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 cigarette smoke may increase the risk for birth defects above that background risk. This information should not take the place of medical care and advice from your health care provider.

**What is in cigarette smoke?**
Cigarette smoke is made of gases and very tiny particles released when cigarettes are burned. It has over 4,000 chemicals and toxins including nicotine, tar, arsenic, lead, and carbon monoxide. Some of these chemicals cross the placenta and lower the amount of oxygen and food available for a developing baby. When smoke is inhaled (you breathe into your lungs) the gases and particles get into your blood and organs. The smoke that is inhaled by those around someone else who is smoking a cigarette is called second-hand smoke.

**Can smoking cigarettes make it more difficult for me to become pregnant?**
Yes. Some studies have found that smoking cigarettes can make it harder to get pregnant for women who smoke compared to non-smokers. Problems with getting pregnant may be greater for women who smoke more than 10 cigarettes a day. A woman’s ability to get pregnant improves once a woman stops smoking.

**Can cigarette smoke put me at a higher risk for miscarriage?**
Yes. The chance of miscarriage is higher in women who smoke cigarettes. There may also be a higher chance of ectopic pregnancy, a serious complication where the developing embryo grows outside of the uterus.

**Can smoking cigarettes during my pregnancy cause a birth defect?**
Possibly. Some studies suggest a small increased chance of an oral cleft in the baby, especially if oral clefts run in the family. An oral cleft occurs when the lip or palate (roof of the mouth) does not fully close as it should during the baby’s development. A few studies have suggested a small risk for a variety of other birth defects, especially if the woman is a heavy smoker. Most studies have not found an increased chance of other birth defects with cigarettes. At this time, there is not enough information to know if smoking in pregnancy increases the chance for these other birth defects.

**Can cigarette smoking cause other problems for my pregnancy?**
Yes. Other problems include a greater chance for the baby to be born prematurely (before 37 weeks) or to have low birth weight. A baby born too early has a higher chance for health problems and may need to stay in the hospital longer, possibly in an intensive care unit. Low birth weight can also make it harder for the baby to recover from serious health problems. Women who stop smoking early in pregnancy can lower their chance of having a baby with low birth weight to that of a non-smoking woman.

Smoking during pregnancy is also linked to serious problems with the placenta (the organ that connects the developing baby to the mother). These problems include placenta previa (placenta blocks the birth canal) and placental abruption (placenta breaks away from the uterine wall early). These conditions can cause vaginal bleeding and can be life threatening to the mother or result in loss of the pregnancy.

**Can cigarette smoking during pregnancy lead to lung problems for the baby?**
Yes. A higher chance of asthma, bronchitis and respiratory infections during childhood has been found.
**If I continue to smoke cigarettes at the end of my pregnancy, could my baby have withdrawal after birth?**

Possibly. Withdrawal symptoms, such as irritability, increased muscle tone (stiff muscles) and tremors have been seen in newborns exposed to cigarette smoking during their last weeks of pregnancy. These symptoms are short-term and usually go away without medical treatment.

**Can cigarette smoking during pregnancy have any long-term effects on the child’s behavior or development?**

Possibly. Several studies have found a link between cigarette smoking in pregnancy and learning and behavior problems in children. For example, there is a possible association with a higher chance of attention deficit hyperactivity disorder (ADHD). More studies are needed to confirm these findings. Some studies have also reported a higher chance for children to be overweight if exposed to cigarette smoke during pregnancy.

**I smoke only five cigarettes a day. Is this still a problem?**

Possibly. The risk of many pregnancy complications linked with cigarette smoking depends how many cigarettes a woman smokes. The less you smoke, the less you and your baby are at risk of having problems. If you cannot stop smoking, reducing the number of cigarettes a day that you smoke will have benefits. However, even a few cigarettes a day lessens the amount of food and oxygen your baby gets. It is best to completely stop smoking, as early in pregnancy as possible.

**I am 28 weeks pregnant and I have been smoking cigarettes for all of my pregnancy. Is it too late to quit?**

No. It is never too late to quit smoking. Stopping at any time during pregnancy can still have a positive effect on the growth and development of your baby.

**Are there any resources or medical treatments available to help me to quit smoking during my pregnancy?**

Yes. For free advice, support and referrals, please call the Smoker’s Quitline at 1-800-QUIT-NOW (1-800-784-8669) from anywhere in the U.S. There are also online resources to help you quit smoking in your pregnancy like [http://www.tobacco-cessation.org/PDFs/NeedHelpBooklet.pdf](http://www.tobacco-cessation.org/PDFs/NeedHelpBooklet.pdf). The best method to stop smoking during pregnancy is without the use of medication. If it does not seem possible to stop smoking without a medical treatment, discuss your options with your health care provider.

**Can I smoke cigarettes when I am breastfeeding?**

The safest approach is to not smoke while breastfeeding. Nicotine is found in breast milk and could affect your baby. Your baby may also be exposed to other unhealthy chemicals from cigarettes that could cross into the breast milk. Despite these risks, it is thought that the benefits of breastfeeding outweigh the risks of cigarette smoking for most babies. If you cannot stop smoking completely, you should reduce the number you smoke as much as possible and avoid smoking in the house or when you are near the baby. Talk to your health care provider about all your choices for breastfeeding.

**Is there a concern if my partner is smoking cigarettes?**

Men who smoke may have lower sperm counts, as well as abnormal shape and movement of sperm, which might make it harder for you to get pregnant. Once you are pregnant, your partner should stop smoking or at least not smoke around you or in your house or car because second hand smoke exposure can cause pregnancy complications and a lower birth weight in babies. For general information, please see the MotherToBaby fact sheet Paternal Exposures and Pregnancy at [https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/).

**References Available By Request.**

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