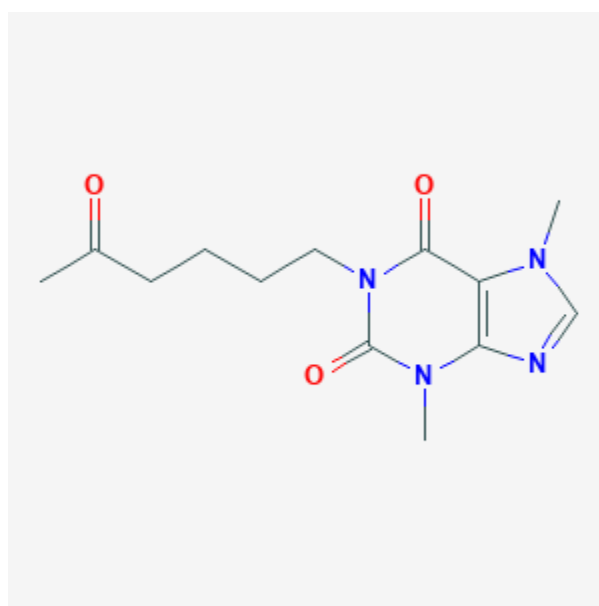




Pentoxifylline

Revised: October 31, 2018.

CASRN: 6493-05-6



Drug Levels and Effects

Summary of Use during Lactation

Limited data indicate that pentoxifylline is poorly excreted into breastmilk. It would not be expected to cause any adverse effects in breastfed infants, especially if the infant is older than 2 months.

Drug Levels

Maternal Levels. Five women who had been breastfeeding for at least 6 weeks received a single 400 mg oral dose of a sustained-release form of pentoxifylline. The average total milk concentration of pentoxifylline plus its 3 active metabolites was 419 mcg/L at 2 hours after the dose and 982 mcg/L at 4 hours.[1] Using the peak milk level data from this study, an exclusively breastfed infant would receive an estimated maximum of 147 mcg/kg daily with this maternal dosage regimen or about 2% of the maternal weight-adjusted dosage. **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 .

Effects in Breastfed Infants

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

Effects on Lactation and Breastmilk

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

References

1. Witter FR, Smith RV. The excretion of pentoxifylline and its metabolites into human breast milk. *Am J Obstet Gynecol.* 1985;151:1094-7. PubMed PMID: 3985069.

Substance Identification

Substance Name

Pentoxifylline

CAS Registry Number

6493-05-6

Drug Class

Breast Feeding

Lactation

Hematologic Agents

Phosphodiesterase Inhibitors

Platelet Aggregation Inhibitors

Xanthines