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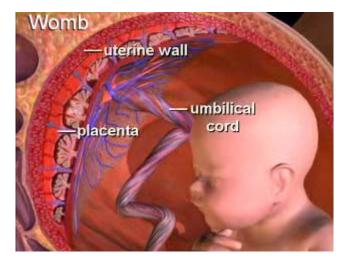


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Drugs & Pregnancy

Summary

Women who are **pregnant** or thinking about becoming pregnant should consult with a physician before using any medications, supplements or recreational drugs. Although many prescription and over-the-counter drugs can be used safely during pregnancy, others can have harmful effects on the developing **fetus** or the natural course of the pregnancy.



Herbal remedies, supplements and recreational drugs – including legal (such as **alcohol** and **nicotine**) and illegal (such as marijuana and cocaine) substances – can also have negative impacts when used during pregnancy.

No medicines have been proven absolutely safe for use during pregnancy, according to the U.S. Department of Health and Human Services. However, many drugs are thought to be safe, and some may be beneficial during pregnancy. In addition, some medications and supplements should not be taken while **breastfeeding** as they can be transferred through breast milk to the baby. Women should consult with their physician when deciding which drugs are and are not safe to take during pregnancy and breastfeeding.

About drugs and pregnancy

The use of legal and illegal drugs can have profound effects on the health of a developing **fetus** or the natural course of a **pregnancy**. In some cases, drug use may cause **birth defects** or other damage. Maternal drug use is thought to be responsible for at least 10 percent of birth defects, according to the American Academy of Family Physicians (AAFP). For

this reason, women who are pregnant or thinking about becoming pregnant should consult with a physician before taking any medications.

The most cautious approach is not to use any medications during pregnancy. However, this is not a practical solution for most women. More than 80 percent of pregnant women take overthe-counter or prescription drugs during pregnancy, according to the AAFP. Pregnant women may need to take prescription drugs to treat conditions such as asthma, epilepsy, high cholesterol or depression. In addition, women may take over-the-counter medications to treat less severe conditions such as allergy flare-ups or minor pain.

No medicines have been proven absolutely safe for use during pregnancy, according to the U.S. Department of Health and Human Services. However, many over-the-counter and prescription drugs are thought to be safe for pregnant women. However, others are not, including some medications that a woman may have taken safely before she became pregnant.

Finally, many illegal drugs (such as marijuana and cocaine) and legal drugs, herbs and supplements (such as **nicotine**, **alcohol**, **caffeine**, vitamins, and herbal teas and herbal remedies) can have adverse effects when taken during pregnancy.

The risk of drug damage to a fetus is highest during the first several weeks of pregnancy, when major organs are developing. However, experts are unsure whether or not medications

during pregnancy cause negative effects that manifest in the child later in life. In addition, the use of some drugs can negatively impact the pregnancy, such as increasing the risk of premature labor or certain types of complications, such as separation of the placenta or other bleeding problems.

For these reasons, female patients should tell all healthcare providers if they are pregnant or thinking about becoming pregnant. This can help alert physicians to avoid prescribing certain drugs, or to suggest alternatives that may be safer to use during pregnancy. Women with certain medical conditions



might need to change their medications prior to attempting to becoming pregnant. In addition, they may need to modify or add dietary supplements. Women can also carefully check the labels of over-the-counter drugs before they purchase them. Federal law requires that all drugs known to increase risks for pregnant women must state this clearly on the packaging.

Women should remember that in many cases, the benefit of taking certain drugs far outweighs any potential risks for the mother and the fetus. In other cases, some drugs or supplements – such as **folic acid** (which helps prevent fetal brain and spinal cord disorders), calcium and iron – may be beneficial just before and during pregnancy.

Types and differences of drugs

The U.S. **Food and Drug Administration** (FDA) has established a system for ranking drugs according to their probable safety when used during **pregnancy**. These drugs are listed in five categories:

• Category A. Drugs tested for safety during pregnancy and considered to be safe. They include:

• Folic acid

- o Vitamin B6
- Thyroid medication (taken in moderation)
- Category B. Drugs used often during pregnancy that do not appear to cause major birth

defects or other problems. These include:

- Some antibiotics
- Aspartame (an artificial sweetener)
- Famotidine (used to treat stomach conditions)
- Prednisone (cortisone)
- Insulin (a diabetes medication)
- Category C. Drugs that are more likely to cause problems for the mother or the **fetus**, although safety studies have not been completed for many of these medications. These are drugs that should be used only when health benefits outweigh risks, and include:
 - Some antidepressants
 - Several drugs used to treat vaginal yeast infections
 - Pseudoephedrine (a cold medication)
 - Ciprofloxacin (an antibiotic)
- Category D. Drugs that have clear health risks for the fetus. These include:

• Alcohol

- Nicotine
- Lithium (used to treat bipolar disorder)
- Phenytoin (an anticonvulsant)
- Most chemotherapy drugs
- Category X. Drugs that have been shown to cause birth defects and that should never be taken during pregnancy. These include:
 - **Thalidomide** (used to treat leprosy and being studied to treat other diseases)
 - o Certain drugs used to treat skin conditions such as cystic acne and psoriasis
 - Diethylstilbestrol (DES, a synthetic estrogen previously used to prevent miscarriage)

Other drugs that have been classified using FDA guidelines to determine their safety during pregnancy include:

Drug	Type of drug	Classification	
Acetaminophen	Non-narcotic analgesic/ antipyrtetic	В	
Aspirin	Salicylate analgesic/ antipyrtetic	D	
Ibuprofen	NSAID analgesic	B (D in third trimester)	
Ketoprofen	NSAID analgesic	B (D in third trimester)	
Naproxen	NSAID analgesic	B (D in third trimester)	

Over-the-counter pain medications

Over-the-counter decongestants, expectorants and antihistamines

Drug	Type of drug	Classification
Chlorpheniramine	Antihistamine	В
Pseudoephedrine hydrochloride	Sympathomimetic decongestant	С
Guaifenesin	Expectorant	С
Dextromethorphan	Non-narcotic antitussive	С
Diphenhydramine	Antihistamine/ antiemetic	В
Clemastine fumarate	Antihistamine	С

Over-the-counter antidiarrheal medications

Drug	Type of drug	Classification
Bismuth subsalicylate	Antidiarrheal	C (D in third trimester)
Loperamide	Antidiarrheal	В
Atropine/ diphenoxylate	Antidiarrheal	С

Over-the-counter antacid preparations

Drug	Type of drug	Classification
Aluminum hydroxide/magnesium hydroxide	Antacid	С
Calcium carbonate	Antacid	С
Simethicone	Antiflatulent	С
Cimetidine	Antihistamine	В
Ranitidine	Antihistamine	В
Nizatidine	Antihistamine	В
Famotidine	Antihistamine	В

Over-the-counter vaginal antifungal medications

Drug	Type of drug	Classification
Butoconazole	Imidazole antifungal	С
Clotrimazole	Imidazole antifungal	B (C in oral form)
Miconazole	Imidazole antifungal	B (C for IV form)
Tioconazole	Imidazole antifungal	С

Aspirin – one of the most commonly used drugs in the world – and other drugs containing salicylate should not be used during pregnancy, particularly during the third **trimester**. The World Health Organization (WHO) has also stated that nursing mothers should not use aspirin, as it may be transferred through breast milk to the baby. Aspirin is associated with Reye's syndrome, a rare condition that affects the brain and liver in children who receive aspirin during a viral illness. Other conditions associated with the use of salicylates during pregnancy include:

- Perinatal mortality
- Neonatal hemorrhage
- Decreased birth weight
- Prolonged gestation and labor
- Possible birth defects

Also, acetylsalicylate – a common ingredient in many over-the-counter painkillers – may cause pregnancy to last longer, and may increase the risk of severe bleeding prior to and after delivery.

In addition to medicines, other types of drugs and supplements may pose dangers to women during pregnancy. These include:

- Herbal remedies and supplements. The safety of herbal remedies and supplements during pregnancy is largely unknown, as they are not required by the FDA to undergo rigorous testing. However, these products may contain agents that can harm the fetus or cause difficulties during the pregnancy. Thus, herbal products should not be taken unless a physician approves their use.
- Recreational drugs. Legal and illegal recreational drugs may pose danger to a pregnant woman. These include:
 - Nicotine and other chemicals in tobacco products. Smoking is associated with higher incidences of miscarriage, stillbirth, bleeding, premature birth and low birth weight. It has also been linked to sudden infant death syndrome (SIDS), a disorder in which infants suddenly die for no apparent reason. Smoking while pregnant can also have long-term ramifications for the physical growth and intellectual development of children.
 - Alcohol. A pregnant woman who drinks alcohol may trigger fetal alcohol syndrome (FAS), which causes problems in the fetus such as mental slowness, poor growth rates, facial defects and head size that is smaller than normal. Women should not drink before or during pregnancy, or while nursing.
 - Illegal drugs. Marijuana, cocaine and other illegal drugs raise the risk of miscarriage, premature birth and birth defects. Use of some drugs can cause the child to be born with a physical addiction to the substance that may result in withdrawal symptoms after birth.

Pregnant women generally should limit themselves to one or two cups daily of drinks that contain **caffeine**. Caffeine easily passes through the placenta to the fetus, and levels of caffeine stay elevated longer in the fetus than in the mother. It can also pass through breast milk and cause agitation in **nursing** babies.

General drug recommendations

For general information on taking medications, see **General Drug Recommendations**.

Questions for your doctor

Preparing questions in advance can help patients to have more meaningful discussions with their physicians regarding their conditions. Patients may wish to ask their doctor the following questions related to drugs and pregnancy:

- 1. I take a prescription drug regularly should I stop taking it during my pregnancy? Can I take an alternative drug safely?
- 2. Should I avoid any or all over-the-counter drugs during pregnancy?
- 3. If I can't take drugs for my condition, are there other ways for me to treat my symptoms?
- 4. I'm planning to become pregnant which drugs should I avoid, and when should I stop using them?
- 5. Can I take my usual vitamin during pregnancy, or do I need special vitamins?
- 6. Can I drink alcohol, use recreational drugs or smoke during my pregnancy?
- 7. Once my baby has been delivered, can I return to taking medicines and using recreational drugs?

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