

BREAST INFECTION ANTIBIOTICS HANDOUT

Lactation-related mastitis, non-severe, low risk for methicillin-resistant *S. aureus* (MRSA):

- [Dicloxacillin](#) 500 mg PO QID for 10-14 days or
- [Cephalexin](#) 500 mg PO QID for 10-14 days or
- [Amoxicillin-clavulanate](#) 875 mg PO BID for 10-14 days
- Flucloxacillin (not available in the United States)

If penicillin intolerance (not allergy):

- [Cephalexin](#) 500 mg PO QID for 10-14 days

If beta-lactam (penicillin) allergy:

- Erythromycin 500 mg PO BID for 10-14 days or
- Clindamycin 300 to 450 mg PO TID for 10-14 days
- [Clarithromycin](#) 500 mg PO BID for 10-14 days also may be acceptable

If suspected community-acquired methicillin-resistant *Staphylococcus aureus* (CA-MRSA) infection:

- [Clindamycin](#) 300 to 450 mg PO TID for 10-14 days or
- [Trimethoprim-sulfamethoxazole](#) 1 DS tablet PO BID for 10-14 days ^[4] CAUTION if nursing a preterm infant; contraindicated if nursing a child with known or suspected glucose-6-phosphate dehydrogenase [G6PD] deficiency, jaundice, or an infant younger than 2 months.