

# Fentanyl

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This sheet is 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 intravenously (IV), injection, epidural (space around the spinal cord), transdermal (patch applied to skin), nasal spray, or buccal (pill in mouth next to cheek). Brand names of fentanyl includes Actiq<sup>®</sup>, Duragesic<sup>®</sup>, and Sublimaze<sup>®</sup>

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.

If you have been taking fentanyl regularly or have a dependency (also called opioid use disorder), you should not just stop suddenly (also called “cold turkey”). Stopping an opioid medication suddenly could cause you to go into withdrawal. It is not known if or how withdrawal might affect a pregnancy. It is suggested that any reduction in fentanyl be done slowly, and under the direction of your healthcare provider.

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

Studies have not been done to see if taking fentanyl could make it harder to get pregnant.

## ***Does taking fentanyl increase the chance for miscarriage?***

Miscarriage can occur in any pregnancy. Studies have not been done to see if fentanyl increases the chance for miscarriage. 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.

## ***Does taking fentanyl 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, exposure to fentanyl is not expected to increase the chance for birth defects above the background risk.

Not every opioid medication has been studied on its own; therefore, it is not known 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.

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

Studies involving people who often use some opioids during their pregnancy have found an increased chance for outcomes including poor growth of the baby, stillbirth, delivery before 37 weeks of pregnancy (preterm delivery), and fetal distress during labor. This is more commonly reported in those who are taking a drug like heroin or who are using prescribed pain medications in greater amounts or for longer than recommended by their healthcare provider. Use of an opioid close to the time of delivery can result in withdrawal symptoms in the baby (see the section of this fact sheet on Neonatal Abstinence Syndrome.)

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

Studies have reported a chance for neonatal abstinence syndrome (NAS) with some opioids; however, not all opioid medications have been studied. Based on what is known about the chance of NAS with other opioids, it is likely that pregnancies exposed to fentanyl also have a chance for NAS. Because information is limited, it is not known if the chance of NAS is higher or lower with fentanyl than with other opioids.

NAS is the term used to describe withdrawal symptoms in newborns from medicines that a person takes during pregnancy. For any opioid, symptoms can include trouble 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 successfully treated for withdrawal while in the hospital. If you used fentanyl in your pregnancy, it is important that your baby's healthcare providers know to check for symptoms of NAS.

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

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

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 that may increase the chances of these problems. Short-term use of fentanyl during surgery or for pain after surgery is not expected to cause learning or behavior problems.

### ***If I have an opioid use disorder, are there other concerns when fentanyl is used in pregnancy?***

Studies find that when opioids are taken in higher doses or for longer than recommended by a healthcare provider (i.e. opioid misuse) there can be an increased chance for pregnancy problems. These include poor growth of the baby, stillbirth, preterm delivery, and the need for C-section. People who are pregnant and misuse opioids may also have other risks. For example, sharing needles to inject opioids increases the chance of getting diseases like hepatitis C and/or HIV which can cross the placenta and infect the baby.

### ***Breastfeeding while taking fentanyl:***

The amounts of fentanyl that get into breast milk are small. Babies might have problems with the amounts of fentanyl in the breast milk. Speak to your healthcare provider about your pain and medications that may be used while you are breastfeeding.

Use of some opioids while breastfeeding can cause babies to be very sleepy and have trouble latching on. Some opioids can cause trouble with breathing and in a few cases have been associated with death. These problems for the baby have been seen most often with codeine and tramadol but may be seen with fentanyl. If you are using any opioid, it is important that the baby is watched carefully. If you suspect the baby has any symptoms (such as being too sleepy, hard to wake up, trouble with breathing, trouble with eating, or being limp), contact a healthcare provider right away. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

Studies have not been done to see if fentanyl could increase the chance of birth defects when used by a male. However, use or misuse of opioids in general has been shown to lower fertility in men. 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 for references**

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

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