



Technegas

Revised: October 15, 2023.

CASRN: 112263-77-1

Drug Levels and Effects

Summary of Use during Lactation

Information in this record refers to the use of technegas as a diagnostic agent. A US Nuclear Regulatory Commission subcommittee has recommended that nursing be discontinued for 24 hours after administration of all technetium Tc 99m diagnostic products to simplify guidance recommendations, although this time interval may be longer than necessary.[1] The International Commission on Radiological Protection states that breastfeeding need not be interrupted after administration of technegas.[2] To follow the principle of keeping exposure "as low as reasonably achievable", some experts recommend nursing the infant just before administration of the radiopharmaceutical and interrupting breastfeeding for 3 to 6 hours after the dose, then expressing the milk completely once and discarding it. If the mother has expressed and saved milk prior to the examination, she can feed it to the infant during the period of nursing interruption.[3,4]

Mothers concerned about the level of radioactivity in their milk could ask to have it tested at a nuclear medicine facility at their hospital. When the radioactivity is at a safe level, she may resume breastfeeding. A method for measuring milk radioactivity and determining the time when a mother can safely resume breastfeeding has been published.[5]

For nursing mothers who work with Tc 99m substances in their workplace, there is no need to take any precautions other than those appropriate for general radiation protection.[6]

Drug Levels

Tc 99m is a gamma emitter with a principal photon energy of 140 keV and a physical half-life of 6.04 hours.[1] Technegas is an ultrafine particulate material produced from technetium pertechnetate and graphite in an argon environment.

Effects in Breastfed Infants

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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Effects on Lactation and Breastmilk

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

References

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2. Mattsson S, Johansson L, Leide Svegborn S, et al. Radiation dose to patients from radiopharmaceuticals: A compendium of current information related to frequently used substances. ICRP Publication 128. Annex D. Recommendations on breast-feeding interruptions. Ann ICRP 2015;44 (2 Suppl):319-21.
3. Mountford PJ, Coakley AJ. A review of the secretion of radioactivity in human breast milk: Data, quantitative analysis and recommendations. Nucl Med Commun 1989;10:15-27. PubMed PMID: 2645546.
4. International Atomic Energy Agency. Radiation Protection and Safety in Medical Uses of Ionizing Radiation, IAEA Safety Standards Series No. SSG-46, IAEA, Vienna. 2018. Available at: <https://www.iaea.org/publications/11102/radiation-protection-and-safety-in-medical-uses-of-ionizing-radiation>
5. Stabin MG, Breitz HB. Breast milk excretion of radiopharmaceuticals: Mechanisms, findings, and radiation dosimetry. J Nucl Med 2000;41:863-73. PubMed PMID: 10809203.
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Substance Identification

Substance Name

Technegas

CAS Registry Number

112263-77-1

Drug Class

Breast Feeding

Lactation

Milk, Human

Radiopharmaceuticals

Technetium Compounds

Diagnostic Agents