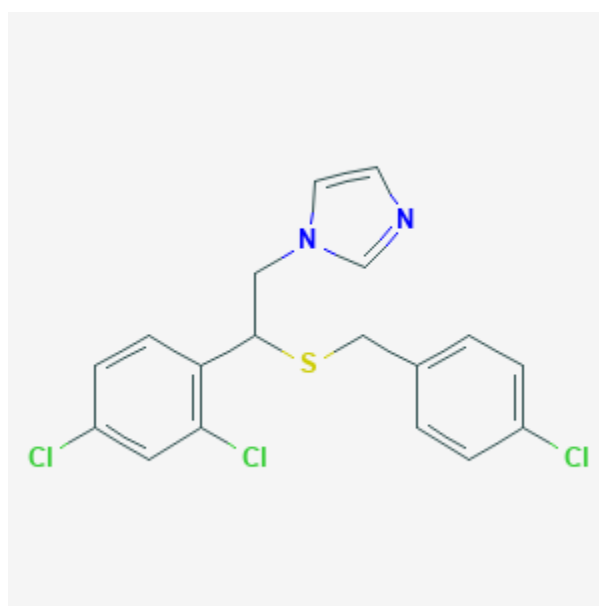




Sulconazole

Revised: October 31, 2018.

CASRN: 61318-90-9



Drug Levels and Effects

Summary of Use during Lactation

Topical sulconazole has not been studied during breastfeeding. About 11% of a dose is absorbed after topical application. It is considered a low risk to the nursing infant;[1] however, other antifungal agents with less absorption may be preferred, especially while nursing a newborn or preterm infant. Avoid application to the nipple area and ensure that the infant's skin does not come into direct contact with the areas of skin that have been treated. Only water-miscible cream or gel products should be applied to the breast because ointments may expose the infant to high levels of mineral paraffins via licking.[2]

Drug Levels

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

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

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.

Alternate Drugs to Consider

Clotrimazole, Miconazole

References

1. Leachman SA, Reed BR. The use of dermatologic drugs in pregnancy and lactation. *Dermatol Clin.* 2006;24:167-97. PubMed PMID: 16677965.
2. Noti A, Grob K, Biedermann M et al. Exposure of babies to C(15)-C(45) mineral paraffins from human milk and breast salves. *Regul Toxicol Pharmacol.* 2003;38:317-25. PubMed PMID: 14623482.

Substance Identification

Substance Name

Sulconazole

CAS Registry Number

61318-90-9

Drug Class

Breast Feeding

Lactation

Anti-Infective Agents

Antifungal Agents

Dermatologic Agents