Finasteride

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

**What is finasteride?**

Finasteride is a medication approved for the treatment and prevention of male pattern baldness (hair loss in males) and benign prostatic hyperplasia (enlarged prostate). Finasteride is not approved for use in females but has been used “off-label”. Finasteride has been marketed under the brand names Propecia® and Proscar®.

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

Based on the data available, it is not known if finasteride can make it harder to become pregnant.

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

Finasteride is not recommended for use during a pregnancy. If you are taking finasteride and find out that you are pregnant, contact your healthcare provider.

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

Miscarriage can occur in any pregnancy. Scientific studies have not been done to see if taking finasteride could increase the chance for a miscarriage.

**Does taking finasteride 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. Experimental animal studies on pregnancy exposure to finasteride have reported that large doses might cause the sex organs in males to develop improperly. There are no human studies that have researched if finasteride use in pregnancy might cause birth defects. Based on animal research, there has been a concern for birth defects of sex organs in male babies if exposure happened when the sex organs are developing (8 to 12 weeks of pregnancy). Finasteride is not recommended for use in pregnancy.

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

Experimental animal studies suggested that finasteride exposure in pregnancy might affect testicular descent (which typically happens on its own in most males soon after birth), might cause preterm birth, and might affect memory in some exposed offspring. There are no human scientific studies on the use of finasteride in pregnancy.

**If I touch or handle finasteride tablets during pregnancy, does the baby have an increased risk for birth defects?**

People who are pregnant are told not to handle finasteride tablets that are crushed or broken during pregnancy as a precaution. However, it is highly unlikely that enough of the medication would get through the skin during the course of normal handling to be a problem.

People who are required to work with finasteride as part of their job should wear gloves, clean surface areas where pills are handled, and wash hands. Workers should discuss proper handling and storage with their occupational safety officer.

**Can I breastfeed while taking finasteride?**

Finasteride is not indicated for use in females, and no data are available on its transfer into human milk. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

**My male partner is taking finasteride. Should they stop taking finasteride before we try to become pregnant?**

Your partner should discuss the benefits of taking the medication and any possible harmful effects from not taking it
with their healthcare provider before deciding to stop treatment. If a person decides to stop using finasteride, it takes an average of 2 days for almost all of the drug to be gone from the body after the last dose.

**If my male partner decides to continue taking finasteride, will it be more difficult for me to become pregnant?**

There is no evidence that if your partner is taking this medication it will make it harder for you to become pregnant. Some small differences have been seen in the semen of people who take finasteride, such as low sperm counts. For most people, sperm levels returned to their normal levels when they stopped taking the medication. There are no studies that link this medication to infertility in humans.

**My male partner is taking finasteride. Is there an increased risk for birth defects from exposure to semen?**

There are no published research studies that have addressed this question in human pregnancy. A study in rats did not show an increased chance for birth defects in the offspring of female rats who had mated with male rats given finasteride. There has been a concern for birth defects of sex organs in male babies if a couple had unprotected sex during the critical time in pregnancy when the sex organs are developing (8 to 12 weeks of pregnancy). However, the amount of the drug found in semen is so small it is not thought to be enough to cause a problem for the developing baby if the exposure to the drug is only through semen with vaginal sex. 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/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/).

Please click [here](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/) for references.