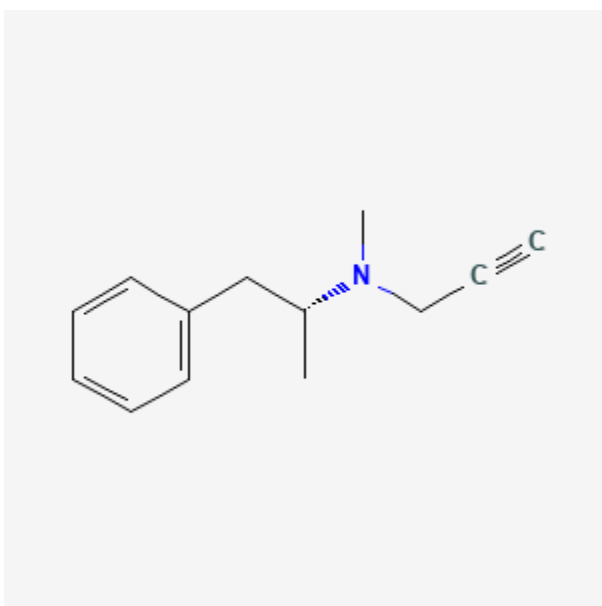




Selegiline

Revised: August 16, 2021.

CASRN: 14611-51-9



Drug Levels and Effects

Summary of Use during Lactation

A minimal amount of clinical use of selegiline during breastfeeding has been reported. Although no adverse reactions have been reported in the breastfed infants, an alternate drug may be preferred, especially while nursing a newborn or preterm infant. The manufacturer of the selegiline transdermal patch recommends that breastfeeding is not recommended during treatment and for 7 days after the final dose.

Drug Levels

Maternal 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.

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Infant Levels. A woman with severe depression used a selegiline patch 6 mg per day during pregnancy and postpartum. She exclusively breastfed her infant. A blood sample taken from the infant on day 12 postpartum found no selegiline or its metabolite in the infant's plasma. No details were provided regarding the assay or its detection limits.[1]

Effects in Breastfed Infants

A woman took selegiline 10 mg, levodopa 400 mg and benserazide 100 mg daily throughout pregnancy and continued them while breastfeeding her infant for 3 days. The child was followed for 10 years and no developmental abnormalities were found.[2]

A woman with severe depression used a selegiline patch 6 mg per day during pregnancy and postpartum. She exclusively breastfed her infant for an unstated period of time. Pediatric follow-up at 5 months of age found that the infant was developing normally.[1]

Effects on Lactation and Breastmilk

Selegiline can decrease serum prolactin in women with migraine,[3] and in those taking neuroleptic drugs.[4,5] The clinical relevance of these findings in nursing mothers is not known. The prolactin level in a mother with established lactation may not affect her ability to breastfeed.

References

1. Bauer RL, Orfei J, Wichman CL. Use of transdermal selegiline in pregnancy and lactation: A case report. *Psychosomatics*. 2017;58:450–2. PubMed PMID: 28501290.
2. Kupsch A, Oertel WH. Selegiline, pregnancy, and Parkinson's disease. *Mov Disord*. 1998;13:175–6. PubMed PMID: 9452347.
3. Calabresi P, Silvestrini M, Stratta F, et al. l-Deprenyl test in migraine: Neuroendocrinological aspects. *Cephalalgia*. 1993;13:406–9. PubMed PMID: 8313454.
4. Perényi A, Bagdy G, Arató M. An early phase II trial with L-deprenyl for the treatment of neuroleptic-induced parkinsonism. *Pharmacopsychiatry*. 1983;16:143–6. PubMed PMID: 6140692.
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Substance Identification

Substance Name

Selegiline

CAS Registry Number

14611-51-9

Drug Class

Breast Feeding

Lactation

Antiparkinson Agents

Monoamine Oxidase Inhibitors

Neuroprotective Agents