It is not necessary to stop breast feeding for 24 hours after receiving iodinated or gadolinium contrast agents.

The potential risks of iodinated contrast to a baby are unknown; however there are no known harmful effects.

Iodinated contrast is currently given to neonates, toddlers and children intravenously for diagnostic CT scans. Studies have shown that the amount of iodinated contrast excreted in breast milk varies between 0.3-0.5% of the dose given to the mother\(^1\). Only a small amount of ingested iodinated contrast is absorbed into the bloodstream with one study demonstrating 0.8% of the ingested dose being excreted into the baby’s urine over 72 hours\(^2\). The taste of the milk could be altered by the presence of the contrast\(^3\).

The potential risks of gadolinium contrast to a baby are unknown; however there are no known harmful effects.

Gadolinium contrast is currently given to neonates, toddlers and children intravenously for diagnostic contrast enhanced MR scans. Studies have shown that the amount of gadolinium contrast excreted in breast milk is very low with a cumulative gadolinium excretion in milk of 0.01-0.04% of the injected dose in the mother\(^4,5\). Only small demonstrating no change in the signal intensity of the baby’s urine indicating no significant gadolinium absorption\(^6\). The taste of the milk could be altered by the presence of the contrast\(^3\).