This sheet talks about using fentanyl in a pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

**What is fentanyl?**

Fentanyl belongs to a class of medications known as opioids. Opioids are sometimes called ‘narcotics’. Fentanyl is used to treat pain and is often given during and after surgery. Fentanyl can be given in different ways, such as IV, injection, epidural (space around the spinal cord), transdermal (patch applied to skin), nasal spray, or buccal (pill in mouth next to cheek).

**Can taking fentanyl make it harder for me to get pregnant?**

Fentanyl has not been studied to see if using fentanyl could make it harder for a woman to get pregnant. However, it is known that long term use of opioids can affect hormones that are important for getting pregnant.

**I just found out I am pregnant. Should I stop taking fentanyl?**

No. If you are pregnant and using fentanyl regularly, talk to your healthcare provider about options that will allow you to either gradually wean off or stay on a carefully controlled dose of an opioid medication during your pregnancy. If you have been taking fentanyl regularly you should not just stop suddenly (also called “cold turkey”). Stopping an opioid medication suddenly could cause you to go into withdrawal. More research is needed to know how going through withdrawal might hurt a pregnancy. Talk with your healthcare provider about the risks and benefits of continuing or stopping your medication. Any reduction in your fentanyl needs to be done slowly, and under the direction of your healthcare provider.

**Can taking fentanyl during my pregnancy increase the chance of miscarriage?**

Miscarriage can occur in any pregnancy. There are no published studies looking at whether fentanyl increases the chance of miscarriage. This does not mean there is an increased chance or that there is no increased chance, it only means that this question has not been answered.

Miscarriage is one of the risks of surgery during pregnancy, and it is hard to tell if miscarriage is due to the underlying condition, a surgical procedure, or the medications (like fentanyl) which are used.

**Can taking fentanyl increase the chance of having a baby with a birth defect?**

In every pregnancy, a woman starts out with a 3-5% chance of having a baby with a birth defect. This is called her background risk. Not every opioid medication has been studied on its own; therefore, we do not know if these medications increase the chance for birth defects or not. Some studies suggest that opioids as a general group might be associated with birth defects including heart defects and cleft lip and palate. However, these and other studies have not found a specific pattern of birth defects caused by opioids. Based on available studies, if there is an increased chance for birth defects with opioid use in pregnancy, it is likely to be small.

**Could fentanyl cause other pregnancy complications?**
Possibly. Studies involving women who chronically use some opioids during their pregnancy have found an increased risk for adverse outcomes including poor growth of the baby, stillbirth, premature delivery, and c-section. This is more commonly reported in women who are taking heroin or who are using prescribed pain medications in greater amounts or for longer than recommended by their health provider. Use of an opioid close to the time of delivery can result in withdrawal symptoms in the baby (see the section on withdrawal).

**Will taking fentanyl during pregnancy affect my baby's behavior or cause learning problems?**

There are not enough studies on fentanyl to know whether there is a chance for long-term problems. Some studies on opioids as a general group have found more problems with learning and behavior in children exposed to opioids for a long period of time during pregnancy. It is hard to tell if this is due to the medication exposure or other factors such as use of tobacco, alcohol, and/or other substances that can increase the chances of these problems. Brief use of fentanyl during surgery or for post-surgical pain is not likely to cause learning or behavior problems.

**I need to take fentanyl throughout my entire pregnancy. Will it cause withdrawal symptoms (neonatal abstinence syndrome) in my baby after birth?**

Possibly. Studies have reported a risk for neonatal abstinence syndrome (NAS) with some opioid medicines; however, not all medications have been studied. Based on what we know about the risk of NAS with other opioids, it is likely that fentanyl also has a risk for NAS. Because there are few studies, we do not know if the risk is higher or lower than with other opioids.

NAS is the term used to describe withdrawal symptoms in newborns from medicines that a mother takes during pregnancy. For any opioid, symptoms can include difficulty breathing, extreme drowsiness (sleepiness), poor feeding, irritability, sweating, tremors (shivers), vomiting and diarrhea. Symptoms of NAS may appear at birth and may last more than two weeks. If needed, babies can be treated for NAS in the hospital. If you use an opioid in your pregnancy, it is important that your baby’s doctors know and check for symptoms of NAS, so your newborn gets the best possible care.

**Can I take fentanyl while I am breastfeeding?**

Possibly, depending on how it is given to you. Small amounts of fentanyl get into breast milk. Newborns are not fully developed and might have problems with the amounts from breast milk. If you have had a very brief exposure (example: IV use in surgery) then the amount in your milk is likely to be very low after 12 hours. If you take an opioid, such as fentanyl, on a daily basis, there may be concerns about your baby being very sleepy and not feeding well. Other opioids have been reported to cause difficulty with breathing, and in a few cases have even resulted in death of the baby. If you are using any opioid, your baby should be watched carefully for excessive sleepiness or poor feeding. The baby’s healthcare provider should be contacted right away if your baby has any problems. Speak to your healthcare provider about your pain and medications that can be used while you are breastfeeding.

**What if the baby’s father takes fentanyl?**

There are no studies looking at how fentanyl use in a man might affect his ability to get his partner pregnant or how it might affect a partner’s pregnancy. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures and Pregnancy at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.

Please click here for references