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. This sheet talks about whether exposure to aripiprazole might increase the risk for birth defects over that background risk. This information should not take the place of medical care and advice from your healthcare provider.

What is aripiprazole?
Aripiprazole is an antipsychotic medication. It is sold under the brand name Abilify®, Abilify Discmelt®, Aristada® and Abilify Maintena®. Aripiprazole is used to treat schizophrenia, bipolar disorder, autism spectrum disorders and depression.

I would like to stop taking aripiprazole before becoming pregnant. How long does the medication stay in my body?
Any decision to stop a medication should be discussed with your healthcare provider. By stopping this treatment, you may increase the chance for your symptoms to return. If you decide to stop taking aripiprazole, it is recommended that this be done with the supervision of a healthcare provider. While everyone breaks down medication at a different rate, most of this medication will likely be out of your body in approximately 2 to 3 weeks after the last oral dose.

I just found out I am pregnant. Should I stop taking aripiprazole?
No, you should not stop taking this medication without first talking to your health care provider. Untreated and undertreated psychiatric disorders may increase the chance for pregnancy complications. Please see our fact sheet on Stress and Pregnancy: https://mothertobaby.org/fact-sheets/stress-pregnancy/. The benefits of being treated with aripiprazole needs to be weighed against concerns about the pregnancy and the risks of untreated illness.

I take aripiprazole. Can it make it harder for me to get pregnant?
This is not known. There are currently no studies looking at whether taking aripiprazole makes it harder to become pregnant.

Does taking aripiprazole during my pregnancy increase the chance of miscarriage?
It’s unclear whether aripiprazole increases the chance of miscarriage. One study of women taking aripiprazole during pregnancy showed an increased chance of miscarriage, but others have not. Untreated psychiatric illness may also increase the chance of miscarriage.

Does taking aripiprazole increase the chance of having a baby with a birth defect?
Based on the available studies, aripiprazole use during pregnancy is not likely to be a high risk for birth defects. Two small studies did not show an increased chance of birth defects when women took aripiprazole during pregnancy. Similarly, in a large U.S. study, an increased chance of birth defects was not found with the use of aripiprazole.

Does taking aripiprazole cause other pregnancy complications?
One study found a slightly increased chance of preterm birth (baby being born too early) and babies who were born smaller than expected (fetal growth restriction). Since the women with these outcomes only took aripiprazole for a short time, it is unclear whether aripiprazole increases the chance of preterm birth and fetal growth restriction. The underlying illness may also contribute to the increased chance of these pregnancy complications.
I need to take aripiprazole throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?

There have been reports of babies whose mothers took aripiprazole during late pregnancy that had withdrawal symptoms after birth. Symptoms of withdrawal may include jitteriness, problems breathing, shaking, sleepiness, problems eating, and rigid muscles or low muscle tone. Because of the lack of studies, we are not able to say if the chance of this happening is high or low. In some babies the symptoms will go away quickly. Other babies may need treatment in the hospital to recover.

Will taking aripiprazole during pregnancy affect my baby’s behavior or cause learning problems?

This is not known. There are currently no studies looking at whether aripiprazole increases the chance of learning or behavior problems.

Can I breastfeed my baby if I am taking aripiprazole?

Maybe. It may depend on the age of the baby and the dose of the medication. A limited number of studies have shown that only small amounts of aripiprazole enter breast milk when women take up to 15 mg daily. If the baby is older, and the dose is up to 15 mg, it may be fine to go ahead and breastfeed. There have been cases of babies becoming sleepier than normal; however, most breastfed babies whose mothers took aripiprazole have no symptoms. When taking any psychotropic medication while breastfeeding it is important to watch the baby for symptoms such as sleepiness or trouble taking milk or food. Taking other medications along with aripiprazole might increase the risk for sleepiness. If you notice any unusual changes in your nursing child, contact the child’s healthcare provider right away.

Also, aripiprazole may affect milk supply, especially when lactation has not been well established yet or if higher dosage is prescribed. Your healthcare provider can help you make the decision to breastfeed depending on your dose, what other medications you may be taking, your medical condition and the health of your baby.

What if the baby’s father takes aripiprazole?

There are currently no studies looking at risks to a pregnancy when the father takes aripiprazole. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures and Pregnancy at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.