Prescriber Update

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New Zealand Government

Green breast milk – related to propofol?

Propofol is an anaesthetic agent used for induction and maintenance of general anaesthesia in adults and children.¹ It has been reported that propofol may discolour urine.¹ Here we note a report of propofol and breast milk discolouration.

In August 2020, the Centre for Adverse Reactions Monitoring (CARM) received a report of a 29-year-old patient who had received propofol as an anaesthetic agent and whose expressed breast milk appeared green post-surgery (CARM ID 138010).

Internationally, there are other case reports of green breast milk following administration of propofol.²⁻⁴

The reason for the discolouration is unclear. Healthcare professionals are reminded to check the New Zealand data sheet for information on breastfeeding following administration of propofol. (Search for a data sheet.)

References

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Gathering knowledge from adverse reaction reports: March 2021

Adverse reaction reporting is an important component of medicine safety monitoring. Case reports can highlight significant safety issues concerning therapeutic products and their use.

The table below presents a selection of recent informative cases from the Centre for Adverse Reactions Monitoring (CARM) database.

Case details ^{a,b}	Reaction description and data sheet information ^{b,c}
CARM ID: 138173 Age: 81 Gender: Female Medicine(s): Sodium valproate Reaction(s): Encephalopathy, hyperammonaemia	The patient presented to hospital with confusion, difficulty conversing, lethargy, nausea and loss of balance. Laboratory tests showed elevated ammonia levels. The patient was diagnosed with hyperammonaemic encephalopathy, secondary to sodium valproate.
	The Epilim data sheet states that hyperammonaemia can occur in patients during treatment with sodium valproate/ valproic acid. In patients who develop unexplained lethargy and vomiting or changes in mental status, further investigations and hyperammonaemic encephalopathy should be considered. In these patients, EEG and ammonia level should be checked and, if ammonia is increased, valproate therapy should be discontinued.

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