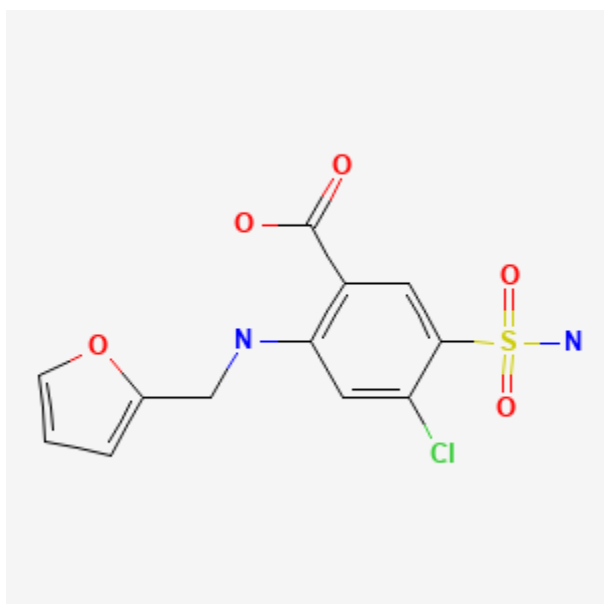




Furosemide

Revised: May 15, 2022.

CASRN: 54-31-9



Drug Levels and Effects

Summary of Use during Lactation

Because little information is available on the use of furosemide during breastfeeding and because intense diuresis from high doses might decrease lactation, an alternate drug may be preferred, especially while nursing a newborn or preterm infant. Low doses of furosemide (20 mg daily) do not suppress lactation.

Drug Levels

Maternal Levels. Relevant published information was not found as of the revision date.

Infant Levels. Relevant published information was not found as of the revision date.

Disclaimer: Information presented in this database is not meant as a substitute for professional judgment. You should consult your healthcare provider for breastfeeding advice related to your particular situation. The U.S. government does not warrant or assume any liability or responsibility for the accuracy or completeness of the information on this Site.

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Effects in Breastfed Infants

Anecdotal, short-term observations at one medical center found no adverse infant effects from maternal use of furosemide in the immediate postpartum period.[1]

Effects on Lactation and Breastmilk

Furosemide 20 mg intramuscularly on the first postpartum day followed by 40 mg orally for 4 days has been used in conjunction with fluid restriction and breast binding to suppress lactation within 3 days postpartum.[2] The added contribution of furosemide to fluid restriction and breast binding, which are effective in suppressing lactation, is not known. No data exist on the effects of loop diuretics on established lactation.

A randomized, controlled trial compared postpartum furosemide (n = 192) to placebo (n = 192) in women who had gestational hypertension and preeclampsia. Patients received either a 4- to 5-day course of 20 mg oral furosemide daily or placebo. The first dose was given 6 to 24 hours postpartum and then every 24 hours thereafter until hospital discharge. No difference was found in patient-reported breastfeeding difficulties between the two groups.[3]

Alternate Drugs to Consider

Chlorothiazide, Hydrochlorothiazide

References

1. Font LM. Breast milk and drugs. MCN Am J Matern Child Nurs 1989;14:308-9. Letter. PMID: 2507852
2. Cominos DC, Van Der Walt A, Van Rooyen AJ. Suppression of postpartum lactation with furosemide. S Afr Med J 1976;50:251-2. PMID: 3858
3. Lopes Perdigao J, Lewey J, Hirshberg A, et al. Furosemide for accelerated recovery of blood pressure postpartum in women with a hypertensive disorder of pregnancy: A randomized controlled trial. Hypertension. 2021;77:1517–24. PubMed PMID: 33550824.

Substance Identification

Substance Name

Furosemide

CAS Registry Number

54-31-9

Drug Class

Breast Feeding

Lactation

Milk, Human

Antihypertensive Agents

Loop Diuretics