

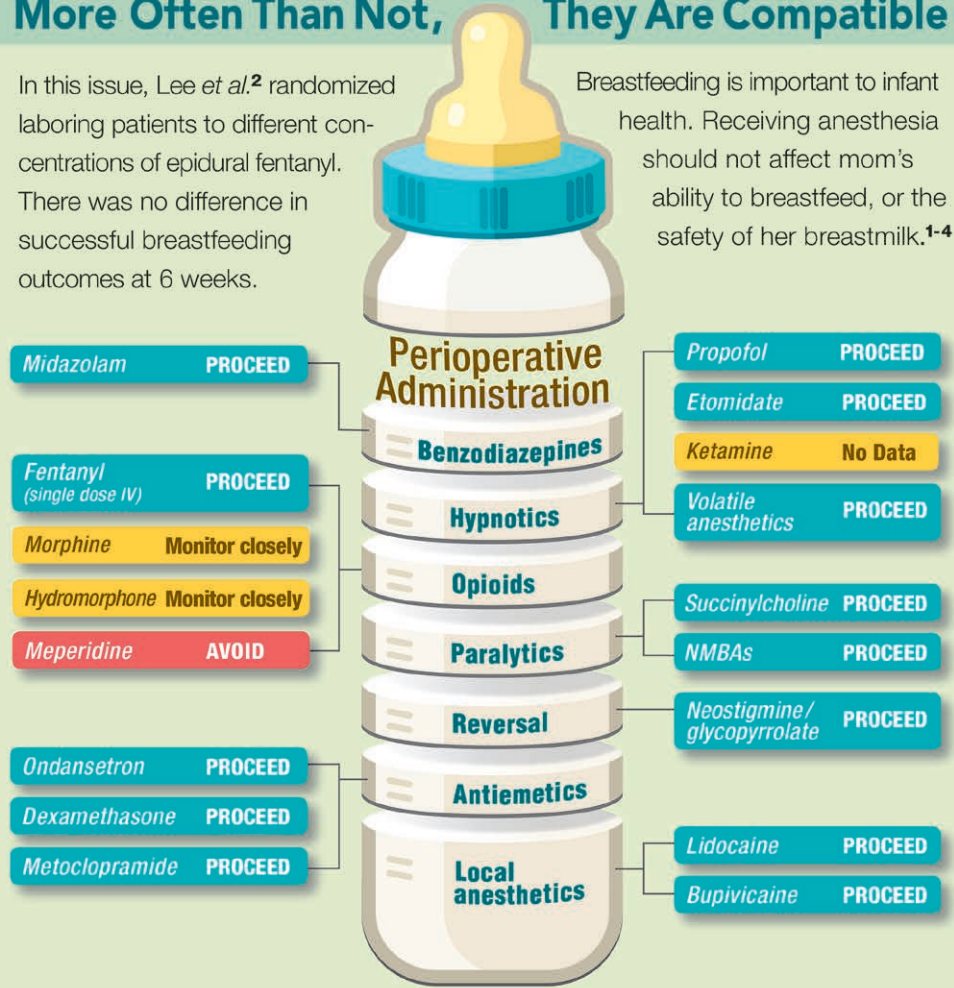
ANESTHESIOLOGY



Anesthesia & Breastfeeding: More Often Than Not, They Are Compatible

In this issue, Lee *et al.*² randomized laboring patients to different concentrations of epidural fentanyl. There was no difference in successful breastfeeding outcomes at 6 weeks.

Breastfeeding is important to infant health. Receiving anesthesia should not affect mom's ability to breastfeed, or the safety of her breastmilk.¹⁻⁴



“A general principal is that a mother can resume breastfeeding once she is awake, stable, and alert after anesthesia has been given.”²

IV = intravenous; NMBAs = neuromuscular blocking agents.

Infographic created by Jonathan P. Wanderer, Vanderbilt University Medical Center, and James P. Rathmell, Brigham and Women's Health Care/Harvard Medical School. Illustration by Annemarie Johnson, Vivo Visuals. Address correspondence to Dr. Wanderer: jonathan.p.wanderer@vanderbilt.edu.

1. Lee AI, McCarthy RJ, Toledo P, Jones MJ, White N, Wong CA: Epidural labor analgesia—fentanyl dose and breastfeeding success: A randomized controlled trial. *ANESTHESIOLOGY* 2017; 127:614–24
2. Cobb B, Liu R, Valentine E, Onuoha O: Breastfeeding after anesthesia: A review for anesthesia providers regarding the transfer of medications into breast milk. *Transl Perioper Pain Med* 2015; 1:1–7
3. Dalal PG, Bosak J, Berlin C: Safety of the breast-feeding infant after maternal anesthesia. *Paediatr Anaesth* 2014; 24:359–71
4. Drugs and Lactation Database (LactMed), United States National Library of Medicine, National Institutes of Health, Department of Health and Human Services. Available at: <https://toxnet.nlm.nih.gov/newtoxnet/lactmed.htm>. Accessed August 5, 2017