U.S. National Library of Medicine
National Center for Biotechnology Information

NLM Citation: Drugs and Lactation Database (LactMed®) [Internet]. Bethesda (MD): National Institute of Child Health and Human Development; 2006-. Cranberry. [Updated 2022 Apr 18].
Bookshelf URL: https://www.ncbi.nlm.nih.gov/books/

Cranberry

Revised: April 18, 2022.

CASRN: 91770-88-6

Drug Levels and Effects

Summary of Use during Lactation

Cranberry (*Vaccinium macrocarpon*) fruit contains phenolics, flavonoids, anthocyanidins, and ellagitannins. Some products are standardized based on quinic acid and others are standardized based on phenolics. Cranberry is most often used for prevention of urinary tract infections. It has no specific lactation-related uses. Cranberries appear to increase the milk content of polyphenols and total antioxidant capacity. Cranberry preparations are well tolerated as a food, although stomach discomfort and diarrhea can occur with large doses. Cranberry should be avoided in patients allergic to cranberries, blueberries and other Vaccinium species. Some cases of elevated INR have been reported in patients taking cranberry and warfarin.

Dietary supplements do not require extensive pre-marketing approval from the U.S. Food and Drug Administration. Manufacturers are responsible to ensure the safety, but do not need to *prove* the safety and effectiveness of dietary supplements before they are marketed. Dietary supplements may contain multiple ingredients, and differences are often found between labeled and actual ingredients or their amounts. A manufacturer may contract with an independent organization to verify the quality of a product or its ingredients, but that does *not* certify the safety or effectiveness of a product. Because of the above issues, clinical testing results on one product may not be applicable to other products. More detailed information about dietary supplements is available elsewhere on the LactMed Web site.

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

Thirty nursing women, 15 with mastitis and 15 without mastitis, were administered cranberries 20 grams daily for 21 days. Another 30 women, 15 with mastitis and 15 without mastitis, did not receive cranberries and served as a control group. Two samples of mature milk were obtained from each mother, one at the beginning of the study and another at the end. Total antioxidant activity was higher at the beginning of the study in milk from the women with mastitis group compared to those without mastitis. With antibiotic treatment, the total antioxidant capacity was similar to control women at the end of the study. In both the control and mastitis groups, the women who receive cranberry supplementation had higher total antioxidant capacity than those who did not. Cranberry supplementation also increased total polyphenol levels in milk both in women with and without mastitis, although the difference from baseline was only statistically significant for those with mastitis. Cranberry supplementation had no effect on milk levels of glutathione or glutathione peroxide.[1]

References

1. Valls-Bellés V, Abad C, Hernández-Aguilar MT, et al. Human milk antioxidative modifications in mastitis: Further beneficial effects of cranberry supplementation. Antioxidants. 2022;11:51. PubMed PMID: 35052555.

Substance Identification

Substance Name

Cranberry

Scientific Name

Vaccinium macrocarpon

CAS Registry Number

91770-88-6

Drug Class

Breast Feeding

Lactation

Milk, Human

Complementary Therapies

Food

Phytotherapy

Plants, Medicinal