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# **Thyroid**

Revised: December 3, 2018.

CASRN: 8028-36-2

## **Drug Levels and Effects**

## **Summary of Use during Lactation**

Thyroid is an animal-derived mixture of levothyroxine (T4) and liothyronine (T3), which are normal components of human milk. Limited data on exogenous replacement doses of levothyroxine during breastfeeding indicate no adverse effects in infants. If thyroid is required by the mother, it is not a reason to discontinue breastfeeding. The American Thyroid Association recommends that subclinical and overt hypothyroidism should be treated with levothyroxine in lactating women seeking to breastfeed.[1] Thyroid dosage requirement may be increased in the postpartum period compared to prepregnancy requirements patients with Hashimoto's thyroiditis.[2]

## **Drug Levels**

Although somewhat controversial, it appears that levothyroxine passes into milk poorly and that liothyronine might pass into milk in amounts that affect infant thyroid status.[3][4][5][6][7]

*Maternal Levels*. In a study of 56 mothers with thyroid disorders, 50 had hypothyroidism and were being treated with levothyroxine; 5 mothers had controlled hyperthyroidism with no medications and 1 had hyperthyroidism treated with a medication. Milk levels of thyroid hormones were free T4 4.5 ng/L, total T4 29.6 mcg/L, free T3 2.3 ng/L and total T3 0.35 mcg/L. The average milk to serum level ratios over the period were free T4 0.32, total T4 0.3, free T3 0.78 and total T3 0.26. Levels of free and total T3 and total T4 in milk were positively correlated with their respective plasma levels.[8]

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

### **Effects in Breastfed Infants**

Effects of exogenous thyroid hormone administration to mothers on their infant have not been reported. One case of apparent mitigation of cretinism in hypothyroid infants by breastfeeding has been reported, but the amounts of thyroid hormones in milk are not optimal,[9] and this result has been disputed.[10] The thyroid hormone content of human milk from the mothers of very preterm infants appears not to be sufficient to affect

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the infants' thyroid status.[11] The amounts of thyroid hormones in milk are apparently not sufficient to interfere with diagnosis of hypothyroidism.[12]

In a telephone follow-up study, 5 nursing mothers reported taking levothyroxine (dosage unspecified). The mothers reported no adverse reactions in their infants.[13]

One mother with who had undergone a thyroidectomy was taking levothyroxine 100 mcg daily as well as calcium carbonate and calcitriol. Her breastfed infant was reportedly "thriving" at 3 months of age.[14]

#### **Effects on Lactation and Breastmilk**

Adequate thyroid hormone serum levels are required for normal lactation. Replacing deficient thyroid levels should improve milk production caused by hypothyroidism. Supraphysiologic doses would not be expected to further improve lactation.

#### References

- 1. Alexander EK, Pearce EN, Brent GA et al. 2016 Guidelines of the American Thyroid Association for the Diagnosis and Management of Thyroid Disease during Pregnancy and the Postpartum. Thyroid. 2017;27:315-89. PubMed PMID: 28056690.
- 2. Galofre JC, Haber RS, Mitchell AA, Pessah R, Davies TF. Increased postpartum thyroxine replacement in Hashimoto's thyroiditis. Thyroid. 2010;20:901-8. PubMed PMID: 20615129.
- 3. Sato T, Suzuki Y. Presence of triiodothyronine, no detectable thyroxine and reverse triiodothyronine in human milk. Endocrinol Jpn. 1979;26:507-13. PubMed PMID: 499092.
- 4. Varma SK, Collins M, Row A et al. Thyroxine, tri-iodothyronine, and reverse tri-iodothyronine concentrations in human milk. J Pediatr. 1978;93:803-6. PubMed PMID: 712487.
- 5. Mallol J, Obregon MJ, Morreale de Escobar GM. Analytical artifacts in radioimmunoassay of L-thyroxin in human milk. Clin Chem. 1982;28:1277-82. PubMed PMID: 7074933.
- 6. Oberkotter LV, Tenore A. Separation and radioimmunoassay of T3 and T4 in human breast milk. Horm Res. 1983;17:11-8. PubMed PMID: 6551313.
- 7. Koldovsky O. Hormones in milk. Vitam Horm. 1995;50:77-149. PubMed PMID: 7709605.
- 8. Zhang Q, Lian XL, Chai XF et al. [Relationship between maternal milk and serum thyroid hormones in patients with thyroid related diseases.]. Zhongguo Yi Xue Ke Xue Yuan Xue Bao. 2013;35:427-31. PubMed PMID: 23987491.
- 9. Bode HH, Vanjonack WJ, Crawford JD. Mitigation of cretinism by breast-feeding. Pediatrics. 1978;62:13-6. PubMed PMID: 683777.
- 10. Letarte J, Guyda H, Dussault JH et al. Lack of protective effect of breast-feeding in congenital hypothyroidism: report of 12 cases. Pediatrics. 1980;65:703-5. PubMed PMID: 7367075.
- 11. van Wassenaer AG, Stulp MR, Valianpour F et al. The quantity of thyroid hormone in human milk is too low to influence plasma thyroid hormone levels in the very preterm infant. Clin Endocrinol. 2002;56:621-7. PubMed PMID: 12030913.
- 12. Abbassi V, Steinour A. Successful diagnosis of congenital hypothroidism in four breast- fed neonates. J Pediatr. 1980;97:259-61. PubMed PMID: 7400893.
- 13. Ito S, Blajchman A, Stephenson M et al. Prospective follow-up of adverse reactions in breast-fed infants exposed to maternal medication. Am J Obstet Gynecol. 1993;168:1393-9. PubMed PMID: 8498418.
- 14. Caplan RH, Wickus GG. Reduced calcitriol requirements for treating hypoparathyroidism during lactation. A case report. J Reprod Med. 1993;38:914-8. PubMed PMID: 8277494.

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# **Substance Identification**

### **Substance Name**

Thyroid

## **CAS Registry Number**

8028-36-2

## **Drug Class**

Breast Feeding

Lactation

Thyroid Hormones