# BREASTFEEDING AND MATERNAL MEDICATION Recommendations for Drugs in the Eleventh WHO Model List of Essential Drugs

Department of Child and Adolescent Health and Development

UNICEF

**World Health Organization** 

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#### INTRODUCTION

Often there is a need to decide whether a mother who is breastfeeding and who needs treatment with drugs can take the necessary medication and still continue breastfeeding safely. There are very few kinds of treatment during which breastfeeding is absolutely contraindicated. However, there are some drugs which a mother may need to take which sometimes cause side-effects in the baby. The summary box "Breastfeeding and Mother's Medication" on page 3 provides a preliminary guide. This document gives more detailed information about specific drugs from the Eleventh Model List of Essential Drugs.

#### HOW TO USE THE LIST

The drugs are listed in groups according to how they are used and the groups are listed alphabetically, in the same way as in the Eleventh Model List of Essential Drugs.

In order to find a particular drug, first look in the index and find the numbers of the sections in which the drug is listed. Some drugs appear in several sections under separate headings because they are used for different conditions. Find the section under the appropriate heading (for example, atropine is mentioned as a solution under 21.5 mydriatics and as an injection under 1.3 preoperative medication).

Read the text related to breastfeeding and compare the drug with others listed under the same heading. Decide whether the drug that you have selected is the best choice. For example, if you want to give a pain-killer, you will find under **2.1 non-opioids** that ibuprofen is a better choice for a breastfeeding mother than acetylsalicylic acid for long term therapy.

Letters in parentheses after the drug names indicate the reasons for the inclusion of complementary drugs:

- (A) When drugs in the main list cannot be made available.
- (B) When drugs in the main list are known to be ineffective or inappropriate for a given individual.
- (C) For use in rare disorders or in exceptional circumstances.

#### HOW DRUGS ARE CLASSIFIED FOR BREASTFEEDING

The following classifications are used in the list:

#### 1. Compatible with breastfeeding

Drugs are classified as compatible with breastfeeding if there are no known or theoretical contraindications for their use, and it is considered safe for the mother to take the drug and continue to breastfeed.

## 2. Compatible with breastfeeding. Monitor infant for side-effects

Drugs are classified in this way if they could theoretically cause side-effects in the infant but have either not been observed to do so or have only occasionally caused mild side-effects. Inform the mother about any possible side-effects, reassure her that they are unusual, and ask her to return if they occur or if she is worried.

If side-effects do occur, stop giving the drug to the mother, and if necessary find an alternative. If the mother cannot stop taking the drug, she may need to stop breastfeeding and feed her baby artificially until her treatment is completed. Help her to express her breastmilk to keep up the supply so that she can breastfeed again after she stops taking the drug.

#### 3. Avoid if possible. Monitor infant for side-effects

Drugs are classified in this way if they have been reported to cause side-effects in the infant, especially if the side-effects could be serious. Use these drugs only when they are really essential for the mother's treatment and when no safer alternative is available. Allow the mother to continue breastfeeding but give her clear instructions about observing the baby and arrange for frequent follow-up. If side-effects occur, stop the drug. If it is not possible to stop giving the drug, stop breastfeeding and feed the baby artificially until treatment is completed. Help her to express her breastmilk to keep up the supply so that she can breastfeed again after stops taking the drug.

#### 4. Avoid if possible. May inhibit lactation

Drugs classified this way may reduce breastmilk production and, if possible, they should be avoided. However, if a mother has to take one of these drugs for a short period, she does not need to give artificial milk to her baby. She can off set the possible decrease in milk production by encouraging her baby to suckle more frequently.

#### 5. Avoid

Drugs are classified in this way if they can have dangerous side-effects on the baby. They should not be given to a mother while she is breastfeeding. If they are essential for treating the mother, she should stop breastfeeding until treatment is completed. If treatment is prolonged, she may need to stop breastfeeding altogether. There are very few drugs in this category apart from anticancer drugs and radioactive substances.

#### SOME ADDITIONAL CONSIDERATIONS

The safety of certain drugs also depends on the age of the infant. Premature babies and infants less than 1 month of age have a different capacity to absorb and excrete drugs than older infants. Thus, in general, extra caution is needed for these infants. For some drugs, specific information is available with respect to age and you will find this mentioned in the list.

You may need to give a breastfeeding mother a drug that is not included in this list. Unless the drug falls into a category with clear contraindications (for example cytotoxic drugs), advise the mother to continue breastfeeding and ask her to come back if she notices anything worrying about her infant.

#### **Breastfeeding and Mother's Medication**

Breastfeeding Anticancer drugs (antimetabolites);

contraindicated: Radioactive substances (stop breastfeeding

temporarily)

Continue breastfeeding:

Side-effects possible Monitor baby for drowsiness.

Selected psychiatric drugs and anticonvulsants (see

individual drug)

*Use alternative drug if* 

possible

Chloramphenicol, tetracyclines, metronidazole,

quinolone antibiotics (e.g. ciprofloxacin)

Monitor baby for

jaundice.

Sulfonamides, dapsone,

sulfamethoxazole+trimethoprim (cotrimoxazole)

sulfadoxine+pyrimethamine (fansidar)

*Use alternative drug* (may inhibit lactation) Estrogens, including estrogen-containing contraceptives, thiazide diuretics, ergometrine

Safe in usual dosage Monitor baby

Most commonly used drugs:

analgesics and antipyretics: short courses of paracetamol, acetylsalicylic acid, ibuprofen; occasional doses of morphine and pethidine.

antibiotics: ampicillin, amoxicillin, cloxacillin and

other penicillins,

erythromycin,

antituberculosis drugs, anti-leprosy drugs (see

dapsone above).

antimalarials (except mefloquine, Fansidar),

anthelminthics, antifungals.

bronchodilators (e.g. salbutamol), corticosteroids, antihistamines, antacids, drugs for diabetes, most

antihypertensives, digoxin

nutritional supplements of iodine, iron, vitamins.

(Adapted from "Breastfeeding counselling: A training course", WHO/CDR/93.3-6)

#### REFERENCES

Eleventh Model List of Essential Drugs. In: *The Use of Essential Drugs*. Ninth report of the WHO Expert Committee (including the revised Model List of Essential Drugs). World Health Organization (Technical report Series No. 895), Geneva 2000.

Bennett PN, Matheson I, Dukes NMG et al, eds. *Drugs and human lactation* Elsevier Science Publisher B.V., Amsterdam, 1988.

Briggs CG, Freeman RK, Yaffe SJ. *Drugs in pregnancy and lactation*. Fourth edition. Williams and Wilkins, Baltimore, MD, 1994.

American Academy of Pediatrics, Committee on Drugs. The Transfer of Drugs and Other Chemicals Into Human Milk. *Pediatrics*, 108:776-789, 2001.

British Medical Association, Royal Pharmaceutical Society of Great Britain. *British Medical Formulary*, No. 36, September 1998.

Royal College of Paediatrics and Child Health. *Medicines for children 1999*. RCPCH Publication Limited, Hobbs the Printers Limited, Southampton, England 1999.

Breastfeeding counselling: A training course. World Health Organization (WHO/CDR/93.3-6), 1993.

#### 1. **ANAESTHETICS**

1.2

General information: If a procedure requires anaesthesia, help the mother to express her breastmilk in advance and store it in a refrigerator so that her baby can be fed her expressed breastmilk by cup while she is undergoing the operation and recovering from the anaesthesia.

1.1	General	anaesthetics	and	oxygen
-----	---------	--------------	-----	--------

ether	Compatible with breastfeeding
halothane	Compatible with breastfeeding
ketamine	Compatible with breastfeeding
nitrous oxide	Compatible with breastfeeding
oxygen	Compatible with breastfeeding
thiopental	Compatible with breastfeeding
Local anaesthetics	
bupivacaine	Compatible with breastfeeding
lidocaine	Compatible with breastfeeding
Complementary drug:	1
ephedrine (C)	Compatible with breastfeeding.
/	Monitor infant for side effects (irritability and disturbed sleep)

#### 1.3 Preoperative medication and sedation for short-term procedures

atropine	Compatible with breastfeeding.
	Monitor infant for side-effects (drying of secretions, temperature elevation and CNS disturbance)
chloral hydrate	Compatible with breastfeeding in single dose.
,	Monitor infant for drowsiness
diazepam	Compatible with breastfeeding in single dose.
	Avoid giving repeated doses, if possible. Monitor infant
	for drowsiness. Short-acting benzodiazepines preferred*
morphine	Compatible with breastfeeding in single dose.
	Avoid giving repeated doses, if possible. Monitor infant
	for side-effects (apnoea and bradycardia)
promethazine	Compatible with breastfeeding in single dose.
	Avoid giving repeated doses, if possible. Monitor infant
	for drowsiness

<sup>\*</sup>See section 24.3 page 25

#### 2. ANALGESICS, ANTIPYRETICS, NONSTEROIDAL ANTI-INFLAMMATORY DRUGS, DRUGS USED TO TREAT GOUT AND DISEASE-MODIFYING AGENTS USED IN RHEUMATIC DISORDERS

#### 2.1 Non-opioids analgesics and antipyretics and nonsteroidal anti-inflammatory drugs

General	information:	ibuprofen	and	paracetamol	have	the	best	documentation	on	safety	during
breastfee	ding.										

	tfeeding.	ı pai	acetamor have the best documentation on safety during
	acetylsalicylic acid		Compatible with breastfeeding in occasional doses. Avoid long-term therapy, if possible. Monitor infant for side-effects (haemolysis, prolonged bleeding time and metabolic acidosis)
	ibuprofen		Compatible with breastfeeding
	paracetamol		Compatible with breastfeeding
2.2	Opioid analgesics		
Repea infant episoo	ated doses may result in accum t is premature or less than 4 wee	ulati ks o anos	st opioids are excreted in breastmilk only in small amounts. It is in the infant. Avoid repeated doses, especially if the ld. Avoid drugs from this category if the infant has had an in its infant may be drowsy at on of breastfeeding.
	codeine		Compatible with breastfeeding in occasional doses. Avoid repeated doses, if possible. Monitor infant for side-effects (apnoea, bradycardia and cyanosis)
	morphine  Complementary drug		Compatible with breastfeeding in occasional doses. Avoid repeated doses, if possible. Monitor infant for side-effects (apnoea, bradycardia and cyanosis)
	pethidine (A)		Compatible with breastfeeding in occasional doses. Avoid repeated doses, if possible. Monitor infant for side-effects (apnoea, bradycardia and cyanosis). Side-effects occur more commonly than with morphine
2.3	Drugs used to treat gout		
	allopurinol		Compatible with breastfeeding

☐ Compatible with breastfeeding

colchicine

2.4.	Disease-modifying agents used in rheumatic disorders							
	azathioprine chloroquine	<u> </u>	Avoid breastfeeding Compatible with breastfeeding. Monitor infant for side- effects (haemolysis and jaundice), especially if the infant is premature or less than 1 month old. Avoid in G-6-PD deficient infants					
	cyclophosphamide		Use alternative medicine					
	methotrexate		Avoid breastfeeding					
	penicillamine		No data available					
	sulfasalazine		Avoid if possible, especially if the Infant is premature or less than 1 month old. Monitor the infant for side-effects (bloody diarrhea, haemolysis and jaundice). Avoid in G-6-PD deficient infants					
3.	ANTIALLERGICS AND DRUGS	S USED	IN ANAPHYLAXIS					
	chlorphenamine		Avoid if possible.  Monitor infant for side-effects (drowsiness, irritability).  May inhibit lactation					
	dexamethasone		Compatible with breastfeeding in single dose.					
			No data available about prolonged usage					
	epinephrine (adrenaline)		No data available					
	hydrocortisone		Compatible with breastfeeding in single dose.  No data available about prolonged usage					
	prednisolone		Compatible with breastfeeding					
4.	ANTIDOTES AND OTHER SUB	STANO	CES USED IN POISONINGS					
4.1	Non-specific							
	charcoal, activated		Compatible with breastfeeding					
	ipecacuanha		Compatible with breastfeeding					
4.2	Specific							
	acetylcysteine		No data available					
	atropine		Compatible with breastfeeding. Monitor infant for side- effects (drying of secretions, temperature elevation and CNS disturbance)					
	calcium gluconate		No data available					
	deferoxamine		No data available					
	dimercaprol		Avoid if possible, especially if the infant is premature or less than 1 month old. Monitor infant for side-effects (haemolysis and jaundice). Avoid in G-6-PD deficient infants					

DL-methionine		No data available
methylthioninium chloride		Avoid if possible, especially if the infant is premature or
(methylene blue)		less than 1 month old. Monitor infant for side-effects
,		(haemolysis and jaundice)
naloxone		No data available
penicillamine		No data available
potassium ferric		No data available
hexacyanoferrate (II) 2H <sub>2</sub> O		
(Prussian blue)		
sodium calcium edetate		No data available
sodium nitrite		No data available
sodium thiosulfate		No data available

#### 5. ANTICONVULSANTS/ ANTIEPILEPTICS

**General information:** Breastfed infants of mothers who are taking anticonvulsants sometimes develop drowsiness. For mothers who need anticonvulsants there is often little alternative. It is essential that they take their medication and it can be dangerous to change antiepileptic medicines suddenly. Breastfeeding is usually possible, but the infant must be monitored. It helps if the dose is kept as low as possible within the effective therapeutic range.

carbamazepine	Compatible with breastfeeding. Monitor infant for side- effects (jaundice, drowsiness, poor suckling, vomiting and poor weight gain)
diazepam	Compatible with breastfeeding in single dose.
	Avoid repeated doses, if possible.*
	Monitor infant for drowsiness
ethosuximide	Avoid if possible. Monitor infant for side-effects
	(drowsiness, poor suckling and poor weight gain)
magnesium sulfate	Compatible with breastfeeding
phenobarbital	Compatible with breastfeeding. Monitor infant for side- effects (drowsiness, poor suckling and poor weight gain)
phenytoin	Compatible with breastfeeding. Monitor infant for side- effects (cyanosis and methaemoglobinaemia)
valproic acid	Compatible with breastfeeding. Monitor infant for side-effects (jaundice)
Complementary drug:	
clonazepam (B)	Compatible with breastfeeding. The mother should receive only normal dose

<sup>\*</sup> See section 24.3 page 25

#### 6. ANTI-INFECTIVE DRUGS

#### 6.1 Anthelminthics

#### 6.1.1 Intestinal anthelminthics

*General information*: There are limited data available on the use of drugs in this category. However, they act mainly in the intestinal system of the mother and little is absorbed into the general system. They can be considered compatible with breastfeeding.

albendazole		Compatible with breastfeeding
levamisole		Compatible with breastfeeding
mebendazole		Compatible with breastfeeding
niclosamide		Compatible with breastfeeding
praziquantel		Compatible with breastfeeding
pyrantel		Compatible with breastfeeding
6.1.2 Antifilarials		
diethylcarbamazine		No data available
ivermectin		No data available
Complementary drug suramin sodium (B)		No data available
6.1.3 Antischistosomals and	other a	antitrematode drugs
praziquantel		Compatible with breastfeeding
triclabendazole		No data available
Complementary drug		Compatible with breastfeeding
oxamniquine (C)		-

#### 6.2 Antibacterials

*General information:* If the drug is excreted in breastmilk, there is a possibility of altering the infant's intestinal flora. Monitor the infant for gastrointestinal disturbances, such as thrush and diarrhoea. If they occur, stop the drug and choose an alternative if necessary. Continue breastfeeding.

#### 6.2.1 $\beta$ -Lactam drugs

*General information:* Breastfeeding is generally safe. Theoretically, penicillins can cause an allergic reaction in the infant. If the infant develops a rash, it could be a sign of allergy. Stop the drug and choose an alternative if necessary. Continue breastfeeding. Warn the mother that the infant should not be given the drug in the future.

amoxicillin	Compatible with breastfeeding
ampicillin	Compatible with breastfeeding
benzathine benzylpenicillin	Compatible with breastfeeding
benzylpenicillin	Compatible with breastfeeding
cloxacillin	Compatible with breastfeeding
phenoxymethylpenicillin	Compatible with breastfeeding
procaine benzylpenicillin	Compatible with breastfeeding

Restricted indications: amoxicillin+clavulanic acid ceftazidime ceftriaxone imipenem+cilastatin	0000	Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding No data available
6.2.2 Other antibacterials		
chloramphenicol	٥	Avoid if possible, especially if the infant is less than 1 month old. Monitor the infant for side-effects (haemolysis and jaundice). Theoretically, there is a risk of bonemarrow depression, but this has never been reported
ciprofloxacin doxycycline	0	Avoid if possible, until more data are available Avoid if possible. Possibility of staining the infant's teeth. Single dose is probably safe
erythromycin gentamicin	0	Compatible with breastfeeding Compatible with breastfeeding. Monitor infant for thrush and diarrhoea
metronidazole		Avoid if possible. Animal data suggest it may be carcinogenic. If given in single dose of 2 grams, discontinue breastfeeding for 12 hours. Help the mother to express her breastmilk in advance and store it in a refrigerator so that her baby can be fed by cup during that time
nalidixic acid	٠	Avoid if possible, especially if the infant is premature or less than 1 month old. Monitor the infant for side-effects (haemolysis and jaundice). Avoid in G-6-PD deficient infants
nitrofurantoin		Compatible with breastfeeding for healthy full- term infants. Avoid if possible if the infant is premature or less than 1 month old. Monitor the infant for side-effects (haemolysis and jaundice). Avoid in infants with G-6-PD deficiency
spectinomycin		No data available
sulfadiazine		Avoid if possible, especially if the infant is premature or less than 1 month old. Monitor the infant for side-effects (bloody diarrhea, haemolysis and jaundice). Avoid in G-6-PD deficient infants
sulfamethoxazole+		Compatible with breastfeeding for older, healthy full-
trimethoprim (cotrimoxazole)		term infants. Avoid if possible if the infant is premature or less than 1 month old. Monitor the infant for side- effects (haemolysis and jaundice). Avoid in infant with G- 6-PD deficiency
trimethoprim		Compatible with breastfeeding
Complementary drugs chloramphenicol (C)		Avoid if possible, especially if the infant is less than 1 month old. Monitor the infant for side-effects (haemolysis and jaundice). Theoretically, there is a risk of bone-marrow depression, but this has never been reported
clindamycin (B)		Avoid if possible. Monitor infant for diarrhoea or bloody stools
Restricted indications:		
vancomycin		No data available

#### 6.2.3 Antileprosy drugs

clofazimine
dapsone

May cause skin discoloration, which is reversible
Compatible with breastfeeding. Monitor for side-effects
(haemolysis and jaundice), especially if the infant is
premature or less than 1 month old. Avoid in infants with

G-6-PD deficiency

#### 6.2.4 Antituberculosis drugs

*General information:* If the baby develops significant jaundice, stop or change the drug if possible. If this is not possible, it may be necessary to consider feeding the baby artificially.

ethambutol		Compatible with breastfeeding.
		Monitor the infant for jaundice
isoniazid		Compatible with breastfeeding.
		Monitor the infant for jaundice
isoniazid + ethambutol		Compatible with breastfeeding.
		Monitor infant for possible toxicity
pyrazinamide		Compatible with breastfeeding.
13		Monitor the infant for jaundice
rifampicin		Compatible with breastfeeding.
		Monitor the infant for jaundice
rifampicin + isoniazid		Compatible with breastfeeding.
111W11P1V111 15011W21W	_	Monitor the infant for jaundice
rifampicin + isoniazid		Compatible with breastfeeding*
+ pyrazinamide,	_	Companie with oreastreeding
rifampicin + isoniazid		Compatible with breastfeeding *
+ pyrazinamide+ ethambutol	_	Companione with oreustreeding
pyrazmamae emamoutor		
streptomycin		Compatible with breastfeeding.
su optomy om	_	Monitor the infant for thrush and diarrhoea
Complementary drug		Trontor the infant for thrush and diarricou
thioacetazone + isoniazid (A)		Compatible with breastfeeding *
Restricted indications	_	Companie with oreastreeding
For drugs used in treatment of		
multidrug-resistant		
tuberculosis, see section 9 of		
the main text of the Ninth		
report of the WHO Expert		
Committee.		

<sup>\*</sup> A woman who is breastfeeding and has TB should receive a full course of anti-TB chemotherapy. Timely and properly applied chemotherapy is the best way to prevent transmission of tubercle bacilli to her baby. All the anti-TB drugs are compatible with breastfeeding and a woman taking them can safely continue to breastfeed her baby. The mother and baby should stay together and the baby should continue to breastfeed in the normal way. The baby should receive isoniazid prophylaxis and BCG immunization.. ( Quote from : Maher D, Chaulet P, Spinaci S, Harries A. Treatment of tuberculosis: Guidelines for national programmes. 2<sup>nd</sup> edition 1997 *Global Tuberculosis Programme, World Health Organization. Geneva, Switzerland.*)

#### 6.3 Antifungal drugs

amphotericin B

	fluconazole	Compatible with breastfeeding
	griseofulvin	No data available
	nystatin	Compatible with breastfeeding
	Complementary drugs	
	flucytosine (B)	No data available
	potassium iodide (A)	Compatible with breastfeeding. However, iodine- containing drugs for systemic administration are a cause for concern. Monitor the infant for side-effects (hypothyroidism)
6.4	Antiviral drugs	
	6.4.1 Antiherpes drugs	
	aciclovir	Compatible with breastfeeding
	6.4.2 Antiretroviral drugs	
	nevirapine	With the exception of mild anaemia with AZT prophylaxis, short-term effects of prophylaxis on infants are minimal, and serious early long-term toxicity in children secondary to <i>in utero</i> AZT exposure, if it occurs, is likely to be rare (Quote from: Mofenson KM, Munderi P. Safety of anti-retroviral prophylaxis of

☐ No data available

zidovudine

□ With the exception of mild anaemia with AZT prophylaxis, short-term effects of prophylaxis on infants are minimal, and serious early long-term toxicity in children secondary to *in utero* AZT exposure, if it occurs, is likely to be rare (Quote from: Mofenson KM, Munderi P. Safety of anti-retroviral prophylaxis of perinatal transmission on HIV-infected pregnant women and their infants. UNAIDS 2002)

perinatal transmission on HIV-infected pregnant women

and their infants. UNAIDS 2002)

Drugs for the treatment of human immunodeficiency virus (HIV) infection/acquired immunodeficiency syndrome (AIDS) include nucleoside reverse transcriptase inhibitors, non-nucleoside reverse transcriptase inhibitors and protease inhibitors. The drugs zidovudine and nevirapine have been shown to reduce or prevent mother-to-child transmission of HIV. *This is the only indication for which they are included here.* Single drug use with zidovudine, except in pregnancy, is now regarded as obsolete, because of the development of resistance. Triple therapy is beyond the budgets of most national drug programmes and therefore HIV/AIDS treatment policies must be decided at country or institutional level.

# 6.5 Antiprotozoal drugs

6.5.1 Antiamoebic and antigiardiasis drugs

diloxanide metronidazole	0	No data available Avoid if possible. Animal data suggest it may be carcinogenic. If given in single dose of 2 grams, discontinue breastfeeding for 12 hours. Help the mother to express her breastmilk in advance and store it in a refrigerator so that the baby can be fed by cup during that time
6.5.2 Antileishmaniasis drugs		
meglumine antimoniate pentamidine <i>Complementary drug</i>		Compatible with breastfeeding Compatible with breastfeeding
amphotericin B (B)		No data available
6.5.3 Antimalarial drugs		
(a) For curative treatment		
chloroquine		Compatible with breastfeeding. Monitor for side-effects (haemolysis and jaundice), especially if the infant is premature or less than 1 month old. Avoid in G-6-PD deficient infants
primaquine		Compatible with breastfeeding. Monitor for haemolysis and jaundice, especially if the infant is premature or less than 1 month old. Avoid in G-6-PD deficient infants
quinine		Compatible with breastfeeding. Monitor for haemolysis and jaundice, especially if the infant is premature or less than 1 month old. Avoid in G-6-PD deficient infants
Complementary drugs		
doxycycline (B)		Compatible with breastfeeding Theoretically, dental staining and inhibition of bone growth could occur, especially with long-period use
mefloquine (B)		Avoid if possible until more data are available
sulfadoxine+pyrimethamine (B) (fansidar)		Compatible with breastfeeding for older, healthy, full- term infants. Avoid if possible if the infant is premature or less than 1 month old. Monitor for side-effects (haemolysis and jaundice). Avoid in G-6-PD deficient
Restricted indications		infants
artemether		The drug has been used in lactating mothers, no toxic effects have been found in their breastfed infants (Report from RBM Department/WHO)
arcounte		The drug has been used in lactating mothers, no toxic effects have been found in their breastfed infants (Report from RBM Department/WHO)

(b) For prophylaxis		
chloroquine		Compatible with breastfeeding. Monitor for side-effects (haemolysis and jaundice), especially if the infant is premature or less than 1 month old. Avoid in G-6-PD deficient infants
doxycycline		Compatible with breastfeeding. Theoretically, dental staining and inhibition of bone
mefloquine		growth could occur, especially with long- period use Avoid if possible until more data are available
proguanil		Compatible with breastfeeding
6.5.4 Antipneumocystosis and	antii	oxoplasmosis drugs
pentamidine		No data available
pyrimethamine		Compatible with breastfeeding.  The infant should not receive any other anti-folate agent
sulfamethoxazole+ trimethoprim (injection)		Compatible with breastfeeding for older, healthy full-term infants. Avoid if possible if the infant is premature or less than 1 month old. Monitor the infant for side-effects (haemolysis and jaundice). Avoid in infant with G-6-PD deficiency
6.5.5 Antitrypanosomal drugs		
(a) African trypanosomiasis		
melarsoprol		No data available
pentamidine		No data available
suramin sodium		No data available
Complementary drug eflornithine (C)		No data available
(b) American trypanosomias	is	
benznidazole		No data available
nifurtimox	u	No data available
<b>Insect repellents</b>		
diethyltoluamide		Compatible with breastfeeding. Avoid direct contact of the infant with the repellant
ANTIMIGRAINE DRUGS		
For treatment of acute attack		
acetylsalicylic acid		Compatible with breastfeeding in occasional doses. Avoid long term therapy, if possible. Monitor the infant for side-effects (haemolysis, prolonged bleeding time and metabolic acidosis)
ergotamine		Avoid if possible. Monitor the infant for side-effects (ergotism)
paracetamol		

6.6

7.

7.1.

7.2	For prophylaxis		
	propranolol		Compatible with breastfeeding. Monitor the infant for side-effects (bradycardia, hypoglycaemia and cyanosis)
8.	ANTINEOPLASTIC AND IM	MUNOSU	PPRESSIVE DRUGS AND DRUGS USED IN PALLIATIVE CARE
	eral information: Breastfeeings to this category.	eding is o	contraindicated when a mother has to take a drug which
8.1	Immunosuppressive drug	gs	
	azathioprine ciclosporin	0	Avoid breastfeeding Avoid breastfeeding
8.2	Cytotoxic drugs		
	eral information: Breastfeeings to this category.	eding is o	contraindicated when a mother has to take a drug which
	asparaginase bleomycin calcium folinate chlorambucil chlormethine cisplatin cyclophosphamide cytarabine dacarbazine dactinomycin daunorubicin doxorubicin etoposide fluorouracil levamisole mercaptopurine methotrexate procarbazine vinblastine vincristine		Avoid breastfeeding Compatible with breastfeeding Avoid if possible Avoid breastfeeding
8.3.	Hormones and antihorm	ones	
	prednisolone tamoxifen	0	Compatible with breastfeeding Avoid breastfeeding

# 8.4 Drugs used in palliative care

The Committee recommended that all drugs mentioned in the WHO publication *Cancer pain relief:* with a guide to opioid availability, second ed 1996 be considered essential. The drugs are included in the relevant sections of the model list, according to their therapeutic use, e.g. analgesics.

9.	ANTIPARKINSONISM DRUGS		
	biperiden levodopa + carbidopa	0	No data available Avoid if possible. Levodopa may inhibit lactation
10.	DRUGS AFFECTING THE BLOO	D	
10.1	Antianaemia drugs		
	ferrous salt ferrous salt +folic acid folic acid hydroxocobalamin Complementary drug iron dextran (B)		Compatible with breastfeeding
10.2	Drugs affecting coagulation		
	desmopressin heparin sodium phytomenadione protamine sulfate warfarin		Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding No data available Compatible with breastfeeding
11.	BLOOD PRODUCTS AND PLASM	IA SU	UBSTITUTES
11.1	Plasma substitutes		
	dextran 70 polygeline	<u> </u>	Compatible with breastfeeding Compatible with breastfeeding
11.2	Plasma fractions for specific	uses	
	Complementary drugs factor VIII concentrate (C) factor IX complex (coagulation factors II, VII, IX, X) concentrate (C)	0	Compatible with breastfeeding Compatible with breastfeeding
12.	CARDIOVASCULAR DRUGS		
12.1	Antianginal drugs		
	atenolol		Avoid if possible, especially if the infant is premature or less than 1 month old. Monitor the infant for side-effects (bradycardia, hypotension and cyanosis)
	glyceryl trinitrate isosorbide dinitrate verapamil		No data available No data available Compatible with breastfeeding

# 12.2 Antiarrhythmic drugs

	atenolol		Avoid if possible, especially if the infant is premature or less than 1 month old. Monitor the infant for side-effects
	digavin		(bradycardia, hypotension and cyanosis)
	digoxin lidocaine	u	Compatible with breastfeeding
			Compatible with breastfeeding
	lerapamil		Compatible with breastfeeding
	Complementary drugs	_	
	epinephrine (adrenaline)(C)		Compatible with breastfeeding
	isoprenaline (C)		No data available
	procainamide (B)		Compatible with breastfeeding. However, insufficient
			data available on side-effects of long-term use
	quinidine (A)		Compatible with breastfeeding
12.3	Antihypertensive drugs		
	atenolol		Avoid if possible, especially if the infant is premature or
			less than 1 month old. Monitor the infant for side-effects (bradycardia, hypotension and cyanosis)
	captopril		Compatible with breastfeeding
	hydralazine		Compatible with breastfeeding. However, insufficient
	ny draid2me	_	data available on long-term use
	hydrochlorothiazide		Compatible with breastfeeding
	methyldopa		Compatible with breastfeeding
	nifedipine		Compatible with breastfeeding. However, insufficient
	intedipine		data available on long-term use
	reserpine		Use alternative medicine
	Complementary drugs		
	prazosin (B)		No data available
	sodium nitroprusside (C)		No data available
12.4	Drugs used in heart failure		
	captopril		Compatible with breastfeeding
	digoxin		Compatible with breastfeeding
	dopamine		Compatible with breastfeeding
	hydrochlorothiazide		Compatible with breastfeeding
12.5	Antithrombotic drugs		
	acetylsalicylic acid		Compatible with breastfeeding in small doses used for anti-thrombosis. Avoid repeated administration in normal doses if possible. Monitor the infant for side-effects (haemolysis, prolonged bleeding time and metabolic acidosis)
	Complementary drug		
	streptokinase (C)		No data available
	1 /		

# 12.6 Lipid-lowering agents

The Committee recognizes the value of lipid-lowering drugs in treating patients with hyperlipidaemia.  $\beta$ -Hydroxy- $\beta$ -methylglutaryl-coenzyme A (HMG CoA) reductase inhibitors, often

referred to as "statins", are a family of potent and effective lipid-lowering drugs with a good tolerability profile. Several of these drugs have been shown to reduce the incidence of fatal and non-fatal myocardial infarction, stroke and mortality (all causes), as well as the need for coronary by-pass surgery. All remain very costly but maybe cost-effective for secondary prevention of cardiovascular disease as well as for primary prevention in some very high-risk patients. Since no single drug has been shown to be significantly more effective or less expensive than others in the group, none is included in the model list; the choice of drug for use in patients at highest risk should be decided at the national level.

### 13. DERMATOLOGICAL DRUGS (TOPICAL)

*General information :* Topical preparations are not usually absorbed in significant amounts and can usually be used safely during breastfeeding.

□ No data available

#### 13.1 Antifungal drugs benzoic acid + salicylic acid ☐ Compatible with breastfeeding miconazole ☐ Compatible with breastfeeding ☐ Compatible with breastfeeding sodium thiosulfate Complementary drug selenium sulfide (C) ☐ Compatible with breastfeeding 13.2 Anti-infective drugs methylrosanilinium chloride ☐ Compatible with breastfeeding (gentian violet) neomycin + bacitracin ☐ Compatible with breastfeeding potassium permanganate ☐ Compatible with breastfeeding silver sulfadiazine ☐ Compatible with breastfeeding 13.3 Anti-inflammatory and antipruritic drugs betamethasone ☐ Compatible with breastfeeding ☐ Compatible with breastfeeding calamine lotion ☐ Compatible with breastfeeding hydrocortisone 13.4 Astringent drugs aluminium diacetate ☐ Compatible with breastfeeding 13.5 Drugs affecting skin differentiation and proliferation benzoyl peroxide ☐ Compatible with breastfeeding coal tar ☐ Compatible with breastfeeding ☐ Compatible with breastfeeding dithranol fluorouracil ☐ Use alternative medicine podophyllum resin ☐ Compatible with breastfeeding ☐ Compatible with breastfeeding salicylic acid

urea

13.6	Scabicides and pediculicides		
	benzyl benzoate permethrin		Compatible with breastfeeding Compatible with breastfeeding
13.7	Ultraviolet-blocking agents		
	Complementary drug topical sun protection agent with activity against ultraviolet A and ultraviolet B (C)		Compatible with breastfeeding
14.	DIAGNOSTIC AGENTS		
14.1	Ophthalmic drugs		
	fluorescein		Avoid if possible when the infant is premature or less than 1 month old, especially when undergoing
	tropicamide		phototherapy No data available
14.2	Radiocontrast media		
	amidotrizoate barium sulfate iohexol iopanoic acid propyliodone		Compatible with breastfeeding Compatible with breastfeeding No data available Compatible with breastfeeding Compatible with breastfeeding. However, iodine- containing drugs for systemic administration are a cause for concern. Monitor the infant for side-effects (hypothyroidism)
	Complementary drug meglumine iotroxate (C)	<u> </u>	
15.	DISINFECTANTS AND ANTISEP	TICS	
15.1	Antiseptics		
	chlorhexidine ethanol polyvidone iodine	0	Compatible with breastfeeding Compatible with breastfeeding Avoid if possible repeated topical application. Monitor the infant for side-effects (hypothyroidism)

*Note*: Substances for topical application that contain iodine should be used with caution during lactation because iodine can be absorbed and concentrated in breastmilk and reach levels which are toxic for the infant. Nutritional supplements of iodine given to the mother on appropriate indications are, however, safe.

15.2	Disinfectants		
	chlorine base compound chloroxylenol glutaral	0 0	No data available No data available Compatible with breastfeeding
16.	DIURETICS		
	· ·		rt-acting thiazide diuretics and usual doses of loop diuretics it lactation and should be avoided, if possible.
	amiloride furosemide hydrochlorothiazide spironolactone <i>Complementary drug</i> mannitol (C)		Avoid if possible. May inhibit lactation Avoid if possible. May inhibit lactation Avoid if possible. May inhibit lactation Compatible with breastfeeding  Compatible with breastfeeding
17.	GASTROINTESTINAL DRUGS		
17.1	Antacids and other antiulcer	drug	gs
	aluminium hydroxide cimetidine		Compatible with breastfeeding Avoid if possible. Insufficient data on long-term side- effects
	magnesium hydroxide		Compatible with breastfeeding
17.2	Antiemetic drugs		
	metoclopramide promethazine		Avoid if possible. Insufficient data on long-term side- effects (possible defects in neural development in newborn animals). Increases breastmilk production Compatible with breastfeeding in single dose. Avoid repeated doses, if possible. Monitor the infant for drowsiness
17.3	Antihaemorrhoidal drugs		
	local anaesthetic, astringent and anti-inflammatory drug		Compatible with breastfeeding
17.4	Anti-inflammatory drugs		
	hydrocortisone		Compatible with breastfeeding in single dose. No data
	sulfasalazine		available on prolonged use Avoid if possible, especially if the infant is premature or less than 1 month old. Monitor the infant for side-effects (bloody diarrhoea, haemolysis and jaundice). Avoid in G-6-PD deficient infants

17.5	Antispasmodic drugs		
	atropine		Compatible with breastfeeding. Monitor the infant for side-effects (drying of secretions, temperature elevation and CNS disturbance)
17.6	Laxatives		
	senna		Compatible with breastfeeding. However, it is only advisable to use the drug if dietary measures for treating constipation fail
17.7	Drugs used in diarrhoea		
	17.7.1 Oral hydration		
	oral rehydration salts (for glucose-electrolyte solution)		Compatible with breastfeeding
	17.7.2Antidiarrhoeal (symptom	atic,	) drugs
	codeine		Compatible with breastfeeding in occasional doses. Avoid repeated doses if possible. Monitor the infant for side-effects (apnoea, bradycardia and cyanosis)
18.	HORMONES, OTHER ENDOCRI	NE D	ORUGS AND CONTRACEPTIVES
18.1	Adrenal hormones and synthe	etic	substitutes
	dexamethasone		Compatible with breastfeeding in single dose. No data
	hydrocortisone		available on prolonged use Compatible with breastfeeding in single dose. No data
	prednisolone		available on prolonged use Compatible with breastfeeding
	Complementary drug fludrocortisone (C)		No data available
18.2	Androgens		
	Complementary drug testosterone (C)		Avoid breastfeeding
18.3	Contraceptives		

General information: The provision of hormonal contraceptives (including progestogen-only contraceptives) is discouraged during the first 6 weeks post-partum, in order to avoid exposing infants to them. If a contraceptive method is desired, a non-hormonal method should be the first choice.

	18.3.1 Hormonal contraceptives		
	ethinylestradiol + levonorgestrel		Avoid, if possible. May inhibit lactation
	ethinylestradiol + norethisterone		Avoid, if possible. May inhibit lactation
	levonorgestrel		Compatible with breastfeeding from 6 weeks post-partum
	Complementary drugs		1
	levonorgestrel (B)		Compatible with breastfeeding from 6 weeks post-partum
	medroxyprogesterone acetate (B)		Compatible with breastfeeding from 6 weeks post-partum
	norethisterone enantate (B)		Compatible with breastfeeding from 6 weeks post-partum
	18.3.2Intrauterine devices		
	copper-containing device		Compatible with breastfeeding
	18.3.3 Barrier methods		
	condoms with or without spermicide (nonoxinol)		Compatible with breastfeeding
	diaphragms with spermicide (nonoxinol)		Compatible with breastfeeding
18.4	Estrogens		
	ethinylestradiol		Avoid, if possible. May inhibit lactation
18.5	Insulins and other antidiabetic	ager	nts
	ral information: Some women recatfeeding.	quire	reduced doses of drugs in this category while
	glibenclamide		Compatible with breastfeeding. Monitor the infant for hypoglycaemia
	insulin injection (soluble)		Compatible with breastfeeding. Dosage may need to be reduced during lactation
	intermediate-acting insulin		Compatible with breastfeeding. Dosage may need to be reduced during lactation
	metformin		No data available
18.6	Ovulation inducers		
	clomifene		Avoid (unlikely to be needed)

18.7	Progestogens		
	norethisterone Complementary drug		Compatible with breastfeeding
	medroxyprogesterone acetate (B)		Compatible with breastfeeding from 6 weeks post- partum
18.8	Thyroid hormones and antithy	roid	drugs
	levothyroxine potassium iodide		Compatible with breastfeeding Avoid, if possible. Monitor the infant for side-effects (hypothyroidism)
	propylthiouracil		Compatible with breastfeeding
19.	Immunologicals		
19.1	Diagnostic agents		
	tuberculin, purified protein derivative (PPD)		Compatible with breastfeeding
19.2	Sera and immunoglobulins		
	anti-D immunoglobulin (human)		Compatible with breastfeeding
	antitetanus immunoglobulin (human)		Compatible with breastfeeding
	antivenom sera		No data available
	diphtheria antitoxin		Compatible with breastfeeding
	immunoglobulin, human, normal (IM, IV)		Compatible with breastfeeding
	rabies immunoglobulin		Compatible with breastfeeding
19.3	Vaccines		
	19.3.1For universal immunization	on	
	BCG vaccine		Compatible with breastfeeding
	diphtheria vaccine		Compatible with breastfeeding
	hepatitis B vaccine		Compatible with breastfeeding
	measles vaccine		Compatible with breastfeeding
	pertussis vaccine		Compatible with breastfeeding
	poliomyelitis vaccine		Compatible with breastfeeding
	tetanus vaccine		Compatible with breastfeeding

# 19.3.2For specific groups of individuals

	influenza vaccine meningococcal meningitis		Compatible with breastfeeding Compatible with breastfeeding
	vaccine	_	
	mumps vaccine		Compatible with breastfeeding
	rabies vaccine (inactivated)		Compatible with breastfeeding
	(prepared in cell culture) rubella vaccine		Compatible with breastfeeding
	typhoid vaccine		Compatible with breastfeeding Compatible with breastfeeding
	yellow fever vaccine		Compatible with breastfeeding
	yenow level vaccine	_	Companion with oreasticeding
20.	MUSCLE RELAXANTS (PERIPHE	RAL	LY ACTING) AND CHOLINESTERASE INHIBITORS
	alcuronium		Compatible with breastfeeding
	neostigmine		Avoid if possible in combination with atropine.
			Theoretically side-effects may occur
	pyridostigmine		Compatible with breastfeeding
	suxamethonium		Compatible with breastfeeding
	Complementary drug		
	vecuronium (C)		Compatible with breastfeeding
21.	OPHTHALMOLOGICAL PREPAR	ATIC	ONS
21.1	Anti-infective agents		
	gentamicin		Compatible with breastfeeding
	Idoxuridine		Compatible with breastfeeding
	silver nitrate		Compatible with breastfeeding
	tetracycline		Compatible with breastfeeding
21.2	Anti-inflammatory agents		
	prednisolone		Compatible with breastfeeding
21.3	Local anaesthetics		
	tetracaine		Compatible with breastfeeding
21.4	Miotics and antiglaucoma dru	gs	
	acetazolamide		Compatible with breastfeeding
	pilocarpine		Compatible with breastfeeding
	timolol		Compatible with breastfeeding
21.5	Mydriatics		
	atropine		Compatible with breastfeeding
	Complementary drug epinephrine (adrenaline)(A)		Compatible with breastfeeding

# 22. OXYTOCICS AND ANTIOXYTOCICS

22.1	Oxytocics					
	ergometrine		Compatible with breastfeeding in single dose. Avoid repeated doses if possible. May inhibit lactation			
	oxytocin		Compatible with breastfeeding during short term use.  Avoid prolonged use. May cause physiological dependence of the oxytocin reflex in the mother			
22.2	Antioxytocics					
	salbutamol		Compatible with breastfeeding			
23.	PERITONEAL DIALYSIS SOLUTIO	N				
	intraperitoneal dialysis solution (of appropriate composition)		Compatible with breastfeeding			
24.	PSYCHOTHERAPEUTIC DRUGS					
24.1	Drugs used in psychotic disorde	ers				
	chlorpromazine fluphenazine haloperidol	<u> </u>	Avoid if possible. Monitor the infant for drowsiness Avoid if possible. Monitor the infant for drowsiness Avoid if possible. Monitor the infant for drowsiness			
24.2	Drugs used in mood disorders					
	24.2.1 Drugs used in depressive a	lisor	ders			
	amitriptyline		Compatible with breastfeeding in doses up to 150 mg/day			
	24.2.2Drugs used in bipolar disorders					
	carbamazepine		Compatible with breastfeeding. Monitor infant for side- effects (jaundice, drowsiness, poor suckling, vomiting and poor weight gain)			
	lithium carbonate		Avoid if possible. Monitor the infant for side-effects (restlessness or weakness). Monitor lithium levels in mother's blood			
	valproic acid		Compatible with breastfeeding. Monitor infant for side-effects (jaundice)			
24.3	Drugs used in generalized anxio	ety a	and sleep disorders			
	diazepam		Compatible with breastfeeding in single dose. Avoid repeated doses, if possible. Monitor the infant for drowsiness. Short-acting benzodiazepines preferred *			

<sup>\*</sup> Suitable short-acting benzodiazepines include oxazepam and lorazepam. However, these are not included in the Model List of Essential Drugs

24.4 Drugs used in obsessive-compulsive disorders and panic attacks			ive disorders and panic attacks
	clomipramine		Compatible with breastfeeding
25.	DRUGS ACTING ON THE RESPI	RATO	ORY TRACT
25.1	Antiasthmatic drugs		
	aminophylline beclometasone epinephrine (adrenaline) ipratropium bromide salbutamol theophylline Complementary drug cromoglicic acid (B)		Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding No data available Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding
25.2	Antitussive		
	dextromethorphan		No data available
26.	SOLUTIONS CORRECTING WAT	ER,	ELECTROLYTE AND ACID-BASE DISTURBANCES
26.1	Oral		
	oral rehydration salts (for glucose-electrolyte solution) potassium chloride	<u> </u>	Compatible with breastfeeding  Compatible with breastfeeding
26.2	Parenteral		
	glucose glucose with sodium chloride potassium chloride sodium chloride sodium hydrogen carbonate compound solution of sodium lactate		Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding Compatible with breastfeeding
26.3	Miscellaneous		
	water for injection		Compatible with breastfeeding

# 27. VITAMINS AND MINERALS

ascorbic acid		Compatible with breastfeeding in usual doses. If large
		doses are used, monitor for side-effects (haemolysis and
		jaundice), especially if the infant is premature
ergocalciferol		Compatible with breastfeeding in doses used as
		nutritional supplements. If pharmacological doses are
		required, monitor the calcium levels of the infant
iodine		Compatible with breastfeeding in doses used as
		nutritional supplements and standard treatment of iodine
		deficient mothers.* Monitor the infant for side-effects
		(hypothyroidism)
nicotinamide		Compatible with breastfeeding
pyridoxine		Compatible with breastfeeding
retinol		Compatible with breastfeeding
riboflavin		Compatible with breastfeeding
sodium fluoride		Compatible with breastfeeding in doses used as
		nutritional supplements. Long term, excessive exposure
		may cause mottling of teeth
thiamine		Compatible with breastfeeding
Complementary drug		r
calcium gluconate (C)		Compatible with breastfeeding
carciain graconate (C)	_	Companion with oreastreams

<sup>\*</sup> See section 15.1, page 19

## ALPHABETICAL LIST OF ESSENTIAL DRUGS

Drug	Section	Page
A		
acetazolamide	21.4	25
acetylcysteine	4.2	7
acetylsalicylic acid	2.1, 7.1, 12.5	
aciclovir	6.4.1	6, 14, 17
adrenaline (see epinephrine)	3, 12.2, 21.5, 25.1	7, 17, 24, 26
albendazole	6.1.1	9
alcuronium	20	24
allopurinol	2.3	6
aluminium diacetate	13.4	18
aluminium hydroxide	17.1	20
amidotrizoate	14.2	19
amiloride	16	20
aminophylline	25.1	26
amitriptyline	24.2.1	25
amoxicillin	6.2.1	9
amoxicillin + clavulanic acid	6.2.1	9
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anti-D immunoglobulin (human)	19.2	23
antihaemophilic fraction (see factor VIII concentrate)	11.2	16
antihaemorrhoidal preparation: local anaesthetic,		• •
astringent, and anti-inflammatory drug	17.3	20
antitetanus immunoglobin (human)	19.2	23
antivenom sera	19.2	23
artemether	6.5.3	13
artesunate	6.5.3	13
ascorbic acid	27	27
asparaginase	8.2	15
atenolol	12.1, 12.3	16, 17
atropine	1.3, 4.2, 17.5, 21.5	5, 7, 21, 24
azathioprine	2.4, 8.1	7, 15
В		
bacitracin + neomycin	13.2	18
barium sulfate	14.2	19
BCG vaccine	19.3.1	23
Beclometasone	25.1	26
benzathine benzylpenicillin	6.2.1	9
benznidazole	6.5.5	14
benzoic acid + salicylic acid	13.1	18
benzoyl peroxide	13.5	19
benzyl benzoate	13.6	19
benzylpenicillin	6.2.1	9
betamethasone	13.3	18
		- 0

biperiden bleomycin bupivacaine	9 8.2 1.2	16 15 5
С		
calamine lotion calcium folinate calcium gluconate captopril carbamazepine carbidopa + levodopa ceftazidime ceftriaxone charcoal, activated chloral hydrate chlorambucil chloramphenicol chlorhexidine chlorine base compound chlormethine chloroquine chloroxylenol chlorphenamine chlorpromazine ciclosporin cilastatin + imipenem cimetidine ciprofloxacin cisplatin clavulanic acid + amoxicillin clindamycin clofazimine clomifene clomipramine clonazepam cloxacillin coal tar codeine colchicine	13.3 8.2 4.2,27 12.3, 12.4 5 9 6.2.1 6.2.1 4.1 1.3 8.2 6.2.2 15.1 15.2 8.2 2.4, 6.5.3 15.2 3 24.1 8.1 6.2.1 17.1 6.2.2 8.2 6.2.1 6.2.2 6.2.3 18.6 24.4 5 6.2.1 13.5 2.2, 17.7.2 2.3	18 15 7, 27 17 8 16 10 10 7 5 15 10 19 20 15 7, 13 20 7 25 15 10 20 10 11 22 26 8 9 19 6, 21
colchicine condoms copper-containing intrauterine device cromoglicic acid cyclophosphamide cytarabine	2.3 18.3.3 18.3.2 25.1 2.4, 8.2 8.2	6 22 22 26 7, 15 15
D		
dacarbazine dactinomycin dapsone daunorubicin deferoxamine	8.2 8.2 6.2.3 8.2 4.2	15 15 11 15 7

desmopressin dexamethasone dextran 70 dextromethorphan diaphragms diazepam diethylcarbamazine diethyltoluamide digoxin diloxanide dimercaprol diphtheria antitoxin diphtheria vaccine dithranol dopamine doxorubicin	10.2 3, 18.1 11.1 25.2 18.3.3 1.3, 5, 24.3 6.1.2 6.6 12.2, 12.4 6.5.1 4.2 19.2 19.3 13.5 12.4 8.2	16 7, 21 16 26 21 5, 8, 25 9 14 17 13 7 23 23 19 17 15
doxycycline	6.2.2, 6.5.3	10, 13
E		
eflornithine ephedrine epinephrine (adrenaline) ergocalciferol ergometrine ergotamine erythromycin ethambutol ethambutol + isoniazid ethambutol + rifampicin + isoniazid +pyrazinamide ethanol ether,anaesthetic ethinylestradiol ethinylestradiol + levonorgestrel ethinylestradiol + norethisterone ethosuximide etoposide	6.5.5 1.2 3, 12.2, 21.5, 25.1 27 22.1 7.1 6.2.2 6.2.4 6.2.4 6.2.4 15.1 1.1 18.4 18.3.1 5 8.2	14 5 7, 17, 24, 26 27 25 14 10 11 11 19 5 22 22 22 8 15
F		
factor VIII concentrate factor IX complex (coagulation factors II, VII, IX,X) concentrate ferrous salt ferrous salt+ folic acid fluconazole flucytosine fludrocortisone fluorescein fluorouracil fluphenazine folic acid	11.2 10.1 10.1 6.3 6.3 18.1 14.1 8.2, 13.5 24.1 10.1	16 16 16 16 12 12 21 19 15, 18 25

folic acid + ferrous salt furosemide	10.1 16	16 20
G		
gentamicin gentian violet (see methylrosanilinium chloride) glibenclamide glucose glucose with sodium chloride glutaral glyceryl trinitrate griseofulvin	6.2.2, 21.1 13.2 18.5 26.2 26.2 15.2 12.1 6.3	10, 24 18 22 26 26 20 16 12
Н		
haloperidol halothane heparin sodium hepatitis B vaccine hydralazine hydrochlorothiazide hydrocortisone hydroxocobalamin	24.1 1.1 10.2 19.3.1 12.3 12.3, 12.4, 16 3, 13.3, 17.4, 18.1 10.1	25 5 16 23 17 17, 20 7, 18, 20, 21 16
I		
ibuprofen idoxuridine imipenem + cilastatin immunoglobulin, human normal influenza vaccine insulin injection, soluble insulin,intermediate – acting intraperitoneal dialysis solution iodine iohexol iopanoic acid iotroxate (see meglumin iotroxate) ipecacuanha ipratropium bromide iron dextran isoniazid isoniazid + ethambutol isoniazid + rifampicin isoniazid + rifampicin + pyrazinamide isoniazid + rifampicin + pyrazinamide + ethambutol isoniazid + thioacetazone	2.1 21.1 6.2.1 19.2 19.3.2 18.5 18.5 23 27 14.2 14.2 14.2 14.2 14.2 4.1 25.1 10.1 6.2.4 6.2.4 6.2.4 6.2.4 6.2.4 6.2.4 6.2.4 6.2.4 6.2.4 6.2.4	6 24 10 23 24 22 22 25 27 19 19 19 7 26 16 11 11 11 11 11
isoprenaline isosorbide dinitrate ivermectin	12.2 12.1 6.1.2	17 16 9

K		
ketamine	1.1	5
L		
levamisole	6.1.1, 8.2	9, 15
levodopa+carbidopa	9	16
levonorgestrel	18.3.1	22
levonorgestrel + ethinyestradiol	18.3.1	22
levothyroxine	18.8	23
lidocaine	1.2, 12.2	5, 17
lithium carbonate	24.2.2	25
М		
magnesium hydroxide	17.1	20
magnesium sulfate	5	8
mannitol	16	20
measles vaccine	19.3.1	23
mebendazole	6.1.1	9
medroxyprogesterone acetate	18.3.1, 18.7	22, 23
mefloquine	6.5.2, 6.5.3	13
meglumine amidotrizoate ( <i>see</i> amidotrizoate)	14.2	19
meglumine antimoniate	6.5.2 14.2	13 19
meglumine iotroxate melarsoprol	6.5.5	19
meningitis vaccine	19.3.2	24
mercaptopurine	8.2	15
metformin	18.5	22
DL methionine	4.2	8
methotrexate	2.4, 8.2	7, 15
methyldopa	12.3	17
methylene blue (see methylthioninium chloride)	4.2	8
methylrosanilinium chloride (gentian violet)	13.2	18
methylthioninium chloride (methylene blue)	4.2	8
metoclopramide	17.2	20
metronidazole	6.2.2, 6.5.1	10, 13
miconazole	13.1	18
morphine	2.2	6
mumps vaccine	19.3.2	24
mustine (see chlormethine)	8.2	15
N		
nalidixic acid	6.2.2	10
naloxone	4.2	7
neomycin + bacitracin	13.2	18
neostigmine	20	24
nevirapine	6.4.2	12
niclosamide	6.1.1	9
niootinomido	1 1	'17

27

12.3

27

17

nicotinamide nifedipine

nifurtimox nitrofurantoin nitrous oxide nonoxinol norethisterone norethisterone enantate norethisterone + ethinylestradiol	6.5.5 6.2.2 1.1 18.3.3 18.7 18.3.1 18.3.1	14 10 5 22 23 22 22
nystatin	6.3	12
0		
oral rehydration salts (for glucosa -electrolyte solution		21, 26
oxamniquine	6.1.3	9
oxygen	1.1	5
oxytocin	22.1	25
P		
Paracetamol	2.1, 7.1	6, 14
penicillamine	2.4, 4.2	7
pentamidine	6.5.2, 6.5.4	13, 14
permethrin	13.6	19
pertussis vaccine	19.3.1	23
pethidine	2.2	6
phenobarbital	5	8
phenoxymethylpenicillin	6.2.1	9
phenytoin	5	8
phytomenadione	10.2	16
pilocarpine	21.4	24
podophyllum resin	13.5	18
poliomyelitis vaccine	19.3.1	23
polygeline	11.1	16
polyvidone iodine	15.1	19
potassium chloride	26.2	26
potassium ferric hexacyanoferrate (II).		
2H <sub>2</sub> O (Prussian blue)	4.2	8
potassium iodide	6.3, 18.8	12, 23
potassium permanganate	13.2	18
praziquantel	6.1.3	9
prazosin	12.3	17
prednisolone	3, 8.3, 18.1, 21.2	7, 15, 21, 24
primaquine	6.5.2	13
procainamide	12.2	17
procaine benzylpenicillin	6.2.1	9
procarbazine	8.2	15
proguanil	6.5.3	14
promethazine	1.3, 17.2	5, 20
propranolol	7.2	15
propyliodone	14.2	19
propylthiouracil	18.8	23
protamine sulfate	10.2	16

prussian blue ( see potassium ferric hexacyanoferrate (II).2H <sub>2</sub> O) pyrantel pyrazinamide pyrazinamide + rifampicin + isoniazid pyrazinamide + rifampicin + isoniazid + ethambutol pyridostigmine pyridoxine pyrimethamine pyrimethamine + sulfadoxine	4.2 6.1.1 6.2.4 6.2.4 6.2.4 20 27 6.5.4 6.5.3	8 9 11 11 11 24 27 14
Q		
quinidine quinine	12.2 6.5.3	17 13
R		
rabies immunoglobulin rabies vaccine reserpine retinol riboflavin rifampicin rifampicin + isoniazid rifampicin + isoniazid + pyrazinamide rifampicin + isoniazid + pyrazinamide + ethambutol rubella vaccine	19.2 19.3.2 12.3 27 27 6.2.4 6.2.4 6.2.4 6.2.4 19.3.2	23 24 17 27 27 11 11 11 11 24
s		
salbutamol salicylic acid salicylic acid + benzoic acid selenium sulfide senna silver nitrate silver sulfadiazine sodium amidotrizoate ( see amidotrizoate) sodium bicarbonate ( see sodium hydrogen carbonate) sodium calcium edetate sodium chloride sodium chloride with glucose sodium fluoride sodium hydrogen carbonate sodium lactate, compound solution sodium nitrite sodium nitroprusside sodium thiosulfate spectinomycin spironolactone streptokinase streptomycin	22.2, 25.1 13.5 13.1 13.1 17.6 21.1 13.2 14.2 26.2 4.2 26.2 26.2 27 26.2 26.2 26.2 4.2 12.3 4.2, 13.1 6.2.2 16 12.5 6.2.4	25, 26 18 18 18 21 24 18 19 26 8 26 27 26 26 27 26 26 27 26 27 26 27 26 27 27 26 27 27 28 29 17 17 17 17 17 17 18 19 10 10 10 10 10 10 10 10 10 10

sulfadiazine sulfadoxine + pyrimethamine sulfamethoxazole + trimethoprim sulfasalazine sunscreen for ultraviolet A and ultraviolet B suramin sodium suxamethonium	6.2.2 6.5.3 6.2.2, 6.5.4 2.4, 17.4 13.7 6.1.2, 6.5.5 20	10 13 10, 14 7, 20 19 9, 14 24
т		
tamoxifen testosterone tetanus vaccine tetracaine tetracycline theophylline thiamine thioacetazone + isoniazid thiopental timolol triclabendazole trimethoprim trimethoprim + sulfamethoxazole tropicamide tuberculin, purified protein derivative (PPD) typhoid vaccine	8.3 18.2 19.3.1 21.3 21.1 25.1 27 6.2.4 1.1 21.4 6.1.3 6.2.2 6.2.2, 6.5.4 14.1 19.1 19.3.2	15 21 23 24 24 26 27 11 5 24 9 10 10, 14 19 23 24
<b>u</b> urea	13.5	18
v valproic acid vancomycin vecuronium verapamil vinblastine vincristine	5, 24.2.2 6.2.2 20 12.1, 12.2 8.2 8.2	8, 25 10 24 16, 17 15 15
w warfarin water for injection	10.2 26.3	16 26
y yellow fever vaccine	19.3.2	24
z zidovudine	6.4.2	12
Zido i ddille	0.1.2	12