

Marijuana Use while Breastfeeding

The following information is taken from the **Academy on Breastfeeding Medicine Protocol #21: Guidelines for Breastfeeding and Substance Use or Substance Use Disorder, Revised 2015.**

Uniform guidelines regarding the varied use of marijuana by breastfeeding mothers are difficult to create and cannot hope to cover all situations. First of all, the legality of possessing and using marijuana varies. In some states, marijuana is legal for “medicinal uses” with a prescription, and in a few states, it is legal for “recreational use”.

It is important to carefully weigh the risks of initiation and discontinuation of breastfeeding while using marijuana with the risks of not breastfeeding, while also considering the wide range of occasional, to regular medical, to heavy exposure to marijuana. The main compound in marijuana (THC) is present in human milk up to eight times that of maternal plasma levels, and metabolites are found in infant feces, indicating that THC is absorbed and metabolized by an infant. It is rapidly distributed to the brain and adipose tissue and stored in fat tissues for weeks to months. It has a long half-life (25-57 hours) and stays positive in the urine for 2-3 weeks.

Evidence regarding the effects of THC exposure on infant development via breastfeeding alone is sparse and conflicting and there are no data evaluating neurodevelopmental outcomes beyond the age of one year in infants who are only exposed after birth. In addition, the potency of marijuana is increasing, so data from previous studies may no longer even be relevant. Current concerns over marijuana use during lactation include possible infant sedation and maternal inability to safely care for her infant while under the influence of marijuana, however, this remains theoretical and has not been well established in literature.

There is also evidence that THC exposure during critical periods of brain development can induce subtle and long lasting neurofunctional alterations. Exposure to second hand marijuana smoke by infants has been associated with an independent two times possible risk of sudden infant death syndrome (SIDS). However, because breastfeeding reduces the risk of SIDS, this also needs to be considered. Breastfeeding mothers should be counseled to reduce or eliminate their use of marijuana to avoid exposing their infants and should be advised of the possible long-term neurobehavioral effects from continued use.

<https://abm.memberclicks.net/assets/DOCUMENTS/PROTOCOLS/21-drug-dependency-protocol-english.pdf>

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MilkWorks
LINCOLN • OMAHA • YORK



**Community
Breastfeeding
Center**

5930 S. 58th Street
(in the Trade Center)
Lincoln, NE 68516
(402) 423-6402

10818 Elm Street
Rockbrook Village
Omaha, NE 68144
(402) 502-0617

For additional
information:
www.milkworks.org