



# Medicines you may require after the birth of your baby



Women and Children's Division – Maternity Services



**G O @**LancsHospitals

### Introduction

You may have been advised to take some medications after the birth of your baby. Here you will find information about the medicines most commonly used.

Please always read the information leaflet that comes with your medication and never take more than the recommended dose.

# Pain killers (analgesia)

There are three types of pain-relieving medicines:

- 1. Simple medicines, such as Paracetamol
- 2. Anti-inflammatories, such as ibuprofen
- 3. Opioids such as dihydrocodeine

Pain killing medicines work in different ways, so it is usually safe to use more than one type at a time. In fact, combining different types of painrelieving medicines may give better pain control allowing lower doses to be used.

Not all pain relieving medicines are suitable for everyone. There are others available if necessary.

The following table describes the types of common pain killers, their use and safety in breast feeding along with common side effects.

What is it?	<u>Paracetamol</u>	<u>lbuprofen</u>	<u>Dihydrocodeine</u>
<u>Why?</u>	Good for mild to moderate pain	Good for mild to moderate pain. Works well in combination with paracetamol. Best taken with food	Good for moderate to severe pain. Taken if paracetamol and ibuprofen have not controlled pain. Often best staggered between paracetamol and ibuprofen to work in combination with them and as a top up.
<u>When</u>	1g (2 x 500mg tablets). Up to 4 times in 24 hours.	200-400mg up to 3 times in 24 hours. When prescribed can be increased to 4 times in 24 hours.	30-60mg (1-2 tablets). Up to 4 times in 24 hours.
Is it safe to breastfeed?	Yes	Yes	See below for information
<u>Some</u> <u>common</u> <u>side effects</u>	Unlikely	Heartburn, nausea, stomach upset,	Nausea, vomiting, dizziness, constipation, drowsiness, mental clouding

### Dihydrocodeine

These tablets should preferably be taken for no longer than 72 hours after your baby's birth. This is particularly important if you are breastfeeding your baby.

If you are breastfeeding there is a very small chance that if you continue to take Dihydrocodeine once lactation has started (your milk has come in) that your baby may experience:

- Drowsiness
- Poor feeding
- Slow heart rate
- Breathing difficulties

If you notice any of these signs, you should stop taking the tablets immediately and tell your doctor.

Dihydrocodeine may make you feel drowsy or dizzy so, *see* how the medication affects you before attempting tasks such as bathing your baby. Take care when standing up from a sitting or lying position, to help avoid dizziness.

Dihydrocodeine is also likely to make you constipated.

Your discharge medications may have a supply that could last longer than the advised 72 hours but it is not necessary to use the whole supply if it is not required.

If you feel that you need to continue to take these tablets, please contact your midwife or GP.

# **Anticlotting injections**

# Low molecular weight heparins such as dalteparin (Fragmin®), enoxaparin (Clexane®)

If you are thought to be at risk of blood clotting problems, or have experienced clotting problems, these drugs will be prescribed for a period of time following your baby's birth. In addition, to the injections you should keep hydrated and mobilise as much as possible. If you experience severe headaches, skin rashes, chest pain, or breathlessness or notice an area of redness, swelling or pain in your leg you should contact your GP immediately.

It is not unusual to find that you bruise more easily than normal when having these injections.

Only very small amounts of these drugs enter breast milk and there are no reports of any adverse effects in breastfed babies.

# **Antibiotics**

If you have been prescribed antibiotics, you should complete the course of tablets even if you no longer have any signs of infection. If you feel that you are experiencing unpleasant side effects please discuss this with your GP. Not completing the course of antibiotics can result in recurrence of the infection.

Most antibiotics are safe for use by breastfeeding mothers. If you are concerned, or would like further information, please ask your midwife or GP.

### Lactulose

This drug is a laxative that works by increasing the water content and volume of the stools in the bowel, making them softer and easier to pass. It is generally only prescribed for short-term use if you have experienced damage to the muscles and tissues of the back passage during the birth of your baby.

You should also ensure that you drink plenty of water and include Fibre-containing foods such as fruit, vegetables and wholegrain cereals in your diet.

Lactulose is thought to be safe for use by breastfeeding mothers.

# Iron Tablets (Ferrous Sulphate)

These tablets are only given if you have been identified as having low haemoglobin (blood iron) levels after the birth of your baby. Low iron levels can make you feel very tired, breathless and, if you are breastfeeding, there is some evidence that your milk supply may be reduced. Ferrous sulphate tablets can cause nausea and bowel upsets in some women. If you experience any problems tell your midwife or GP.

These tablets are safe to take if you are breastfeeding.

The tablets help to restore your iron levels more quickly than diet alone, but you should also try to eat plenty of iron-rich foods. These foods include:

- Lean meat
- Oily fish
- Eggs
- Pulses, beans
- Bread, especially brown or wholemeal bread
- Fortified cereals
- Leafy green vegetables, such as broccoli and watercress
- Dried fruit, nuts & seeds

Vitamin C may help your body to absorb iron and so it is a good idea to eat fresh fruit and vegetables at each meal or drink fresh fruit juice.

### **Other medicines**

If you have any concerns about your medicines and their possible side effects for you or your baby, please discuss with your doctor or midwife. They can seek advice from the ward pharmacist or if out of hours the on- call pharmacy team. If you have gone home, then you can phone the Maternity Triage.

If your query relates specifically to breastfeeding you should phone

The Infant Feeding Specialist Team.

Always keep medicines out of the reach of children.

All contact numbers are on the back page of this leaflet.

### **Contact details**

Should you require further advice or information please contact

Maternity Triage, Sharoe Green Unit	01772 524495
Infant Feeding Specialists	01772 514512

### Sources of further information

www.lancsteachinghospitals.nhs.uk www.nhs.uk www.patient.co.uk www.accessable.co.uk

All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets Lancashire Teaching Hospitals NHS Foundation Trust is not responsible for the content of external internet sites.

Lancashire Teaching Hospitals is a smoke-free site. Smoking is not permitted anywhere on any of our premises, either inside or outside the buildings. Our staff will ask you about your smoking status when you come to hospital and will offer you support and advice about stopping smoking including Nicotine Replacement Therapy to help manage your symptoms of withdrawal. If you want to stop smoking you can also contact the Quit Squad Freephone 0800 328 6297.

Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

#### Gujarati:

આ માહિતીને સમજવામાં સહાયતા જોઇતી હોય તો કૃપ∣કરીને પૂછો. આ માહિતી મોટા છપાણ માં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે.

#### Romanian:

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi."

#### Polish:

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostępnić dużym drukiem oraz w innych językach

#### Punjabi:

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵੱਚਿ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਹਿੰਟ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵੱਚਿ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

### Urdu:

دو سر ی زبانوں او ر باڑ ی اگر آپ کو دی معلومات سمجھنے کے باغل مدد یک ضرورت ہے تو ی،چھپا مہ ی بے ابیدست ہو یسکت ہے بارا نے مہر یہان ہو ےیچہ دی معلومات

#### Arabic:

مطبو عةً باً حر ف كبير ة و بلغات إذا كنتَ تـر يـد مسا عدةً فـي فهـم هذه لمعلـو مات يُر جي أن يتطلب أخرى يمـكن تـو فـير هذه المعلـو مات

Department: Maternity Services Division: Women and Children's Production date: January 2022 Review date: January 2025 JR 723 v1