Fexofenadine

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

**What is fexofenadine?**

Fexofenadine is an over-the-counter antihistamine. Antihistamines reduce the symptoms of allergic reactions and colds, including sneezing, runny nose, watery eyes and itchy throat. Fexofenadine has been sold under brand names such as Allegra® and Aller-Ease®.

The medication terfenadine changes into fexofenadine in the body, so information on terfenadine may help predict the effects of fexofenadine on pregnancy and breastfeeding.

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

Studies have not been done to see if taking fexofenadine could make it harder to become pregnant. Animal studies found no evidence that taking fexofenadine would make it harder to become pregnant.

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

Talk with your healthcare providers before making any changes to how you take this medication. It is important to consider the benefits of treating allergy symptoms and other conditions during pregnancy. Treating allergy symptoms may reduce asthma symptoms and the need for additional asthma medications.

**Does taking fexofenadine increase the chance for miscarriage?**

Miscarriage can occur in any pregnancy. A study looking at people who filled prescriptions for fexofenadine during pregnancy found no increase in miscarriages compared to similar groups who filled prescriptions for other common antihistamines in pregnancy or were not prescribed antihistamines during pregnancy.

**Does taking fexofenadine 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. Studies on both fexofenadine and terfenadine have not found an increased chance of birth defects when they are taken during pregnancy.

**Could taking fexofenadine cause other pregnancy complications?**

A study looking at birth outcomes in people who filled prescriptions for fexofenadine during pregnancy found no increase in preterm delivery (delivery before 37 weeks of pregnancy), smaller size than expected of the baby at delivery, or stillbirth, when compared to similar groups who filled prescriptions for other common antihistamines in pregnancy, or were not prescribed antihistamines during pregnancy. A limitation of prescription-based studies is that there is no way to know if or how a person takes the medication after filling the prescription. A separate study on terfenadine found no increase in premature delivery or low birth weight when used during pregnancy.

**Does taking fexofenadine in pregnancy cause long-term problems in behavior or learning for the baby?**

Studies have not been done to see if taking fexofenadine could cause long-term problems in behavior or learning.

**Can I breastfeed while taking fexofenadine?**

Fexofenadine is less likely to cause sleepiness in adults than some other antihistamines are. For this reason, fexofenadine may be preferred in breastfeeding over other antihistamines that do cause sleepiness. Information from terfenadine, which breaks down into fexofenadine in the body, suggests that the amount of fexofenadine in the breast milk is small (less than 1% of the dose taken). This amount is most likely too low to cause problems for the baby. If you suspect the baby has any symptoms such as being sleepier than usual or not waking up to feed as expected, contact the child’s healthcare provider.

**I take fexofenadine. Can it make it harder to get my partner pregnant or increase the chance of birth**
defects?

There is no evidence that fexofenadine would affect a male’s fertility or increase risks to 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/.

Please click here for references.