to stop smoking during pregnancy and breastfeeding. If you cannot stop all the way, smoke as little as possible. Never smoke just before nursing. Never smoke in the room your baby is in. Also, do not let others smoke near you and your baby.

Ultrasound, X-Rays, and Radiopaque Dyes

The American College of Radiology states that nursing mothers do not need to stop breastfeeding if they have an ultrasound or an X-ray. Even if you need a contrast dye for an imaging test, only very small amounts of the dye enter your breast milk. The iodine in these dyes is not absorbed by the baby.