

# New guidelines say breastfeeding is safe after anaesthesia

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New guidelines published by the Association of Anaesthetists in the journal *Anaesthesia*, to coincide with the start of World Breast Feeding Week (1-7 August) say that breastfeeding is safe after the mother has had anaesthesia, as soon as she is alert and able to feed.

"The guidelines say there is no need to discard any breast milk due to fear of contamination, since evidence shows that anaesthetic and non-opioid painkiller drugs are transferred to [breast milk](#) in only very small amounts," explain the authors who include Dr. Mike Kinsella of the Association of Anaesthetists Safety Committee, based at St Michael's Hospital, Bristol, UK, and colleagues. "For almost all of these drugs, there is no evidence of effects on the breastfed infant."

However, they caution that drugs such as opioids and benzodiazepines should be used with caution, especially after multiple doses and in babies up to 6 weeks old (corrected for gestational age). "In this situation, the infant should be observed for signs of abnormal drowsiness and [respiratory depression](#), especially if the woman is also showing signs of sedation," they explain. "Techniques that reduce opioid usage are preferable for the breastfeeding woman. Local and regional anaesthesia have benefits in this regard, and also have the least interference with the woman's ability to care for her infant."

They also add that codeine should not be used by breastfeeding women following concerns of excessive sedation in some [infants](#), related to differences in metabolism.

More generally, the guidelines say that any women with an infant aged 2 years or younger should routinely be asked if they are breastfeeding during their preoperative assessment, so that it can be explained to them that breastfeeding will be safe after their surgery. They say: "Where possible, day surgery is preferable to avoid disrupting normal routines. A woman having day surgery should have a responsible adult stay with her for the first 24 hours. She should be cautious with co-sleeping, or sleeping while feeding the infant in a chair, as she may not be as responsive as normal."

They conclude: "In summary, the pharmacological aspects of [anaesthesia](#) and sedation require little alteration in [breastfeeding](#) women. However, [supportive care](#) for the woman in the peri-operative period, and accurate advice, will ensure minimal disruption to this important part of childcare."

Provided by AAGBI

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