

Appendix S1 Patient information leaflet

Patient information leaflet: having an anaesthetic whilst breastfeeding

We hope this leaflet will answer any questions you might have if you are breastfeeding and need surgery.

Please make sure that your surgeon and anaesthetist know that you are breastfeeding, so that it is considered during planning and performing your operation. If you have any more questions after reading this leaflet, please feel free to ask a member of the anaesthetic staff, or the breastfeeding specialist in your hospital.

Do I have to stop breastfeeding if I need an anaesthetic?

No, breastfeeding is of great value to both you and your infant. The hospital should make special arrangements for you to make sure that you can breastfeed as normally as possible. You should ask for support to help you breastfeed if you feel that this is not being offered.

Do medicines used during my operation get into my breast milk?

Yes, they will get into the milk in small amounts. Your team can answer any worries that you have.

What medicines can affect my infant?

Almost all medicines are safe to use and do not have any effect that can be seen, because the dose that the infant receives is so low. Some medicines can make you sleepy, especially if you have lots of doses, and in this case the medicine might build up in your breast milk and then affect your infant as well. If the drug makes you feel drowsy it is more likely that it will make your baby drowsy

How does the anaesthetist give an anaesthetic when I have my operation? Can I choose?

The type of operation often determines which kind of anaesthetic you need (local or general) Your anaesthetist will advise you on this, but will also consider what you prefer.

Local anaesthetic For some operations, an injection of a drug to numb the nerves (local anaesthetic) is used. This may be done where the operation is being done, at a nerve away from the operation such as in the arm-pit or groin (regional anaesthetic), or in the back to numb the lower half of the body (spinal or epidural anaesthetic). This may be preferred if you are breastfeeding, as it has some advantages: you can drink and eat soon after; it should not affect your ability to breastfeed; and you should need less painkillers. You recover quickly afterwards, and the medicines will not affect your baby.

Sedation This is when drugs are given to relax you during a procedure. It ranges from a small amount of drug given to reduce anxiety (light sedation), to being very sleepy and not remembering some of the details of the procedure (deep sedation). Sedation is often used in addition to local anaesthesia. You can breastfeed as soon as you feel awake enough to hold your infant.

General anaesthesia This is when you are made unconscious ('put to sleep') for the procedure. You may also be given local anaesthetic during the operation to numb an area and help you feel more comfortable following the operation.

What happens around the time of the operation?

You should breastfeed as normal until you go to the operating theatre. You should drink and eat until the time that you are told to stop. You can breastfeed again after your operation as soon as you are back with your infant, and awake and alert. You may need some help to start with. You should ask for medication if you feel sick.

Can I take pain killers after my procedure?

Yes. It is important that you are comfortable after your procedure, so you should make sure that you have a supply of pain killers, and take them if you need to.

Paracetamol is a good drug to take regularly, as it is safe for you and your infant. The amount that your infant would receive from breast milk is much lower than the dose which she or he would get if having it to treat a temperature or teething.

Anti-inflammatory drugs (such as ibuprofen, diclofenac or naproxen) are suitable for you to take and breastfeed as normal as very low levels of the drug pass into breast milk. They can be taken with paracetamol.

Opioids (morphine, dihydrocodeine, tramadol and oxycodone) can be used if you have severe pain. The effect of these medicines is different in different people. Some women are very sensitive, and may feel a large effect even after one dose. If you have a large effect from one or several doses, the medicine might build up in your breast milk and then affect your infant as well. If the medicine is making you very sleepy, you should stop taking it. Also if your infant has signs of drowsiness, then you should stop taking it and ask your doctor for advice, as you may need to change to a different medication. If the infant has signs of difficulty breathing, you should call for medical advice straight away.

Stopping pain killers after my operation

It is important to ensure that the opioid (strong) pain killers are only used during the early period after surgery, and should be stopped as soon as possible after your operation. In general it is best to reduce and stop any opioid medication that you are taking; then reduce and stop ibuprofen (or similar drug); then tail off and stop paracetamol last of all.

Can I bed share as normal following my anaesthetic?

You should not bed share with your infant on the night following surgery, as you will be less aware of your infant. It is important that you do not fall asleep in a chair or on a sofa. If possible, another adult should take responsibility for settling your infant.

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