BEST PRACTICES Human Milk and Substance Exposure

		W W V
SUBSTANCE	BEST PRACTICES	EVID
Alcohol	Pump or feed before you drink. Wait 2 hours after each alcohol serving before providing milk to the baby. ^{1, 2}	Alcoho the sa not ind
Benzodiazepines	Take medication as prescribed. Feed the baby. ³ Watch for signs of sedation. ⁴	Most & at the breas
Cannabis	It is safest to reduce or eliminate use during the lactation period. ^{5, 6, 7} However, in the case of continued medical or recreational use, experts agree that the proven benefits of human milk likely outweigh the risk of cannabis exposure. It is unacceptable to withhold lactation support. ^{8, 9}	Cann of ma tract. the ef
Opioids	Long- or short-term opiate use is not a contraindication to breastfeeding, regardless of dose. ^{15, 16} Because of individual differences in metabolism, codeine is not recommended while breastfeeding, due to risk of infant overdose. ¹⁶	Most a 1-3 % gastra
Stimulants	Abstinence during lactation is recommended. In the case of a relapse, wait 24 hours after cocaine use and 48 hours after methamphetamine use to provide milk. ^{16, 18} Caffeine doses of ≤ 200mg are considered safe for lactation. ¹⁹	Caffei humai limitea
Smoking	Despite the risks, breast/chestfeeding while smoking is considered safer than formula feeding while smoking because of the proven health benefits of human milk, including a 50% reduction in the incidence of SIDS. ^{5, 21, 22}	Smoki milk su milk, ir

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hol is present in human milk and has been linked to many of same problems seen with prenatal exposure. Alcohol does increase milk production or let-down. ^{1, 2}

t benzodiazepines are considered safe or moderately safe nerapeutic doses.³ Infants exposed to benzodiazepines via astmilk may exhibit signs of sedation, such as apnea. ⁴

nabis transfer rate into human milk is estimated to be 0.8-1% naternal dose.^{8, 10, 11, 12} Bioavailability is incomplete in infants' GI ct. So infants absorb 0.1% of the parent's dose.¹¹ Little data on effects of exposure via breast milk, with inconclusive results.^{13, 14}

t opioids transfer into human milk at rates estimated at 6 of maternal dose.¹⁷ Because bioavailability is poor in infants' crointestinal tracts, it is likely that even less is absorbed.

eine, cocaine, and methamphetamine are present in the an milk of parents who use them. Infant exposure should be ed by feeding or pumping before use. ^{16, 18, 19, 20}

king during lactation has been associated with decreased supply, shorter lactation duration, altered composition of , increased incidence of SIDS, and asthma in offspring.^{5, 23}

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Link to References



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