# Citalopram | Escitalopram (Celexa® | Lexapro®)

This sheet is about exposure to citalopram or escitalopram in pregnancy and while breastfeeding. This information is based on published research studies. It should not take the place of medical care and advice from your healthcare provider.

## *What are citalopram and escitalopram?*

Citalopram is a medication that has been used to treat depression. It belongs to the class of antidepressants known as selective serotonin reuptake inhibitors (SSRIs). A common brand name for citalopram is Celexa®.

Escitalopram contains the same active medication as citalopram and acts in a similar way in the body. It has been used to treat depression and generalized anxiety disorder. Escitalopram also belongs to the class of antidepressants known as selective serotonin reuptake inhibitors (SSRIs). A common brand name is Lexapro®.

MotherToBaby has facts sheet on depression https://mothertobaby.org/fact-sheets/depression-pregnancy/ and anxiety https://mothertobaby.org/fact-sheets/anxiety-fact/.

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 your medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy. Some people might have a return of their symptoms (relapse) if they stop this medication during pregnancy. Stopping this medication suddenly can cause some people to have withdrawal symptoms. If you plan to stop this medication, your healthcare provider might suggest that you slowly lower the dose instead of stopping all at once.

## *I take citalopram or escitalopram. Can it make it harder for me to get pregnant?*

It is not known if citalopram or escitalopram can make it harder to get pregnant. Studies in animals suggest that citalopram might lower fertility (ability to get pregnant).

## *Does taking citalopram or escitalopram increase the chance of miscarriage?*

Miscarriage is common and can occur in any pregnancy for many different reasons. A study on citalopram and escitalopram did not find an increased chance of miscarriage in people taking these medications.

## *Does taking citalopram or escitalopram increase the chance of birth defects?*

Birth defects can happen in any pregnancy for different reasons. Out of all babies born each year, about 3 out of 100 (3%) will have a birth defect. We look at research studies to try to understand if an exposure, like citalopram or escitalopram, might increase the chance of birth defects in a pregnancy.

There is published information about more than 15,000 pregnancies exposed to citalopram or escitalopram. Most studies have not found that these medications increase the chance of birth defects. While some studies have suggested a higher chance of heart defects or other birth defects with use of citalopram or escitalopram, most of these studies have flaws that make it hard to know if the birth defects were due to the medication or to other factors.

## *Does taking citalopram or escitalopram in pregnancy increase the chance of other pregnancy-related problems?*

Some studies suggest that taking citalopram or escitalopram throughout pregnancy might increase the chance of pregnancy-related problems such as preterm delivery (birth before week 37) and low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth). However, research has also shown that depression could increase the chance of pregnancy complications. This makes it hard to know if the medication, the underlying depression, or other factors are the cause of these problems.

A study looked at a worldwide database of reports of problems that happened after using medications. The study suggested that citalopram might increase the chance of stillbirth (pregnancy loss after week 20). However, this suggestion was based on only a small number of cases of stillbirth after use of citalopram in pregnancy (7 in total), and the overall increased risk appeared to be low. Also, the reports of stillbirth did not include information about other possible causes, such as the health or past medical history of the person who was pregnant, use of other medications, or other factors during the pregnancy. This makes it hard to know if the medication or other factors were the cause of these stillbirths.

Some, but not all, studies have suggested that when people take SSRIs such as citalopram or escitalopram during the second half of pregnancy, their babies might have a higher chance of a serious lung condition called persistent pulmonary hypertension (PPH). In the general population, PPH happens in 1 or 2 out of every 1,000 births. Some studies suggest that the overall chance of PPH when an SSRI is used in pregnancy is less than 1 out of every 100 births (less than 1%).

### *I need to take citalopram or escitalopram throughout my entire pregnancy. Will it cause symptoms in my baby after birth?*

The use of citalopram or escitalopram during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Symptoms can include irritability, jitteriness, tremors (shivering), constant crying, or changes in sleep patterns. Problems with eating, controlling body temperature, or breathing can also happen. In most cases, these symptoms are mild and go away within a couple weeks with no treatment. Some babies might need to stay in the nursery or NICU until the symptoms go away. Not all babies exposed to citalopram or escitalopram will have symptoms. It is important that your healthcare providers know you are taking citalopram or escitalopram so that if symptoms occur your baby can get the care that is best for them.

### *Does taking citalopram or escitalopram in pregnancy affect future behavior or learning for the child?*

One study followed 11 babies exposed to citalopram during pregnancy. At one year of age, there was no difference in their development compared to children who were not exposed to citalopram. Studies on the use of SSRIs in pregnancy and the chance of attention deficit hyperactivity disorder (ADHD) or autism spectrum disorder (ASD) in children have had mixed results. However, most studies do not find an increased chance of ADHD or ASD in children exposed to SSRIs during pregnancy after considering the possible role of other factors, such as family history of these conditions.

### *Breastfeeding while taking citalopram or escitalopram:*

Citalopram and escitalopram get into breast milk in small amounts. There have been a few case reports of sleepiness and weight loss in infants. Most studies have not reported harmful effects, or differences in intellectual development, in babies exposed to citalopram or escitalopram through breast milk. If you suspect the baby has any symptoms, such as being very sleepy (hard to wake for feeding), poor feeding, or poor weight gain, contact the child's healthcare provider. Be sure to talk to your healthcare provider about all your breastfeeding questions.

### *If a man takes citalopram or escitalopram, could it affect fertility or increase the chance of birth defects?*

Citalopram, escitalopram, and other SSRIs have been reported to cause some sexual side effects in men, such as lower sexual desire or problems with ejaculation. There are several case reports of effects on sperm quality after long-term use of citalopram or escitalopram. These effects could lower men's fertility (ability to get a partner pregnant). Sperm quality improved when the medication was stopped. In general, exposures that fathers or sperm donors have are unlikely to increase 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.**

**National Pregnancy Registry for Psychiatric Medications:**

*There is a pregnancy registry for women who take psychiatric medications, such as citalopram and escitalopram. For more information you can look at their website: https://womensmentalhealth.org/research/pregnancyregistry/.*

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

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