

# Silicone Breast Implants and Breastfeeding

*The information provided is taken from various reference sources. It is provided as a guideline. No responsibility can be taken by the author or the Breastfeeding Network for the way in which the information is used. Clinical decisions remain the responsibility of medical and breastfeeding practitioners. The data presented here is intended to provide some immediate information but cannot replace input from professionals.*

Concerns have been raised by some mothers who have had Poly Implant Prosthese (PIP) implants in their breasts and are now breastfeeding or pregnant and planning to breastfeed.

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Although there have been no studies that we are aware of regarding the passage of this particular type of gel, in general the recommendation on silicone breast implants is that:

*"Silicone transfer to breastmilk has been studied in one group of 15 lactating mothers with bilateral silicone breast implants (Semple 1998). Silicon levels were measured in breastmilk, whole blood, cow's milk, and 26 brands of infant formula. Comparing implanted women to controls, mean silicon levels were not significantly different in breastmilk or in blood. Mean silicon level measured in store-bought cow's milk was 708.94 ng/mL and that for 26 brands of commercially available infant formula was 4402.5 ng/mL (ng/mL = parts per billion). The authors concluded that lactating women with silicone implants are similar to control women with respect to levels of silicon in their breastmilk and blood. From these studies, silicon levels are 10 times higher in cow's milk and even higher in infant formulas. It is not known for certain if ingestion of leaking silicone by a nursing infant is dangerous.*

*Although one article has been published showing oesophageal strictures, it has subsequently been recalled by the author. reports suggesting autoimmune diseases such as scleroderma with oesophageal dysfunction in breastfed infants (Spiera 1993, 1995) have failed to be confirmed.*

*Silicone by nature is extremely inert and is unlikely to be absorbed in the GI tract by a nursing infant although good studies are lacking. Silicone is a ubiquitous substance, found in all foods, liquids, etc." (Hale TW)*

For further information mothers should be advised to consult their GP and surgeon for individual discussion

## References

- Hale T Medications and Mothers Milk
- Semple JL, Lugowski SJ, Baines CJ, Smith DC, McHugh A. Breast milk contamination and silicone implants: preliminary results using silicon as a proxy measurement for silicone. *Plast Reconstr Surg* 1998; 102(2):528-533.

**To talk to a mum who knows about breastfeeding call the National Breastfeeding Helpline 0300 100 0212**

*Calls to 0300 numbers cost no more than calls to UK numbers starting 01 and 02 and will be part of any inclusive minutes that apply to your provider and call package.*

- Spiera H, Kerr LD. Scleroderma following silicone implantation: a cumulative experience of 11 cases. J Rheumatol. Jun 1993; 20(6):958-961.
- Spiera RF, Gibofsky A, Spiera H. Scleroderma in women with silicone breast implants: comment on the article by Sanchez-Guerrero et al. Arthritis Rheum. May 1995; 38(5):719, 721.
- [www.nhs.uk/news/2012/01January/Pages/government-review-advises-on-french-pip-breast-implants.aspx](http://www.nhs.uk/news/2012/01January/Pages/government-review-advises-on-french-pip-breast-implants.aspx)

