

Workshop

Promozione della salute e allattamento nei primi 1000 giorni

Nuovi materiali a sostegno della rete di formazione



7 – 8 Novembre 2024

Aula Rossi – Istituto Superiore di Sanità, Roma



FARMACI E ALLATTAMENTO

Lorella Faraoni

Centro Antiveleni Asst Papa Giovanni XXIII- Bergamo

7 – 8 Novembre 2024

Aula Rossi – Istituto Superiore di Sanità, Roma



Workshop

Promozione della salute e allattamento nei primi 1000 giorni Nuovi materiali a sostegno della rete di formazione



Dichiarazione di conflitto d'interessi

Interessi delle aziende private del settore della salute, rilevanti per i contenuti della presentazione

Lorella Faraoni

1 – Azionista o portatrice/portatore di interessi, componente o dipendente di aziende private del settore della salute	NO
2 – Consulente o componente di un panel scientifico di aziende private del settore della salute	NO
3 – Relatrice/Relatore pagato o autrice/autore o editor di articoli o documenti per aziende private settore della salute	del NO
4 – Pagamento di spese di viaggio, alloggio o iscrizione a convegni, conferenze o eventi da parte di aziende private del settore della salute	NO
5 – Coinvolgimento in studi di aziende private del settore della salute	NO
6 – Attività che rientrano nell'ambito del Codice Internazionale per la commercializzazione dei sostituti del latte materno e successive risoluzioni AMS, o afferenti alla commercializzazione di prodotti di aziende private del settore della salute, alcol o tabacco	NO

LO STATO DELL'ARTE

Non cambia nulla da 20 anni!

Il farmacista si rifiuta di darmi quello che mi è stato prescritto

Internet... tutto en contrario di tutto

Il foglietto illustrativo... Che terrore!

Il medico di base dice No

La vicina di casa..

Il pediatra dice Si

Lo specialista mi dice ... interrompi

IL FOGLIETTO ILLUSTRATIVO

- Non sono aggiornati
- Riportano indicazioni differenti a parità di principio attivo
- In alcune situazioni si contraddico anche al loro interno
- Non sono per i medici

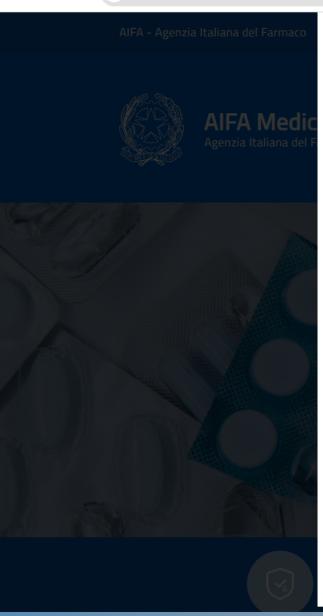
RCP RIASSUNTO DELLE CARATTERISTICHE DEL PRODOTTO



Dove si trova?



https://medicinali.aifa.gov.it/it/#/it/



Sono consapevole che per i medicinali generici l'AIFA autorizza RCP e FI completi, includendo anche le eventuali indicazioni terapeutiche ed i dosaggi ancora coperti da brevetto in Italia. L'AIFA è estranea alle eventuali dispute concernenti i diritti di proprietà industriale e la tutela brevettuale dei dati relativi all'autorizzazione all'immissione in commercio (AIC) dei medicinali e, pertanto, non potrà in alcun modo essere ritenuta responsabile di eventuali violazioni da parte del titolare dell'autorizzazione all'immissione in commercio (o titolare AIC – vedi ulteriori dettagli nella sezione "ricerca" del portale – sezione "informazioni" della APP).

Sono consapevole che queste informazioni possono essere aggiornate più volte durante il periodo di validità del medicinale e che, dunque, potrebbero sussistere difformità tra le informazioni qui presentate ed altre informazioni di dominio pubblico.

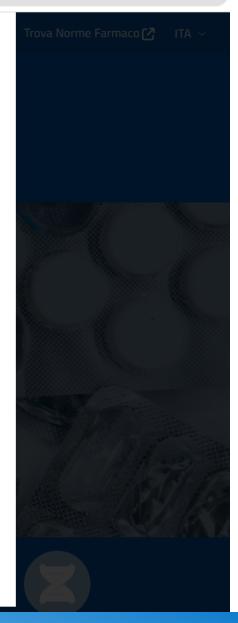
Sono altresì consapevole che l'Agenzia Italiana del Farmaco (AIFA) non può fornire consulenze mediche e che pertanto un paziente in caso di dubbi e/o quesiti relativi all'utilizzo di un medicinale che sta assumendo deve sempre rivolgersi al proprio medico curante o farmacista.

Sono consapevole del fatto che i pazienti non devono interrompere l'assunzione di un medicinale che è stato loro prescritto senza aver prima consultato un medico.

Sono, infine, consapevole che l'Agenzia Italiana del Farmaco ha utilizzato le sue migliori risorse per pubblicare queste informazioni, e prendo atto che le informazioni pubblicate per questo medicinale potrebbero non rappresentare la versione più aggiornata.

Ho letto e compreso le condizioni d'uso del sistema

ACCETTA



RCP CLINDAMICINA ORALE

• La clindamicina, a seguito di somministrazione per via orale e parenterale, è stata rinvenuta nel latte materno umano in concentrazioni comprese tra < 0,5 e 3,8 mcg/ml. La clindamicina può causare effetti collaterali sulla flora gastrointestinale del neonato allattato con latte materno come diarrea, sangue nelle feci, candidosi o eruzioni cutanee. Pertanto, non deve essere utilizzata nelle donne che allattano (vedere paragrafo 4.3). Se per una madre che allatta è necessaria la clindamicina per via orale o endovenosa, deve essere utilizzato un medicinale alternativo o deve essere sospeso l'allattamento. I benefici dell'allattamento al seno sullo sviluppo e sulla salute del bambino devono essere considerati insieme al bisogno clinico di clindamicina per la madre

ALTRE FONTI

Le banche dati sui farmaci in allattamento

- E-lactancia: https://www.e-lactancia.org/
- Lactmed: https://www.ncbi.nlm.nih.gov/books/NBK501922/

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Drugs and Lactation Database (LactMed®)

Bethesda (MD): National Institute of Child Health and Human Development; 2006-.

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Search this book

The LactMed® database contains information on drugs and other chemicals to which breastfeeding mothers may be exposed. It includes information on the levels of such substances in breast milk and infant blood, and the possible adverse effects in the nursing infant. Suggested therapeutic alternatives to those drugs are provided, where appropriate. All data are derived from the scientific literature and fully referenced. A peer review panel reviews the data to assure scientific validity and currency.

Contents

 $1 \cdot A \cdot B \cdot C \cdot D \cdot E \cdot F \cdot G \cdot H \cdot I \cdot J \cdot K \cdot L \cdot M \cdot N \cdot O \cdot P \cdot Q \cdot R \cdot S \cdot T \cdot U \cdot V \cdot W \cdot X \cdot Y \cdot Z$

1

(1-14C)-Triolein

(14C)-Glycocholic Acid

LactMed Support Resources
User and Medical Advice Disclaimer

Bulk download LactMed data from FTP

LactMed App

Drugs and Lactation Database (LactMed) - Record Format

LactMed - Database Creation and Peer Review Process

Fact Sheet. Drugs and Lactation Database (LactMed)

Drugs and Lactation Database (LactMed) - Glossary

LactMed Selected References

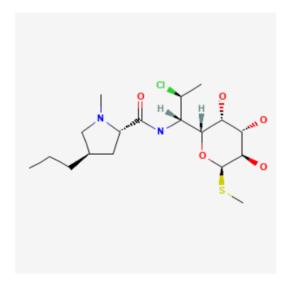
Drugs and Lactation Database (LactMed) - About Dietary

Clindamycin

Last Revision: August 15, 2024.

Estimated reading time: 2 minutes

CASRN: 18323-44-9



Drug Levels and Effects

Summary of Use during Lactation

Clindamycin has the potential to cause adverse effects on the breastfed infant's gastrointestinal flora. If oral or intravenous **clindamycin** is required by a nursing mother, it is not a reason to discontinue breastfeeding, but an alternate drug may be preferred. Monitor the infant for possible effects on the gastrointestinal flora, such as diarrhea, candidiasis (thrush, diaper rash) or rarely, blood in the stool indicating possible antibiotic-associated colitis.

Vaginal application is unlikely to cause infant side effects, although about 30% of a vaginal dose is absorbed. Infant side effects are unlikely with topical administration for acne; however, topical application to the breast may increase the risk of diarrhea if it is ingested by the infant. Only water-miscible cream, foam, gel or liquid products should be books/n/lactmed/LactMedrefs/ uuse ointments may expose the infant to high levels of mineral paraffins via licking.[1]

Cite this Page PDF version of this page (115K) In this Page Drug Levels and Effects Substance Identification **Bulk Download** Bulk download LactMed data from FTP LactMed Support Resources User and Medical Advice Disclaimer Drugs and Lactation Database (LactMed) - Record Format LactMed - Database Creation and Peer Review Process Fact Sheet. Drugs and Lactation Database (LactMed) Drugs and Lactation Database (LactMed) - Glossary LactMed Selected References Go to: (V) Drugs and Lactation Database (LactMed) - About Dietary Supplements Breastfeeding Links Related information PMC PubChem Substance PubMed

Drug Levels

Maternal Levels. Two women were given **clindamycin** 150 mg orally. Breastmilk levels of **clindamycin** averaged 1.3 mg/L 4 hours after the dose.[2]

Two women were treated with **clindamycin** 600 mg intravenously every 6 hours followed by 300 mg orally every 6 hours (time postpartum not stated). Peak milk levels after the intravenous dose were 2.65 mg/L at 3.5 hours after the dose in one and 3.1 mg/L at 30 minutes after the dose in the other. During the oral regimen, peak milk levels were 1.3 mg/L at 3.5 hours after the dose in the first woman and 1.8 mg/L at 2 hours after the dose in the other.[3]

Five women were given oral **clindamycin** 150 mg three times daily during the first 2 weeks postpartum. Milk levels were measured after at least 1 week of therapy and averaged 1.2 mg/L (range <0.5 mg/L to 3.1 mg/L) 6 hours after the dose.[4]

Stéen B, Rane A. Clindamycin passage into human milk. Br J Clin Pharmacol 1982;13:661-4.

and 6 hours after the dose. The peak occurred at 2 hours after the dose in one woman and 4 hours after the dose in the other.[5]

After a single dose of 600 mg of **clindamycin** intravenously to 15 women who were 1 month postpartum, milk **clindamycin** levels averaged 1.03 mg/L 2 hours after the dose.[6]

Infant Levels. Relevant published information was not found as of the revision date.

Effects in Breastfed Infants

Bloody stools in a 5-day-old breastfed infant were possibly caused by concurrent maternal **clindamycin** 600 mg intravenously every 6 hours and gentamicin 80 mg intravenously every 8 hours. The infant's stools were reported to have normal flora and the stools became guaiac negative 24 hours after discontinuation of breastfeeding. On day 6 of age, the infant resumed breastfeeding after discontinuation of maternal antibiotics with no further difficulties.[7]

Effects o Mann CF. Clindamycin and breast-feeding. Pediatrics 1980;66:1030-1. [PubMed] [Reference list]

Relevant published information was not found as of the revision date.

Alternate Drugs to Consider

(Systemic infections) Amoxicillin and Clavulanic Acid, Doxycycline, Erythromycin; (Methicillin-resistant Staph.

Recent Activity

Turn Off Clear

Clindamycin - Drugs and Lactation Database (LactMed®)

Clindamicin (1192)

Books

Tamsulosin - Drugs and Lactation Database (LactMed®)

A tamsulosine (420)

Books

Drugs and Lactation Database (LactMed®)

See more...



Is it compatible with breastfeeding?

Check the compatibility of Breastfeeding with 35,611 terms

Type your search

Some examples: <u>Ibuprofen</u>, <u>Couldina</u>, <u>Goji berries</u>, <u>Phytotherapy</u>.

Last update: April 24, 2023, 9:36 p.m. (CET)

Peace in Ukraine. Stop war.

22 Mara D Vicasini Hi nimi

Search









Last apaate Mag. 20, 2021

e-lactancia

Clindamycin

Compatible

Safe product and/or breastfeeding is the best option.

Lincosamide antibacterial active against many gram-positive bacteria (staphylococci, streptococci, clostridium) and some anaerobes (Bacteroides fragilis) and parasites (plasmodium, toxoplasma).

Oral, intramuscular or intravenous administration in 3 to 4 daily doses.

Topical cutaneous and vaginal administration.

It is excreted in breast milk in clinically insignificant amounts (van Wattum 2019, Zhang 1997, Matsuda 1984, Stéen 1982, Smith 1975) and no problems have been recorded in infants whose mothers were taking it, except occasional gastroenterocolitis due to alteration of the intestinal flora which clears a few days after treatment ends. Clindamycin is used intravenously in the treatment of severe acute mastitis, without side effects in the infant (Maier 2021).

A single case (Mann 1980) of pseudomembranous colitis has been reported in an infant whose mother was taking clindamycin and gentamicin, although the infant was also receiving intravenous antibiotics.

The possibility of transient gastroenteritis due to altered intestinal flora in infants whose mothers take antibiotics should be taken into account (Ito 1993).

Alternatives

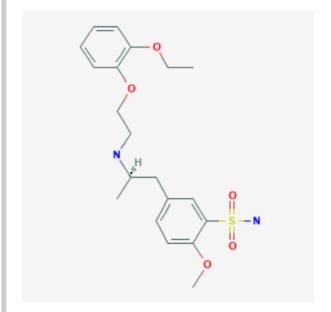
- Amoxicillin-Clavulanate (Safe product and/or breastfeeding is the best option.)
- Cefotaxime Sodium (Safe product and/or breastfeeding is the best option.)
- Ceftriaxone Sodium (Safe product and/or breastfeeding is the best option.)

Tamsulosin

Last Revision: January 18, 2022.

Estimated reading time: 1 minute

CASRN: 106133-20-4



Drug Levels and Effects

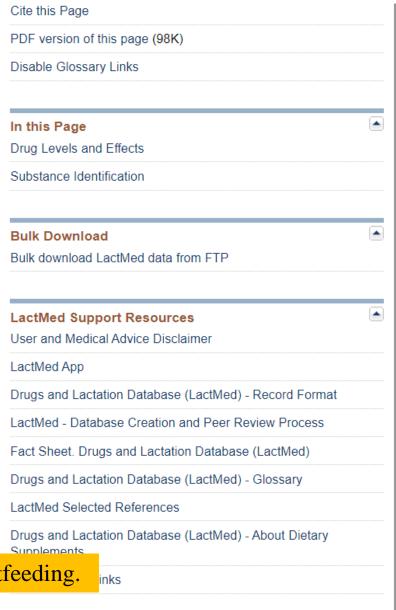
Summary of Use during Lactation

Although **tamsulosin** is not FDA approved for use in women, it is used off-label in women with kidney stones. No information is available on the use of **tamsulosin** during breastfeeding. Because it is 94 to 99% bound to plasma.

If **tamsulosin** is required by the mother, it is not a reason to discontinue breastfeeding.

Drug Levels

Maternal Levels. Relevant published information was not found as of the revision date.



Go to: ✓

Related information
PubChem Substance



º⁻₀ infantrisk.com

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L 1-806-352-2519





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PREGNANCY



Domperidone and Low Milk Supply BREASTFEEDING April 4, 2024



Sunscreen Smarts for Breastfeeding Families BREASTFEEDING LIFESTYLE March 27, 2024



Navigating Food Allergies in Young Children NUTRITION March 12, 2024

NUTRITION

LATEST ARTICLES



Weight Loss in Lactation

BREASTFEEDING NUTRITION LIFESTYLE

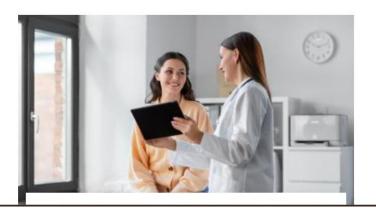
Many women are eager to lose weight after childbirth. However, a common concern is how to do so safely without compromising milk supply. Selfcompassion is very important in this process as societal p...

BREASTFEEDING



Domperidone and Low Milk Supply

In recent decades, domperidone has gained popularity in the breastfeeding community and has been used off-label to treat low milk supply. Domperidone's major drawbacks are rare, but severe, including ...





Forums For Mothers With Special Conditions

These forums are for women with various conditions/diseases and wish to share their experiences. Anyone may post in this forum.



(1/5)

358

2,391

6,334

Safety of progesterone & anxiety med/supplement co... by nicholec

10-28-2024, 02:52 PM

Sub-Forums:

- Breastfeeding and Adoption (1/3)
- Breastfeeding with Mastitis (10/25)
- Lyme Disease (15/44)
- Crohn's/IBD (Inflammatory Bowel (41/106) Disease)
- Epilepsy (11/30)
- Psychosis (4/9)

- Breastfeeding Mothers with Cystic (4/7)Fibrosis
- Breastfeeding with Nipple Vasospasm
- Anxiety (53/144)
- Depression (31/70)
- Fibromyalgia (9/22)
- Rheumatoid Arthritis (22/60)

- Breastfeeding with Low Milk Volume (15/45)
- DMER (Dysphoric Milk Ejection Reflex) (0/0)
- Bipolar Disorder (30/91)
- Diabetes (7/24)
- Multiple Sclerosis (39/193)
- SLE (Systemic Lupus Erythematosus) (6/9)

Medications and Breastfeeding Mothers

These forums are for questions about medication use during breastfeeding. If you have additional questions or concerns, please call the us at 806-352-2519.

Keratin hair treatment while breastfeeding by nicholec

Yesterday, 09:10 AM

Sub-Forums:

- Analgesics (193/533)
- Anticancer (46/137)
- Antidepressants (262/680)
- Antihypertensives (58/134)
- CNS Stimulants (102/239)
- Galactalogues (65/196)
- New Data of Interest (12/39)
- Radiocontrast or Radiopaque (26/76)
- Topical Medications (97/229)

- Anti-Arthritic Medications (53/184)
- Anticoagulants (26/76)
- Antiemetics (7/25)
- Antiparasitic Medications (9/26)
- Contraceptives (14/52)
- Herbal Medications (97/237)
- Other Uncategorized (318/833)Medications
- Sedative or Hypnotic Agents (48/108)
- Vitamins (114/312)

- Antibiotics Antifungals Antivirals (207/530)
- Anticonvulsant Medications (43/114)
- Antihistamines and Decongestants (51/108)
- Antipsychotics (38/98)
- Diabetic Medications (22/58)
- Medications and Mothers' Milk (175/538)
- Radioactive Drugs (15/54)
- Steroids- Oral, Inhaled, Injected, Topical (97/265)



U3GI/LIIIAII

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LATEST TOPICS

by Yhello1

user name?

Guanfacine and Breastfeeding

Lupus/RA meds-breastfeeding

Channel: Other Uncategorized

I'm currently pregnant and off of my t...

by LpNora Hi! I am on 3mg Guanfacine ER and ... Channel: Antihypertensives

Keratin hair treatment while breast...

Hello. I got keratin hair treatment whi...

Channel: Medications and

Breastfeeding Mothers

by Lboudreaux

Medications

10-13-2024, 11:02 PM

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10-28-2024, 05:43 PM

10-24-2024, 11:55 PM

 \odot



Safety of progesterone & anxiety ... by GinaMCamarata

Hello, I had some questions regardin.. Channel: Breastfeeding with Anxiety 10-09-2024, 11:35 PM



Trimethoprim + Sulfamethoxazole ...

by corey Hello InfantRisk, I am a hospital phar... Channel: Medications and Breastfeeding Mothers

10-08-2024, 07:07 PM

Medications and Pregnancy

These forums are for use of medications during pregnancy. If you have additional questions or concerns, please call us at 806-352360 940



Guanfacine and Breastfeeding by nicholec

10-28-2024, 02:58 PM

2519.

Sub-Forums:

- Analgesics (30/122)
- Anticancer (3/7)
- Antidepressants (64/173)
- Antihypertensives (3/6)
- CNS Stimulants (14/34)
- Herbal Medications (11/27)
- Radiocontrast or Radiopaque Agents (1/2)
- Topical Medications (22/53)

rum/member/63183-ginamcamarata

- Anti-Arthritic Medications (9/34)
- Anticoagulants (0/0)
- Antiemetics (5/12)
- Antiparasitic Medications (4/10)
- Contraceptives (0/0)
- Other Uncategorized Medications (41/112)
- Sedative or Hypnotic Agents (12/27)
- Vitamins (17/48)

- Antibiotics Antifungals Antivirals (23/70)
- Anticonvulsant Medications (6/18)
- Antihistamines and Decongestants (5/13)
- Antipsychotics (10/27)
- Diabetic Medications (3/8)
- Radioactive Drugs (0/0)
- Steroids- Oral, Inhaled, Injected, Topical (17/38)

IN ITALIA



LE RACCOMAND AZIONI... INUTILI?

• There is little clear evidence to support the discarding of breastmilk or timing of breastfeeding in relation to time of maternal drug administration. Such recommendations could potentially add to the difficulties and challenges of establishing breastfeeding.

British Association for Psychopharmacology consensus guidance on the use of psychotropic medication preconception, in pregnancy and postpartum 2017

QUALCOS'ALTRO A CUI FARE ATTENZIONE... IL BIAS OPERATORE

Care should be taken to avoid medical jargon when discussing risks and benefits.
 Care should also be taken that the biases of the clinician does not colour the description of the relevant risks and benefits of the various options.

British Association for Psychopharmacology consensus guidance on the use of psychotropic medication preconception, in pregnancy and postpartum 2017

UNA CASO ... DI IERI

- Paziente in allattamento, bimbo ha 13 mesi
- Psichiatra prescrive Sertalina, clotiazepam e...
- «i farmaci sono compatibili con l'allattamento ma se fossi in lei considererei di interrompere l'allattamento»

COSA PUÒ PENSARE LA PAZIENTE?

- Il medico ha prescritto ma non è sicuro di quello che dice
- Mi sta dicendo che faccio male al bambino
- Per me allattare è importante piuttosto non mi curo
- Non sono pronta per interrompere l'allattamento.

