



MotherToBaby

Medications & More During Pregnancy & Breastfeeding
Ask The Experts

Fact Sheet

by the **Organization of Teratology Information Specialists (OTIS)**

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Atomoxetine (Strattera®)

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

What is atomoxetine?

Atomoxetine is a medication that has been used to treat attention deficit hyperactivity disorder (ADHD) and bed wetting. It belongs to a class of medications known as norepinephrine reuptake inhibitors. A brand name for atomoxetine is Strattera®.

I take atomoxetine, and I was told that I am a poor/slow metabolizer. What does that mean for my pregnancy?

Some people metabolize atomoxetine slower than others. People who are slow metabolizers might have higher levels of the medication in their blood. It is not known if this could affect a pregnancy differently than among women who metabolize the medication more quickly.

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

Studies on women have not been done to see if atomoxetine could make it harder to get pregnant. Fertility was not affected in experimental animal studies.

I just found out that I am pregnant. Should I stop taking atomoxetine?

Talk with your healthcare providers before making any changes to this medication. They can talk with you about the benefits of treating your condition compared to possible concerns of taking this medication in pregnancy.

Does taking atomoxetine increase the chance for miscarriage?

Miscarriage can occur in any pregnancy. Studies have not been done to see if atomoxetine could increase the chance for a miscarriage.

Does taking atomoxetine 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. Atomoxetine has not been well studied for use during pregnancy. Two small human studies have not suggested a greater chance for birth defects. When looking at doses typically used by humans, animal studies did not suggest a risk for birth defects. However, with levels higher than used with human treatment, there is some question of a chance for birth defects. It is not known if this information would apply to women who are considered poor metabolizers.

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

One study which looked at pregnancy outcomes among 453 women who filled a prescription for atomoxetine during their pregnancy did not find a higher chance for pregnancy complications such as: small for gestational age (when the baby is smaller than expected), preterm delivery (giving birth before 37 weeks), or preeclampsia (a pregnancy related health condition that can include symptoms of high blood pressure and fluid retention). Prescription based studies can not tell us if the woman took her medication after filling the prescription.

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

Studies have not been done to see if atomoxetine would increase the chance for long-term problems.

Can I breastfeed while taking atomoxetine?

There are no published reports on the use of atomoxetine while breastfeeding. You and your healthcare providers should discuss the benefits of staying on this medication versus finding other medications that have more information available regarding their use during breastfeeding. Be sure to talk to your healthcare providers about all your breastfeeding questions.

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

This has not been studied. 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/>.

Selected References:

- Bro SP, et al. 2015. Adverse pregnancy outcomes after exposure to methylphenidate or atomoxetine during pregnancy. Clin Epidemiol; 7:139-47.
- Cohen JM, et al. 2017. Placental complications associated with psychostimulant use in pregnancy. Obstet Gynecol; 130(6):1192-201.
- Kallen B, et al. 2013. The Use of Central Nervous System Active Drugs During Pregnancy. Pharmaceuticals; 6(10):1221-86.
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There is a pregnancy registry for women who take medications for ADHD, called The National Pregnancy Registry for ADHD Medications. For more information please visit their website:

<https://womensmentalhealth.org/adhd-medications/>

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