

Monkeypox prevention and treatment while nursing

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Although none of the preventative or therapeutic agents used in monkeypox have been fully studied in nursing mothers, Philip Anderson, PharmD, from the University of California, San Diego, presents a broad



practical recommendation for the treatment and prevention of monkeypox in nursing mothers in an article published in the peer-reviewed journal *Breastfeeding Medicine*.

Dr. Anderson bases his recommendations on the recommendations of the Centers for Disease Control and Prevention (CDC), product labeling, and on up-to-date principles of pharmacology and infectious disease regarding possible risks to the nursing infant and the feeding of pumped human breast milk to the infant.

Individuals with monkeypox are recommended not to breastfeed their infant because of the risk of passing the virus to the child through direct contact. It may be possible to provide pumped milk to the infant if no lesions are near the breast and sanitary precautions are taken.

Prevention for monkeypox with the monkeypox vaccine or with vaccinia immune globulin appears to be a low risk for harm to nursing infants. In mothers who are vaccinated with the smallpox (vaccinia) vaccine, breastfeeding and feeding of pumped milk is contraindicated until the vaccination scab has separated from the vaccination site. For treatment of monkeypox, the antiviral of choice is tecovirimat, which is also likely to be a low risk for nursing infants.

"Dr. Anderson provides a much-needed set of up-to-date practical guidelines for managing monkeypox disease in mother-infant dyads," says Arthur I. Eidelman, MD, Editor-in-Chief of Breastfeeding Medicine, "in particular for mothers who wish to provide their breastmilk to their offspring."

More information: Philip O. Anderson, Monkeypox Prevention and Treatment While Nursing, *Breastfeeding Medicine* (2022). DOI: 10.1089/bfm.2022.0173



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