

Appendix 1 - Antimicrobials in Pregnancy and Breastfeeding

General points:

- It is important to adequately treat maternal infections during pregnancy to avoid adverse maternal and foetal effects as a consequence of uncontrolled fever or infection.
- Where possible send samples to Microbiology and use the results of culture and sensitivity to guide choices.

The following guidance is derived from the British National Formulary; see the relevant chapters for more information.

Other information can be found on the UK Teratology Information Service (UKTIS) www.uktis.org.

Antimicrobial	Pregnancy	Breastfeeding
Beta-lactams: <ul style="list-style-type: none"> • Penicillin • Amoxicillin /Ampicillin • Cephalosporins • Flucloxacillin • Co-amoxiclav 	Use at any stage Not known to be harmful	Use at any stage Not known to be harmful
Pivmecillinam (penicillin antibiotic)	Short term use not known to be harmful Avoid long or repeated courses	Trace amounts in milk, but appropriate to use
Tetracyclines: <ul style="list-style-type: none"> • Doxycycline • Lymecycline 	Avoid 1 st trimester – potential effects on skeletal development 2 nd and 3 rd trimester – staining of teeth in foetus	Avoid Discolouration of infants teeth
Gentamicin	Avoid unless essential Very small risk of auditory or vestibular nerve damage in the foetus in 2 nd and 3 rd trimester	Not known to be harmful
Macrolides: <ul style="list-style-type: none"> • Erythromycin 	Not known to be harmful	Not known to be harmful
Macrolides: <ul style="list-style-type: none"> • Clarithromycin • Azithromycin 	Avoid unless benefit outweighs risk and no suitable alternatives	Avoid unless benefit outweighs risk and no suitable alternatives
Clindamycin	Not known to be harmful	Amount probably too small to be harmful. Bloody diarrhoea reported in one infant
Trimethoprim	Risk of teratogenicity in 1 st trimester and in folate deficiency or if taking folate antagonists e.g. anti-epileptics	Short term use not known to be harmful
Quinolones: <ul style="list-style-type: none"> • Ciprofloxacin • Levofloxacin • Ofloxacin 	Avoid	Avoid
Vancomycin	Only use if benefit outweighs risk	Present in breast milk; however significant levels after oral administration (e.g. for <i>C difficile</i>) unlikely.

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Linezolid	Use only if benefit outweighs risk	Avoid
Nitrofurantoin	Avoid at term – may potentiate neonatal haemolysis	Caution – has been associated with haemolysis in G6PD deficient infants.
Metronidazole	Avoid high dose regimens	Significant amount in milk, avoid large single doses.
Fosfomycin	Avoid only if benefit outweighs risk and no suitable alternatives.	Present in milk, avoid only if benefit outweighs risk and no suitable alternatives.
Fluconazole	Avoid	Amount probably too small to be harmful
Aciclovir	Not known to be harmful but use only if benefit outweighs risk	Caution – significant amounts in breast milk but not known to be harmful