

# Heroin

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

## ***What is heroin?***

Heroin is a highly addictive opioid (narcotic). It can be smoked, snorted, or injected. Some street names for heroin include smack, dope, mud, horse, skag, junk, H, black tar, and skunk, among others. In the United States, heroin is an illegal substance and is not available by prescription.

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

If you have been taking heroin regularly, please seek help right away. It is important to stop using during pregnancy, but you should not stop suddenly (also called “cold turkey”). Stopping an opioid suddenly could cause you to go into withdrawal. Going through withdrawal might increase risks to the pregnancy. Your healthcare providers can talk with you about how to stop using heroin gradually in pregnancy.

## ***I use heroin. Can it make it harder for me to get pregnant?***

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

## ***Does using heroin increase the chance for miscarriage?***

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

## ***Does using heroin 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. Overall, the studies on heroin do not suggest an increased chance of birth defects. However, heroin is often combined with other drugs, medications, and even chemicals that could increase the chance of birth defects. This makes it difficult to know the actual exposures and risks for each person who uses heroin.

## ***Does using heroin in pregnancy increase the chance of other pregnancy related problems?***

Studies involving people who use heroin or misuse other opioids during their pregnancy (take them in higher amounts or for longer than prescribed by healthcare providers) have found an increased chance for adverse outcomes including poor growth of the baby, stillbirth, delivery before 37 weeks of pregnancy (preterm delivery), and fetal distress during labor. Using heroin 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.) Some people who misuse opioids also have other habits that can result in health problems for themselves and their pregnancy. For example, poor diet choices can lead to not having enough nutrients to support a healthy pregnancy and could increase the chance of miscarriage and preterm birth. 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.

## ***Will my baby have withdrawal (Neonatal Abstinence Syndrome) if I continue to use heroin?***

Studies have reported an increased chance for neonatal abstinence syndrome (NAS) with some opioids, including heroin. NAS is the term used to describe withdrawal symptoms in newborns from medication(s) or substances that a person takes during pregnancy. For any opioid, symptoms can include difficulty breathing, extreme drowsiness (sleepiness), poor feeding, irritability, sweating, tremors, vomiting and diarrhea. Most often, symptoms of NAS appear two days after birth and may last more than two weeks. Most babies can be successfully treated for withdrawal while in the hospital. If you used heroin or other opioids in your pregnancy, it is important that your baby’s healthcare providers know to check for symptoms of NAS, so your newborn gets the best possible care.

## ***Does using heroin in pregnancy affect future behavior or learning for the child?***

One small study found smaller head measurements and brain volume in infants exposed to heroin during the

pregnancy. Some studies on opioids as a general group including heroin have found more problems with learning and behavior in children exposed to opioids for a long period of time during pregnancy.

***Breastfeeding while using heroin:***

Heroin breaks down into morphine inside the body, and morphine enters the breast milk. Heroin is often combined with other medications, drugs, or chemicals that could also enter the breast milk. Use of some opioids while breastfeeding can cause babies to be very sleepy and they may have trouble latching on. Some opioids can cause difficulty with breathing. If you have used heroin while breastfeeding, contact the baby's healthcare provider immediately if your baby has any problems such as increased sleepiness (more than usual), trouble feeding, trouble breathing, or limpness.

It is usually recommended that people do not breastfeed while using heroin. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

Heroin use may affect the sperm, making it harder to get a partner pregnant. The use of heroin by a father or sperm donor is not expected to increase the chance of birth defects, but injecting heroin increases the chance of exposure to infections such as hepatitis C or HIV. These infections can be passed through the semen to the person who is pregnant and then to the baby. 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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