

Give mothers information, not orders.

The ACR recommends that breastfeeding mothers be given the opportunity to make an informed decision as to whether to continue after receiving IV contrast media.

Data suggest that it is safe to continue breastfeeding after receiving iodinated and gadolinium-based agents.

Use caution with the manganese-containing MRI contrast agent, Teslascan.

Breastfeeding Resource Center

1355 Old York Road, Suite 101
Abington, PA 19001

Breastfeeding after contrast administration

Facts for counseling your patients.





Is a short wait a big deal?

The cautious approach of telling mothers to abstain from breastfeeding for 24-48 hours has implications.

Problems with “Pump and Dump”

- No pump: the mother may not have a quality pump that will maintain her milk supply until she can breastfeed again. If the mother just got a new pump, she may not yet know how to use it properly.
- No milk: if a mother doesn't have any expressed breastmilk to use, she may need to switch to formula.
- No-go with the bottle: babies need time to learn how to bottle-feed. Some refuse to. Conversely, once a baby is off the breast for a couple of days, they may not want to return.
- No time! Feeding a hungry baby is one thing, but feeding a hungry baby AND taking an extra half hour to pump and wash the pump parts is a lot. (If baby is feeding 10 times a day that is an extra 5 hour work load on mom per day.)

Safe Contrast Agents Iodinated (Ionic and Nonionic) and Gadolinium-based Agents ¹

The literature on the breast milk excretion and gastrointestinal absorption of iodinated and gadolinium-based agents from breast milk is limited, but reassuring:

- Less than 1% of maternal intravenous contrast dose is excreted into breastmilk.
- Less than 1% of contrast digested by an infant is absorbed by the gastrointestinal tract.
- The resulting tiny amount of contrast that is absorbed by the infant is less than the doses administered (intravenously) for pediatric imaging studies.

Reassure your patients that the theoretical risk of breastfeeding after receiving an iodinated or gadolinium-based contrast does not outweigh the benefits of continuing to breastfeed.

Barium sulfate ²

- administered orally and not absorbed: therefore cannot be excreted in breastmilk

References

1 American College of Radiology, Committee on Drugs and Contrast Media. Administration of Contrast Media to Breastfeeding Mothers, ACR Manual on Contrast Media, Version 8, 2013
Available at: <http://www.acr.org/Quality-Safety/Resources/Contrast-Manual>

2 Hale T. Medications and Mothers' Milk (14th ed). Amarillo, TX: Hale Publishing, 2010, pp. 1150

Agent of Concern Teslascan (Mangafodipir Trisodium) ²

- Manganese-containing agent used in some hepatic and pancreatic MRI studies.
- Agent is rapidly redistributed to liver but plasma manganese levels do not rise.
- Manganese is transported into breastmilk.
- Manganese half-life is 10.1 hours.
- Mothers should abstain from breastfeeding for at least 4 hours, then “pump and dump” at least once before resuming feeding.

Have a question about a specific contrast agent, or other medication?

Call the Infant Risk Center
806-352-2519

- Run by the Texas Tech University Health and Sciences Center
- Open Monday-Friday, 9AM—6PM EST
- Visit online at www.InfantRisk.org

Contact the BRC

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