Lisinopril

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

**What is lisinopril?**

Lisinopril is a medication known as an angiotensin-converting enzyme (ACE) inhibitor. Ace inhibitors cause relaxation of blood vessels and decrease blood volume, which leads to lower blood pressure. Lisinopril is used to treat high blood pressure, protect the kidneys in people with diabetes, and reduce the risk of death during a heart attack. Some brand names for lisinopril are Prinivil®, Qbrelis®, and Zestril®. Lisinopril is also available in combination with a diuretic called hydrochlorothiazide (Zestoretic®). For additional information on ACE inhibitors, please see the MotherToBaby fact sheet ACE Inhibitors [https://mothertobaby.org/fact-sheets/ace-inhibitors-pregnancy/](https://mothertobaby.org/fact-sheets/ace-inhibitors-pregnancy/).

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

Studies on people who are pregnant have not yet been done to see if lisinopril could make it harder to get pregnant. The results of studies in laboratory rats suggested that lisinopril is not likely to make it harder to get pregnant.

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

Lisinopril can cause problems for a baby when it is taken during the second and third trimester of pregnancy. For this reason, it is recommended that a person who is pregnant should stop taking lisinopril once a pregnancy is detected, but you should not stop lisinopril without talking to your healthcare provider first. If you are taking lisinopril for high blood pressure, your healthcare provider might need to prescribe you a different medication to control the high blood pressure during pregnancy. Stopping an ACE inhibitor suddenly without starting another drug for high blood pressure right away can cause a dangerous spike in your blood pressure, which can cause problems for the pregnancy.

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

Miscarriage can occur in any pregnancy. There are no studies that have looked at this question. Therefore, it is not known if lisinopril could increase the chance for miscarriage.

**Does taking lisinopril 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 data available, it is not known if lisinopril increases the chance for birth defects above the background risk.

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

When lisinopril, or any ACE inhibitor, is taken during the second or third trimesters of pregnancy, it can cause low levels of amniotic fluid (the fluid that surrounds the baby). Low levels of amniotic fluid can lead to health problems for the developing baby. Problems can include poor lung and skull development, growth restriction and facial deformities. ACE inhibitors can also cause low blood pressure and kidney failure in the newborn baby. In some cases, the baby has survived the complications after treatment. In other cases, the baby has died from these complications.

**Can I breastfeed my baby if I am taking lisinopril?**

There are no studies looking at lisinopril while breastfeeding. There are other high blood pressure medications that have been better studied for use while breastfeeding. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

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

There are no studies looking at possible risks to a pregnancy when the father of the baby or sperm donor takes lisinopril. 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 and Pregnancy at [https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/).
Please click here for references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

Disclaimer: MotherToBaby Fact Sheets are meant for general information purposes and should not replace the advice of your health care provider. MotherToBaby is a service of the non-profit Organization of Teratology Information Specialists (OTIS). OTIS/MotherToBaby recognizes that not all people identify as “men” or “women.” When using the term “mother,” we mean the source of the egg and/or uterus and by “father,” we mean the source of the sperm, regardless of the person’s gender identity. Copyright by OTIS, October 1, 2020.