36th ENTIS Conference 11th – 14th Sept 2025
ARISTOTLE UNIVERSITY'S RESEARCH DISSEMINATION CENTER (KEDEA)
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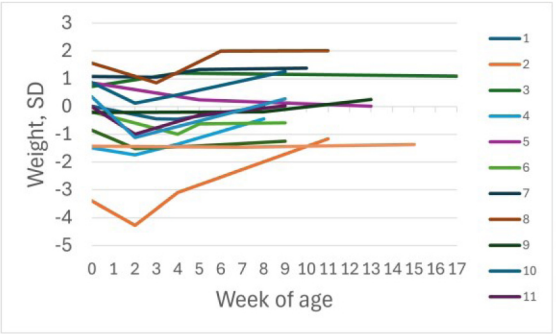
E-Poster 17

In this cohort of 17 infants, maternal treatment with **lisdexamfetamine during breastfeeding did not affect the infant growth adversely after two weeks of age**.

Introduction
Lisdexamfetamine is a treatment of ADHD, increasingly used during pregnancy in Sweden. Lisdexamfetamine is a prodrug of dextroamphetamine. Dextroamphetamine accumulates in breastmilk with a milk/plasma ratio of 3:1, why some instances advice against breastfeeding with lisdexamfetamine.

Methods
A retrospective study of mother-infant dyads when the mother was treated with lisdexamfetamine and the infant breastfed, in a clinical follow-up programme in Stockholm, Sweden 2021-2024. Information was collected from medical records.



Line graph of weight (SD) during follow up in the 17 infants

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Following lisdexamfetamine exposure through breastfeeding, **almost half of the infants had not regained their birth weight at two weeks of age.**

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Results

We included 17 infants born between 2021 and 2024. The infants participated in a clinical follow-up program at birth, 2 weeks, and at 4 and 8 weeks. Data on infants' weight, clinical examination and interviews with parents was collected. In total 43 follow-up visits were included. Median gestational age was 38+6 weeks (range 35+5-41+4) and median birth weight of 3530 grams (range 2484-4180). The median time to regain their birth weight was 14 days (range 8-28), and 8 (47%) of the infants had not regained their birth weight at 14 days of age. Of these 8 infants, 7 were exposed to lisdexamfetamine during pregnancy. Of the 9 infants that had passed their birthweight by 2 weeks, 5 were exposed to lisdexamfetamine during pregnancy. There were no significance between exposed and unexposed infants when analyzing passing birth weight at 2 weeks.

After 2 weeks, all infants had a normal weight gain during the follow-up. Symptoms were reported in 5 infants; none had a serious adverse effect. No mothers were advised to reduce breastfeeding due to clinical symptoms in the infants.

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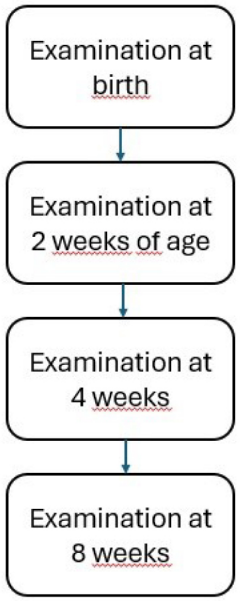
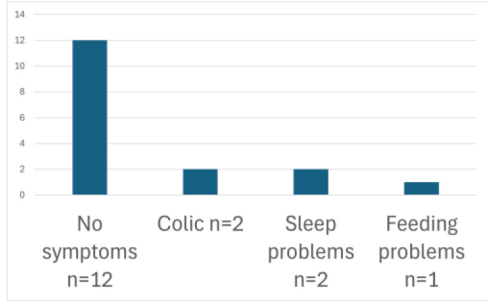


Figure showing follow-up program for lisdexamfetamine exposure through breastfeeding at Karolinska University Hospital.

No serious adverse effects were detected in this cohort of 17 infants exposed to **lisdexamfetamine through breastfeeding.**



Bar chart of symtoms in infants exposed to lisdexamfetamine during breastfeeding during follow-up.

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Please click on the QR code for the full abstract on

lisdexamfetamine exposure during lactation

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Written report on the full cohort (30 patientens) is planned to be published in 2026.

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