

Benzodiazepines

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

What is a benzodiazepine?

Benzodiazepines are medications that have been used to treat anxiety, sleeplessness, seizures, muscle spasms, and alcohol withdrawal. Diazepam (Valium®), alprazolam (Xanax®), clonazepam (Klonopin®), temazepam (Restoril®), and lorazepam (Ativan®) are some examples of benzodiazepines, but there are others. While it is best to study medications individually, benzodiazepines are often studied together during pregnancy.

For more information on a specific benzodiazepine, please look on the MotherToBaby fact sheets page: <https://mothertobaby.org/fact-sheets-parent/>. Sheets are listed in alphabetical order by generic name.

I take a benzodiazepine. Can it make it harder for me to become pregnant?

There are no studies looking at whether benzodiazepines, as a group, can make it harder for women to get pregnant. Ask your healthcare provider or a MotherToBaby information specialist about your specific medication.

I just found out that I am pregnant, should I stop taking my benzodiazepine?

Talk to your healthcare provider before making changes to your medication. If you suddenly stop taking your medication, you could have withdrawal symptoms. We don't know if withdrawal would affect a pregnancy. If you do choose to stop taking your benzodiazepine, it is important to slowly come off the medication while under the direction of your healthcare provider.

For some women, the benefits of staying on their benzodiazepine during pregnancy may outweigh any possible risk. Your healthcare providers can help you make this decision.

Does taking a benzodiazepine increase the chance for miscarriage?

Miscarriages can occur in any pregnancy. Some studies have found that taking benzodiazepines during pregnancy is linked to a slightly higher chance of miscarriage. At this time, it is not known if this is due to the medication, the underlying condition, or other factors.

Does taking a benzodiazepine 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. Some early studies suggested a slight increased chance for cleft lip and/or cleft palate if a benzodiazepine was taken during the first trimester. Since these early reports, there have been further studies and reviews that have not found any increased chance of birth defects.

Could taking a benzodiazepine in the second or third trimester cause any other pregnancy complications?

It is not clear. Some studies have suggested a higher rate of preterm deliveries (delivery before 37 weeks of pregnancy) and low birth weight in babies when women take benzodiazepines during pregnancy. However, not all studies found these risks. It is possible that other factors were the cause of these findings.

I need to continue taking my benzodiazepine medication throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?

If you are taking a benzodiazepine near the time of delivery, your baby may have withdrawal symptoms. Symptoms can include trouble breathing, muscle weakness, irritability, a lot of crying, trouble sleeping, tremors, and jitteriness. It is important that your healthcare providers and your baby's pediatrician know you are taking a benzodiazepine. This is so extra care can be provided to your baby if needed. If symptoms do develop, they usually only last two to three weeks as the drug leaves the baby's system. Going through withdrawal is not expected to have any long-term effects for the child.

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

Very few studies have looked at the long-term effects on children exposed to these medications during pregnancy. One human study suggested that children might be more likely to show certain behaviors, such as fearfulness and problems socializing. Another small study suggested benzodiazepine exposure during pregnancy was associated with motor and developmental delays. However, more long-term studies are needed to understand if there are any concerns or not.

There is 1 human case report on a woman who took both temazepam and diphenhydramine (Benadryl®) and had a stillbirth. It is not known if this interaction will occur with all benzodiazepines. There are no other reports of this nature. To be safe, it is best not to take diphenhydramine while you are taking a benzodiazepine.

Can I breastfeed while taking a benzodiazepine?

Some benzodiazepines are not recommended during breastfeeding because they stay in the body a long time and might cause sedation (sleepiness) in a breastfed infant. If a benzodiazepine is needed during breastfeeding, it is best to use one that is removed from the body rapidly. When using a benzodiazepine during breastfeeding, watch your baby for sleepiness, low energy, or poor suckling which may be signs your baby is getting too much of the drug. If any of these symptoms are seen, discuss them with your child's healthcare provider right away. Be sure to talk to your health care provider about all your breastfeeding questions.

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

An increased chance of birth defects or pregnancy complications is not expected when the father of the baby takes a benzodiazepine. 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/> .

Please click [here](#) for references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://mothertobaby.org).

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