

Alirocumab (Praluent®)

This sheet is about exposure to alirocumab in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare providers.

What is alirocumab?

Alirocumab is a medication that has been used to lower levels of low-density lipoprotein (LDL) cholesterol. It has been used to treat a specific type of inherited high cholesterol called familial hypercholesterolemia (FH) and for people with atherosclerotic cardiovascular disease (ASCVD). A brand name for alirocumab is Praluent®.

Sometimes when people find out they are pregnant, they think about changing how they take their medication, or stopping their medication altogether. However, it is important to talk with your healthcare providers before making any changes to how you take this medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

For more information about high cholesterol in pregnancy, please see our fact sheet at https://mothertobaby.org/fact-sheets/high-cholesterol/.

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

It is not known if taking alirocumab can make it harder to get pregnant.

Does taking alirocumab increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if alirocumab increases the chance of miscarriage.

Does taking alirocumab increase the chance of birth defects?

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. Studies have not been done in humans to see if alirocumab increases the chance for birth defects. Data from animal studies does not suggest that alirocumab would increase the chance for birth defects.

Does taking alirocumab in pregnancy increase the chance of other pregnancy-related problems?

Studies have not been done to see if alirocumab increases the chance for pregnancy-related problems such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth).

Does taking alirocumab in pregnancy affect future behavior or learning for the child?

Studies have not been done to see if alirocumab can cause behavior or learning issues for the child.

Breastfeed while taking alirocumab:

Alirocumab has not been studied for use in breastfeeding. Because it is a large protein, it is not likely that the medication would be able to pass into breast milk in large amounts. Also, alirocumab is not thought to be well absorbed by the gut, so any medication that gets into breastmilk would be unlikely to enter the baby's system. Be sure to talk to your healthcare provider about all your breastfeeding questions.

If a male takes alirocumab, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?

Studies have not been done to see if alirocumab could affect male fertility or increase the chance of birth defects above the background risk. In general, exposures that fathers or sperm donors have are unlikely to increase the risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/.

Please click here for references.



Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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