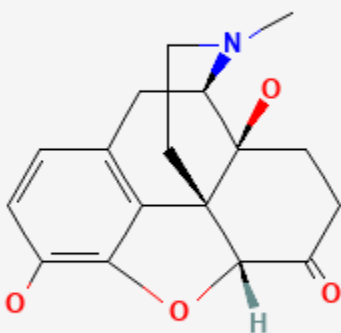




Oxymorphone

Revised: December 15, 2023.

CASRN: 76-41-5



Drug Levels and Effects

Summary of Use during Lactation

No data are available on the use of oxymorphone during breastfeeding. Maternal use of oral opioids during breastfeeding can cause infant drowsiness, which may progress to rare but severe central nervous system depression. Newborn infants seem to be particularly sensitive to the effects of even small dosages of narcotic analgesics.[1] If oxymorphone is required by the mother of a newborn, it is not a reason to discontinue breastfeeding; however, once the mother's milk comes in, it is best to provide pain control with a nonnarcotic analgesic and limit maternal intake of oral oxymorphone for 2 to 3 days at low dosages, with close infant monitoring. If the baby shows signs of increased sleepiness (more than usual), difficulty breastfeeding, breathing difficulties, or limpness, a physician should be contacted immediately. Other agents are preferred over oxymorphone during breastfeeding.

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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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

Narcotics can increase serum prolactin.[2] However, the prolactin level in a mother with established lactation may not affect her ability to breastfeed.

Alternate Drugs to Consider

Acetaminophen, Ibuprofen, Morphine

References

1. Ito S. Opioids in breast milk: Pharmacokinetic principles and clinical implications. *J Clin Pharmacol* 2018;58 (Suppl 10):S151-S163. PubMed PMID: 30248201.
2. Tolis G, Dent R, Guyda H. Opiates, prolactin, and the dopamine receptor. *J Clin Endocrinol Metab* 1978;47:200-3. PubMed PMID: 263291.

Substance Identification

Substance Name

Oxymorphone

CAS Registry Number

76-41-5

Drug Class

Breast Feeding

Lactation

Milk, Human

Analgesics, Opioid; Narcotics