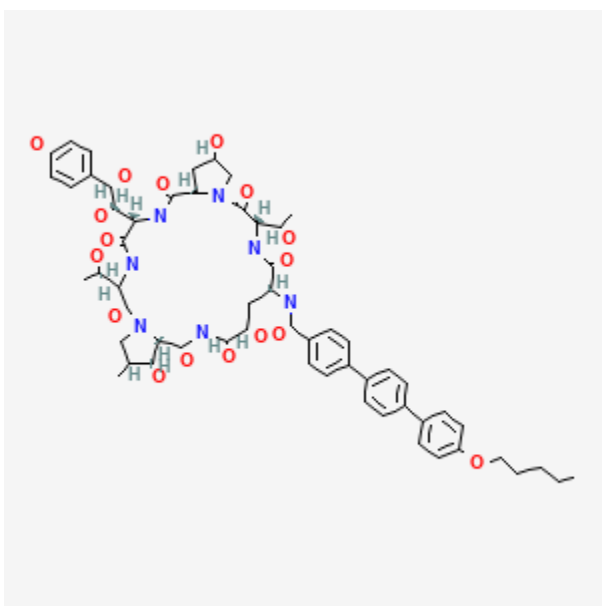




Anidulafungin

Revised: January 15, 2024.

CASRN: 166663-25-8



Drug Levels and Effects

Summary of Use during Lactation

Because of the low levels of anidulafungin in breastmilk, amounts ingested by the infant are small and would not be expected to cause any adverse effects in breastfed infants. If anidulafungin is required by the mother, it is not a reason to discontinue breastfeeding.

Drug Levels

Maternal Levels. A postpartum woman was treated with intravenous anidulafungin 100 mg once daily for 14 days. Nine milk samples were obtained over the first 32 hours after the drug was discontinued. Five hours after

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drug was discontinued, the milk concentration of anidulafungin was 0.24 mg/L. The concentration decreased to 0.12 mg/L at 32 hours after the dose and was undetectable in milk at 38 and 48 hours after the dose.[1]

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

Effects in Breastfed Infants

A postpartum woman was treated with intravenous anidulafungin 100 mg once daily for 14 days. She withheld breastfeeding until the second day after completing her 14-day course of therapy. Her milk had detectable anidulafungin levels until 32 hours after the last dose. No gastrointestinal or other adverse effects were seen in the infant up to 72 hours after the last dose of drug.[1]

Effects on Lactation and Breastmilk

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

Alternate Drugs to Consider

Fluconazole, Miconazole

References

1. Eijssink JFH, Wieringa A, Vries-Koenjer MLM, Ter Horst PGJ. Anidulafungin levels in breast milk after cessation of treatment: A case report. *Breastfeed Med* 2024. PubMed PMID: 38174985.

Substance Identification

Substance Name

Anidulafungin

CAS Registry Number

166663-25-8

Drug Class

Breast Feeding

Lactation

Milk, Human

Antifungal Agents

Echinocandins