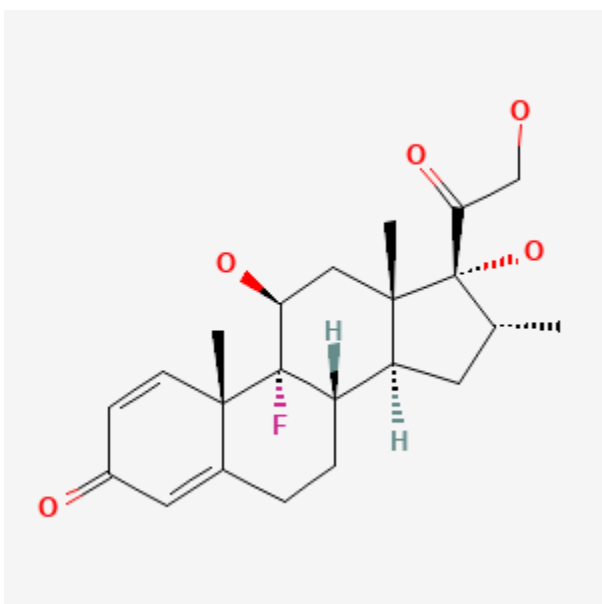




## Dexamethasone

Revised: April 15, 2024.

CASRN: 50-02-2



## Drug Levels and Effects

### Summary of Use during Lactation

Because little information is available on the use of systemic dexamethasone during breastfeeding, an alternate corticosteroid may be preferred, especially while nursing a newborn or preterm infant. Local injections, such as for tendinitis, would not be expected to cause any adverse effects in breastfed infants. Medium to large doses of corticosteroids, including dexamethasone, given systemically or injected into joints or the breast have been reported to cause temporary reduction of lactation. See also [Dexamethasone, Topical](#).

### Drug Levels

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

## Effects in Breastfed Infants

None reported with any corticosteroid.

## Effects on Lactation and Breastmilk

Dexamethasone can cause a decrease in basal serum prolactin and thyrotropin-releasing hormone stimulated serum prolactin increase in nonnursing women.[1,2] Medium to large doses of corticosteroids given systemically or injected into joints or the breast have been reported to cause temporary reduction of lactation.[3-7]

A study of 46 women who delivered an infant before 34 weeks of gestation found that a course of another corticosteroid (betamethasone, 2 intramuscular injections of 11.4 mg of betamethasone 24 hours apart) given between 3 and 9 days before delivery resulted in delayed lactogenesis II and lower average milk volumes during the 10 days after delivery. Milk volume was not affected if the infant was delivered less than 3 days or more than 10 days after the mother received the corticosteroid.[8] An equivalent dosage regimen of dexamethasone might have the same effect.

A study of 87 pregnant women found that betamethasone given as above during pregnancy caused a premature stimulation of lactose secretion during pregnancy. Although the increase was statistically significant, the clinical importance appears to be minimal.[9] An equivalent dosage regimen of dexamethasone might have the same effect.

A woman with postpartum depression who was breastfeeding her 8-week-old infant was treated with endovascular embolization for a spinal-dural arteriovenous fistula. Following the procedure, she was treated with intravenous dexamethasone 4 mg every 8 hours for 5 days, followed by oral dexamethasone 12 mg daily in a tapering regimen. After stopping breastfeeding for 3 days after the procedure, she noted a decreased milk supply on restarting breastfeeding, and a complete cessation of milk production 11 days after the procedure. Several measures to increase milk including domperidone supply failed. Breastmilk production resumed 36 hours after discontinuing dexamethasone and reached normal production after 8 days. At hospital discharge, she was exclusively nursing her infant.[6]

## Alternate Drugs to Consider

(Systemic) Methylprednisolone, Prednisolone, Prednisone

## References

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## Substance Identification

### Substance Name

Dexamethasone

### CAS Registry Number

50-02-2

### Drug Class

Breast Feeding

Lactation

Milk, Human

Corticosteroids, Systemic

Glucocorticoids

Anti-Inflammatory Agents