

The Author's Reply

As you rightly point out "postpartum depression is a serious illness", and thus, the necessity exists "to carefully manage these vulnerable mothers".

Unfortunately, however, all instruments finalised to investigate the safety of antidepressant medications during breastfeeding show remarkable limitations. The limitations shown by the only existing rating system for drug safety in lactation to date^[1] were already highlighted in my article.^[2] Moreover, a further literature review has recently demonstrated that another parameter widely used to estimate the safety of antidepressants for the mother-infant pair (the milk-to-plasma ratio) seems to be associated with no, or minimal, clinical relevance.^[3]

For this reason, my article on the Breastfed Infant-Antidepressant Safety Index (BI-ASI) has systematically analysed all reported information on possible causal relationship between an adverse event and a drug in the breastfed infants. The clinical relevance of this information in terms of safety has been stressed by the WHO, which defines such a typology of reports as *signals*.^[4] Thus, grouping together such reports in an index may be of great usefulness for the clinicians to immediately identify the antidepressant medication characterised by the highest reported number of unwanted reactions. Moreover, the 'apparent' concordance between the BI-ASI and the reported drug exposure levels of the

infant is an unquestionable, albeit preliminary, result.

It should also be underlined that the appliance of the BI-ASI in clinical practice (despite its limitations, which are clearly pointed out in my article) is simple and at zero costs.

Hence, although the BI-ASI has been derived from a literature review, at present it seems to represent one of the few available instruments to effectively approach postpartum depression and at same time to reduce the risks for the breastfed infant as much as possible.

Salvatore Gentile

Department of Mental Health ASL Salerno 1,
Mental Health Center n. 4, Cava de' Tirreni,
Salerno, Italy

Acknowledgements

The author has no conflicts of interest that are directly relevant to the contents of this letter.

References

1. Hale TW. Medications and mothers' milk (10th ed.). Amarillo (TX): Pharmasoft, 2002
2. Gentile S. Use of contemporary antidepressants during breastfeeding: a proposal for a specific safety index. *Drug Saf* 2007; 30 (2): 107-21
3. Gentile S, Rossi A, Bellantuono C. SSRIs during breastfeeding: spotlight on milk-to-plasma ratio. *Arch Womens Ment Health* 2007; 10 (2): 39-51
4. Edwards IR, Biriell C. Harmonization in pharmacovigilance. *Drug Saf* 1994; 10 (2): 93-102