

INTRODUCTION to Medications and Breastfeeding Links

Previously, it was thought that there was a “barrier” similar to the brain/blood barrier that prevented medications from passing from the mother’s bloodstream to her milk. Mothers were assured that the medications they took would not reach their babies.

As better methods of testing mother’s milk and the mother’s and her baby’s blood evolved, it was found that many medications DO pass from the mother to her baby. The American Academy of Pediatrics released updates in 1983, 89, 93 and 2001 called “The Transfer of Drugs and other Chemicals in Mother’s Milk”, providing research-based information to assist physicians in prescribing appropriately for mothers while reducing the risks to their infants.

The [Physician’s Desk Reference](#) is often used by health care professionals; however, it contains materials written by the pharmaceutical companies and is rarely updated¹. Mothers are then told they must stop breastfeeding by physicians and other health care professionals who are not aware of current information and resources available that will help them make better risk/benefit analyses.

With an increased awareness of [the risks of NOT breastfeeding](#) resources have been created so physicians and others can have access to research-based information about medications and breastfeeding.

Many recommend that among the factors to consider when making a risk/benefit analysis should be:

- When possible, avoid the use of medications, herbal or otherwise
- Know the importance of breastfeeding to the mother and infant’s health.
- When deciding which medication to recommend, utilize unbiased research that provides important information taking into account the “Mechanisms of [Drug Entry into Human Milk](#)” such as:
 - How different medications pass from the mother’s gut, to her blood stream, through her own liver and kidneys, to her breasts, to the milk, then to the baby’s gastrointestinal system and to his/her own blood stream.
 - How the medications bond with plasma protein, how fast acting they are, how the dose the infant receives compares to the pediatric dose of that medication, etc.
 - The effect of medications based on dose timing, age of the infant, etc.
 - The risk of exposure to the amount of medication that is actually active in the infant’s bloodstream weighed against the risk of denying the infant his mother’s milk. ([Link](#))

The links provided in the “Medications and Breastfeeding Links” document are provided to assist the health care provider and/or the patient in making informed recommendations and decisions for optimal infant and maternal health.