

Dextroamphetamine

This sheet is about exposure to dextroamphetamine 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?

Dextroamphetamine or d-amphetamine is a prescription medication that has been used for attention deficit hyperactivity disorder (ADHD) and narcolepsy (extreme daytime sleepiness). It has also been prescribed to treat some mental health conditions. Some brand names are Dexedrine®, Dexedrine Spansules®, Dextrostat®, Liquadd®, ProCentra®, and Zenzedi®. Dextroamphetamine is combined with amphetamine to make Adderall®. For more information on Adderall®, please see our fact sheet at <https://mothertobaby.org/fact-sheets/dextroamphetamine-amphetamine-adderall/>.

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.

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

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

Does taking dextroamphetamine increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if dextroamphetamine can increase the chance of miscarriage.

Does taking dextroamphetamine 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. Using dextroamphetamine as prescribed for medical reasons does not appear to increase the chance of birth defects.

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

One older study found a small effect on birth weight among people who used prescribed dextroamphetamine past 28 weeks of pregnancy to control weight gain. However, other studies looking at the use of dextroamphetamine with amphetamine to treat ADHD have not found an effect on birth weight.

Research shows that misuse of amphetamines (using more than prescribed) may increase the chance for 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), and preterm delivery (birth before week 37). The pregnancies in these studies may have had other risk factors, such as exposure to alcohol and cigarettes, or not having prenatal care.

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

Misuse of other amphetamines (such as methamphetamine) during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. They can include jitteriness, sleepiness, and trouble breathing at the time of birth. These symptoms have not been reported in the newborns of people who are taking dextroamphetamine as prescribed by their healthcare providers.

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

Studies have not been done to see if dextroamphetamine can cause behavior or learning issues for the child.

Breastfeeding while taking dextroamphetamine:

When dextroamphetamine is taken as directed, it gets into breastmilk in small amounts. Babies can be monitored for

any symptoms related to dextroamphetamine. If you suspect the baby has any symptoms (such as decreased appetite, sleeplessness, or irritability), contact the child's healthcare provider.

A small study of four infants who were breastfed by people who were taking dextroamphetamine for ADHD found no problems in the health and growth of those infants up to 6-10 months of age. Some evidence suggests that large doses of dextroamphetamine could lower milk supply in people who are newly breastfeeding.

The product labels for some dextroamphetamine products recommend people who are breastfeeding not use these medications. But the benefit of using dextroamphetamine and the benefits of breastfeeding your child may outweigh the possible risks. Your healthcare providers can talk with you about using dextroamphetamine and what treatment is best for you. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

Studies have not been done to see if dextroamphetamine could affect male fertility (ability to get partner pregnant) or increase the chance of birth defects above the background risk. 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 to view references.

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

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