Albuterol

This sheet talks about exposure to albuterol during pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

**What is albuterol?**

Albuterol (also called salbutamol) is a medication used for the treatment of asthma. It is in a class of medications called beta2-agonists. Beta2-agonists are called bronchodilators, meaning that they help to open the airways in the lungs. Albuterol is used in fast-acting inhalers for treatment of asthma.

**I take albuterol. Can it make it harder for me to get pregnant?**

Studies on women have not been done to see if albuterol could make it harder for a woman to get pregnant. Animal studies have shown no effect on fertility.

**I just found out that I am pregnant. Should I stop using my albuterol inhaler?**

Talk with your healthcare providers before making any changes to this medication. Albuterol is considered a good choice of medication for the treatment of asthma during pregnancy. It is important to consider the benefits of controlling asthma symptoms during pregnancy. Untreated asthma increases the chance for complications for both the mother and the baby. For more information, please see the MotherToBaby fact sheet on Asthma at https://mothertobaby.org/fact-sheets/asthma-and-pregnancy/pdf/.

**Does taking albuterol increase the chance for miscarriage?**

Miscarriage can occur in any pregnancy. Studies have not been done to see if albuterol could make it harder for a woman to get pregnant.

**Does taking albuterol in the first trimester increase the chance of birth defects?**

In every pregnancy, a woman starts out with a 3-5% chance of having a baby with a birth defect. This is called her background risk.

Although data is limited, studies do not suggest an increased chance for birth defects with the use of inhaled albuterol during pregnancy. One study evaluated the safety of five different inhaled beta2-agonist bronchodilators in the first trimester of pregnancy. This study did not find an increase in the number of birth defects with use of any of these medications. Only 20 of the 259 women in this study took albuterol. Other studies do not support the suggestion that albuterol causes an increased chance for a pattern of birth defects.

Due to concerns with untreated maternal asthma, plus the lower fetal doses expected with an inhaled medicine, albuterol is considered a good choice of medication for asthma when a fast-acting inhaler is needed for immediate symptoms. Use of albuterol more than two days per week is a sign that asthma symptoms may not be well controlled. If so, additional treatment should be discussed with your health care provider.

**Could taking albuterol in the second or third trimester cause other pregnancy complications?**

Albuterol was at one time used in the second and third trimester of pregnancy to prevent preterm labor (before 37 weeks of pregnancy). For treatment of preterm labor, albuterol was given in high oral doses (by mouth). Treatment with high oral doses has been associated with an increase in maternal and fetal heart rate and a drop in maternal blood pressure. These effects are temporary (meaning they do not last). Long term effects from increased fetal heart rate have not been reported. Treatment with inhaled albuterol at prescribed doses has not been shown to cause these effects.

**Does taking albuterol in pregnancy cause long-term problems in behavior or learning for the baby?**

Studies have not been done to see if albuterol could cause long-term problems in behavior or learning.

**Can I breastfeed while taking albuterol?**
There have not been any studies of women taking albuterol while breastfeeding. However, using an albuterol inhaler is not thought to cause high enough levels in the mother’s bloodstream to pass into breast milk in large amounts. Inhaled bronchodilators are generally considered acceptable for use during breastfeeding. Be sure to talk to your health care provider about all your breastfeeding questions.

**If a man takes albuterol, could it affect his fertility (ability to get partner pregnant) or increase the chance of birth defects?**

There is no data to suggest that a father’s use of albuterol at the time of conception increases the chance for birth defects. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet about Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.

MotherToBaby is currently conducting a study looking at asthma and the medications used to treat asthma in pregnancy. If you are interested in taking part in this study, please call 1-877-311-8972 or sign up at https://mothertobaby.org/join-study/.

**Selected References:**