Clonazepam (Klonopin®)

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

**What is clonazepam?**

Clonazepam belongs to a class of medications called benzodiazepines. Clonazepam has been used to treat seizures, anxiety, panic attacks, and insomnia (trouble sleeping). It is sold under the brand name Klonopin®.

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 this medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

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

It is not known if clonazepam can make it harder to get pregnant.

**Does clonazepam increase the chance for miscarriage?**

Miscarriage is common and can occur in any pregnancy for many different reasons. Based on the studies reviewed, it is not known if clonazepam increases the chance for miscarriage. One study found that people who were taking more than 4 mg/day of clonazepam had a slightly higher chance of miscarriage. As there can be many causes of miscarriage, it is hard to know if a medication, the medical condition, or other factors are the cause of a miscarriage.

**Does clonazepam increase the chance of birth defects?**

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. Based on the studies reviewed, it is not known if clonazepam increases the chance for birth defects above the background risk. There are a small number of studies of people taking clonazepam only during pregnancy. These studies have not found an increased chance for birth defects when clonazepam alone was taken during the first trimester of pregnancy. There may be different risks for people who take clonazepam in combination with other medications.

**Does clonazepam in pregnancy increase the chance of other pregnancy-related problems?**

Based on the studies reviewed, it is not known if clonazepam can cause other pregnancy-related problems, such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth). Two studies suggest that babies exposed to clonazepam during pregnancy might be more likely to be born preterm or with low birth weight. These studies relied on prescription records, and it is not known if the people who were pregnant took their medication as directed. Also, the pregnancy complications seen in these studies may be more related to the underlying health condition, such as anxiety.

*I need to take clonazepam throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?*

The use of clonazepam during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Some babies exposed to clonazepam at the end of pregnancy may have trouble breathing, poor circulation, and low muscle tone (floppy baby syndrome). Some babies may need to spend some time in the neonatal intensive care unit (NICU). Not all babies exposed to clonazepam will have these symptoms. It is important that your healthcare providers know you are taking clonazepam so that if symptoms occur your baby can get the care that is best for them.

**Does clonazepam in pregnancy affect future behavior or learning for the child?**

Based on the studies reviewed, it is not known if clonazepam increases the chance for behavior or learning issues. A study of 314 children exposed to clonazepam during pregnancy found an increased chance of intellectual disability and delayed developmental milestones. One study of 269 children exposed to clonazepam during pregnancy did not find an increased chance of autism.
**Breastfeeding while taking clonazepam:**

Clonazepam gets into breastmilk in small amounts. Because it can cause sedation (sleepiness) and levels might build up in the infant’s body, other medications may be preferred while breastfeeding a newborn or an exclusively breastfed infant. If you suspect the baby has any symptoms (sleepiness, not gaining weight, delayed milestones) contact the child’s healthcare provider. If excessive sleepiness occurs, contact a healthcare provider immediately.

The product label for clonazepam recommends people who are breastfeeding not use this medication while breastfeeding. This is because there is not enough information available on the use of clonazepam while breastfeeding to know how it could affect a baby. However, the benefit of using clonazepam may outweigh possible risks. Your healthcare provider can talk with you about using clonazepam and what treatment is best for you. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

**If a male takes clonazepam, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?**

Studies have not been done to see if clonazepam could affect male fertility or increase the chance of birth defects above the background risk. In general, exposures that fathers or sperm donors have are unlikely to increase the 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.

A pregnancy registry for psychiatric medications has been organized at the Massachusetts General Hospital. Contact the registry at https://womensmentalhealth.org/clinical-and-research-programs/pregnancyregistry/.