

Radiologic Procedure on Breastfeeding Patient

Ms. _____, you are breastfeeding and have received the following contrast agent:

(please check box before giving to patient)

- ☐ Isovue-300 (*iopamidol*)
- ☐ Visipaque-320 (*iodixanol*)
- ☐ Entero VU, E-Z-CAT, E-Z-HD or Polibar Plus (*barium*)
- ☐ Telebrix 38 (*ioxithalamate*)
- ☐ Cysto-Conray II or Conray 60 (*iothalamate*)
- ☐ Gastrografin (*Diatrizoate Meglumine*)
- ☐ Sinografin (*Diatrizoate Meglumine and Iodipamide Meglumine*)
- ☐ ProHance (*gadoteridol*)
- ☐ Multihance (*gadobenate*)

A very small amount (less than 1%) of these products may be present in your breast milk. After each 2-hour period, 50% of the remaining quantity is eliminated; therefore, there is practically no trace of the product in your milk 12 hours after the test. In addition, less than 1% of the amount your child ingests through breast milk will be absorbed. The rest will remain in his/her stomach and pass through the intestines to be eliminated in the stool. This means that less than 0,01% of the dose administered to you could be absorbed by your child, a minuscule amount. The risk of sensitization/allergic reaction and direct toxicity remains theoretical, as no cases have been reported in the scientific literature. Therefore, you may continue breastfeeding as normal.

References

American College of Radiology. Administration of Contrast Media to Breastfeeding Mothers. ACR Manual on Contrast Media. Version 10.1. 2015: 99-100. Online at:
http://www.acr.org/~media/ACR/Documents/PDF/QualitySafety/Resources/Contrast%20Manual/2015_Contrast_Media.pdf/#page=103

Department of Medical Imaging. Breastfeeding and IV Contrast for CT & MRI. Halton Healthcare 2010. 1 page. Online at: https://www.haltonhealthcare.on.ca/site_Files/Content/Documents/Docs/breastfeeding.pdf

Hamilton Regional Lactation Committee. Breastfeeding after a CT Scan with contrast dye. Hamilton Health Sciences 2012. 2 pages. Online at:
<http://www.hamiltonhealthsciences.ca/documents/Patient%20Education/BreastfeedAfterCTScanContrastMedia-lw.pdf>

Appendix 1

Newman J. Breastfeeding and radiologic procedures. Can Fam Phys 2007; 53: 630-1. Online at:
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1952588/pdf/050630.pdf>

You also received:

(please check box before giving to patient)

- | | |
|---|---|
| <input type="checkbox"/> Marcaine (<i>bupivacaine</i>) | <input type="checkbox"/> E-Z-Gas-II (<i>sodium bicarbonate/tartaric acid</i>) |
| <input type="checkbox"/> Xylocaine (<i>lidocaine</i>) | <input type="checkbox"/> Maxeran (<i>metoclopramide</i>) |
| <input type="checkbox"/> Ropivacaine | <input type="checkbox"/> Hyoscine (<i>scopolamine butylbromide</i>) |
| <input type="checkbox"/> Kenalog (<i>triamcinolone</i>) | <input type="checkbox"/> Mannitol |
| <input type="checkbox"/> Depo-Medrol (<i>methylprednisolone</i>) | |
| <input type="checkbox"/> Baxedin or Hibitane (<i>chlorhexidine</i>) | <input type="checkbox"/> Atropine |
| | <input type="checkbox"/> Benadryl (<i>diphenhydramine</i>) |
| <input type="checkbox"/> Polysporin (<i>bacitracin/polymyxin b</i>) | <input type="checkbox"/> Adrenaline (<i>epinephrine</i>) |

As with the contrast agent you received, this/these medication(s) may be present in your breast milk, but in very small amounts. A review of the scientific literature on their use in the context of breastfeeding revealed no problems. Therefore, you may continue breastfeeding as normal.

It is also possible that we used the following products:

- ☐ Lipiodol Ultra-Fluide (ethiodized oil), alternative if scan unavailable
- ☐ Povidone-iodine, alternative if patient is allergic to chlorhexidine and benzalkonium is unavailable

Please call the pharmacy department (extension 6270) for the information to be given to the patient, then check off and fill out the document before giving it to her.

☐ Other: _____

Recommendations from the pharmacy: _____

Thank you.

Nathalie Gagnon, Pharmacist, CISSSO, September 9th, 2016