

Learning Portal Lite: Breastfeeding

This is a one-page summary; see the [full version online](#)

Breastfeeding benefits

Breastfeeding has multiple advantages:

- Provides ideal nutrition to the infant
- Encourages closeness between mother and baby
- Imparts a range of bioactive molecules that stimulate infant immunity
- Allows healthy microbial colonisation
- Has long term benefits to the mother (e.g. decreased breast and ovarian cancer risk) and infant (e.g. lower risk of diabetes)

Medicines and breast milk

Factors affecting the suitability of a medicine in breastfeeding include:

- Maternal pharmacokinetics: concentration in maternal plasma, extent of protein binding, whether medicine is a weak acid or base, fat solubility and molecular weight of the medicine.
- Infant pharmacokinetics: extent absorbed from baby's gut, and infant clearance.
- Pharmacology: potential side effects, including whether it inhibits lactation.

Reducing risk

Choice of drug should be based primarily on suitability for the mother and her condition, and then compatibility with breastfeeding assessed. Non-essential medicines should be avoided. If possible, mothers should take the smallest effective dose, use medicines that have low systemic concentrations, and avoid new medicines with limited safety data.

Questions to ask

These include:

- How old is the infant, were they premature, and are they healthy?
- How often is the infant being breastfed?
- Is the drug essential and what alternatives might be suitable?
- Is mother already taking the medicine(s) concerned?
- Does the mother have any medical conditions or take any other medicines?

Information sources

SmPCs on the emc and/or MHRA website, [Lactmed](#), [UKDILAS](#), [Medications in Mothers' Milk](#) (subscription required), the [NHS website](#) to support patients' decision-making.

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