



# Breastfeeding Guidelines

## Following Radiopharmaceutical Administration

An article in the *European Journal of Nuclear Medicine* combined data on the radioactivity secreted in breast milk for most nuclear medicine procedures. Recommendations were made for the interruption of breastfeeding in patients having a nuclear medicine investigation. These are summarized here:

1. Breastfeeding should be noted in the patient history from the attending physician.
2. The nuclear medicine technologist should ask about the patient's breastfeeding status and notify the nuclear physician when a patient is breastfeeding.
3. Breastfeeding should be interrupted for the time radioactivity is known to appear in breast milk.
4. Close contact with an infant should be restricted to 5 hours in 24 hours for Tc-99m MIBI, Tc-99m labeled RBCs and I-131 (>3mCi) whether or not the mother is breastfeeding.

## Radiopharmaceutical Recommendation

Tc-99m labeled DMSA, MDP, HDP, DISIDA, SC, MIBI, and Gluceptate, & In-111 WBC	Interruption of 4 hours
Tc-99m labeled MAA, PYP, DTPA, and RBCs	Interruption of 12 hours
99mTcO <sub>4</sub> <sup>-</sup> , I-123, I-131 hippurate	Interruption of 24 hours
Tl-201, Ga-67, I-131	Breastfeeding Contraindicated

### References:

Harding LK, Bossuyt A, Pellet S, Reiners C, Talbot JN. "Recommendations for nuclear medicine physicians regarding breastfeeding mothers." *European J Nucl Med*. 1995; 22:BP