

Dextroamphetamine-Amphetamine (Adderall®)

This sheet is about exposure to dextroamphetamine-amphetamine in pregnancy and while breastfeeding. This information is based on available published literature. It should not take the place of medical care and advice from your healthcare provider.

What is dextroamphetamine-amphetamine?

Dextroamphetamine-amphetamine (Adderall®) is a combination prescription medication that has been used to treat attention deficit hyperactive disorder (ADHD) and narcolepsy (a condition that affects the brain's ability to control sleeping and waking up).

Sometimes when women 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. Stopping this medication suddenly can cause withdrawal in some people. It is not known if or how withdrawal may affect a pregnancy. If you are going to stop using this medication, your healthcare providers may talk with you about slowly reducing your dose over time. Your healthcare providers can also talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

Dextroamphetamine-amphetamine is different from methamphetamine. MotherToBaby has a fact sheet on methamphetamine here: <https://mothertobaby.org/fact-sheets/methamphetamine/>. This sheet will focus on the use of dextroamphetamine-amphetamine under medical supervision. MotherToBaby has a fact sheet on dextroamphetamine here: <https://mothertobaby.org/fact-sheets/dextroamphetamine-pregnancy/>.

I take dextroamphetamine-amphetamine. Can it make it harder for me to get pregnant?

Taking prescribed dextroamphetamine-amphetamine as directed by your healthcare provider is not expected to make it harder to get pregnant.

Does taking dextroamphetamine-amphetamine increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Taking prescribed dextroamphetamine-amphetamine as directed by your healthcare provider is not expected to increase the chance of miscarriage.

Does taking dextroamphetamine-amphetamine 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. Most studies suggest that taking dextroamphetamine or amphetamine during the first trimester does not increase the chance of birth defects. In a large study of women taking stimulants for ADHD during pregnancy, there was no increased risk for birth defects reported when taking amphetamines, such as dextroamphetamine-amphetamine, for ADHD treatment.

Does taking dextroamphetamine-amphetamine in pregnancy increase the chance of other pregnancy-related problems?

Although data is limited, when used as directed by a healthcare provider, taking dextroamphetamine-amphetamine during pregnancy has sometimes been associated with a higher chance of pregnancy-related problems, such as poor growth (babies born small and/or with a small head size), low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth), or preterm delivery (birth before week 37). People taking dextroamphetamine-amphetamine may experience side effects from their medication, such as weight loss due to decreased appetite, changes in heart rate, and changes in blood pressure. Talk with your healthcare provider about monitoring these side effects to help improve outcomes for you and your baby.

I need to take dextroamphetamine-amphetamine throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?

It is not known if taking dextroamphetamine-amphetamine could cause withdrawal symptoms in a newborn after birth. This has not been well studied in women only taking dextroamphetamine-amphetamine as directed during pregnancy.

Does taking dextroamphetamine-amphetamine in pregnancy affect future behavior or learning for the child?

Although limited by looking at all ADHD medications together, a Danish study suggested no increase in neurodevelopmental disorders, like ADHD, in the children of women who continued their ADHD medication during pregnancy versus those who stopped their medication before becoming pregnant.

Breastfeeding while taking dextroamphetamine-amphetamine:

There are no studies on the combination of amphetamine-dextroamphetamine in breastfeeding. Individually, amphetamine and dextroamphetamine have both been found to pass into breast milk. The effect of amphetamine in milk on behavior and brain development of infants has not been well studied. No adverse effects were reported in 4 infants (ages range from 3 months to 10 months) whose mothers were taking dextroamphetamine for ADHD. If you suspect the baby has any symptoms such as trouble eating, trouble sleeping, or irritability, contact the child's healthcare provider.

Some evidence suggests that large doses of dextroamphetamine could lower milk supply in women who are newly breastfeeding. If you have any questions or concerns about breastfeeding, talk with your healthcare provider, your baby's pediatrician, or a lactation consultant.

The product label for dextroamphetamine-amphetamine recommends women who are breastfeeding not use this medication. But the benefit of using dextroamphetamine-amphetamine may outweigh possible risks. Your healthcare providers can talk with you about using dextroamphetamine-amphetamine and what treatment is best for you. Be sure to talk to your healthcare provider about all your breastfeeding questions.

If a man takes dextroamphetamine-amphetamine, could it affect fertility or increase the chance of birth defects?

It is not known if dextroamphetamine-amphetamine could affect a man's fertility (make it harder to get a woman pregnant) or increase the chance of birth defects above the background risk. In general, exposures that men 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.

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

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