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

**What is clonidine?**

Clonidine is a medication that has been used to treat high blood pressure, attention deficit hyperactivity disorder (ADHD), bipolar disorder, and pain. Clonidine is sometimes used in combination with other medication for the management of opioid withdrawal. Some brand names include Catapres®, Duraclon® and Kapvay®.

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 clonidine. Can it make it harder for me to get pregnant?**

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

**Does taking clonidine 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 clonidine increases the chance for miscarriage.

**Does taking clonidine 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, the use of clonidine is not expected to greatly increase the chance of birth defects above the background risk.

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

Based on the studies reviewed, it is not known if clonidine 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 [about 2500 grams] at birth).

One report that suggests that clonidine use may lead to a slower heart rate in the person who is pregnant, leading to lower birth weight in the baby. In the cases where clonidine was being used to treat high blood pressure, the blood pressure issues may have played a role in the reduced weight of the baby. There have also been some reports of babies being born with temporary low blood pressure if clonidine was being used near the time of delivery. High blood pressure has also been reported in 4 babies. Not all babies will have these effects. Be sure your healthcare providers are aware that you are taking clonidine so the baby can be monitored as needed.

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

The use of clonidine during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Symptoms might include high / low blood pressure, drowsiness, and irritability. Most of the time the symptoms go away on their own, usually within a few weeks. Not all babies exposed to clonidine will have symptoms. Some babies may need to stay in a special care nursery for a few days until these symptoms go away.

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

Based on the studies reviewed, it is not known if clonidine increases the chance for behavior or learning issues.

**Breastfeeding while taking clonidine:**
Clonidine passes into breastmilk. Taking clonidine may lower milk supply. There is a report of one newborn baby who was drowsy, floppy (poor muscle control), and had periods of not breathing and possible seizure activity. These symptoms started soon after delivery and went away when breastfeeding was stopped, days after birth. It is not known if the symptoms were due to pregnancy exposure to clonidine, breastfeeding while taking clonidine, or other reasons. There are 10 other reports of babies who were exposed to clonidine through breast milk that did not have reported side effects.

The benefit of continuing clonidine while breastfeeding may outweigh the risks of an untreated condition. Your healthcare provider can talk with you about clonidine 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 clonidine, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?**

Trouble with getting and keeping an erection (impotence, a form of erectile dysfunction) has been reported in some males with high blood pressure being treated with clonidine. Those who experience this issue may have more trouble conceiving a pregnancy. 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/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/).

Please click [here](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/) for references.