



Lorazepam (Ativan®)

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

What is lorazepam?

Lorazepam is a medication commonly used to treat anxiety, but it may also be used to treat insomnia, seizures, and alcohol withdrawal. Lorazepam is marketed under the brand name Ativan® and belongs to the class of medications known as benzodiazepines. MotherToBaby has a general fact sheet on benzodiazepines at <https://mothertobaby.org/fact-sheets/benzodiazepines-pregnancy/pdf/>.

I just found out I'm pregnant. Should I stop taking lorazepam?

Talk with your healthcare provider before making changes to your prescription medication. It is important to discuss the benefits of taking lorazepam compared with stopping the medication. Some people have withdrawal symptoms when they suddenly stop taking lorazepam. If it is decided to stop taking lorazepam, your healthcare provider may suggest that you gradually decrease your dose.

I take lorazepam. Can it make it harder for me to become pregnant?

There are no studies looking at whether lorazepam can make it harder for women to become pregnant.

Does taking lorazepam increase the chance for miscarriage?

A miscarriage can occur in any pregnancy. There are no studies looking at whether lorazepam increases the chance of miscarriage.

Does taking lorazepam in the first trimester increase the chance of birth defects?

It is unlikely. One study found a possible association with anal atresia (bottom of the intestinal tract is closed off) but the results were not certain. Two other studies have not found an increased risk for birth defects when lorazepam is used in the first three months of pregnancy.

Could taking lorazepam in the second or third trimester cause other pregnancy complications?

It is unclear. Some studies have suggested a higher rate of preterm deliveries and low birth weight in infants when women take lorazepam in the second half of the pregnancy. However, not all studies found these risks. It is possible that other factors, not the medication, were responsible for these findings.

I need to continue taking lorazepam. Will it cause any harmful effects in my baby after birth?

If you are taking lorazepam near the time of delivery, your baby might have temporary withdrawal type symptoms. These include irritability, crying, sleep disturbances, tremors, jitteriness, difficulty breathing, or muscle weakness. If symptoms develop, they usually go away within a few weeks as the drug leaves the baby's system. Withdrawal is not expected or known to have any long-term effects for the baby.

Should I stop taking lorazepam before the third trimester?

It is important to discuss with your healthcare provider any risks and benefits of taking lorazepam during the latter part of pregnancy as compared to stopping lorazepam. Studies have shown that when anxiety is left untreated during pregnancy, there can be a higher chance for pregnancy complications such as preterm delivery and/or low birth weight. See our fact sheet on anxiety and pregnancy at <https://mothertobaby.org/fact-sheets/anxiety/pdf/>. Only you and

your healthcare team know your history and can best decide if you should continue or stop taking lorazepam during pregnancy.

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

At this time, there are no studies on the possible long-term effects of lorazepam on the developing baby.

Someone told me not to take my benzodiazepine with my allergy medication diphenhydramine. Why not?

One human report and some animal data have suggested that taking a specific benzodiazepine called temazepam, at the same time as diphenhydramine (Benadryl®) may increase the chance for stillbirth or death shortly after birth. It is not known if this interaction will occur with all benzodiazepines or not. To be safe, it is best not to take diphenhydramine while you are taking lorazepam if you are pregnant.

Can I breastfeed while taking lorazepam?

Lorazepam is found in the breast milk in low levels. No adverse effects were found in a study with 64 breastfeeding babies. When using lorazepam while breastfeeding, watch your baby for sleepiness, low energy, or poor suckling which may be signs your baby is getting too much of the medication. If you suspect that the baby has symptoms such as sleepiness or poor suckling, contact the child's healthcare provider. Talk to your healthcare provider about all your breastfeeding questions.

What if the baby's father takes lorazepam?

An increased chance of birth defects or pregnancy complications is not expected when the father of the baby takes lorazepam. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet on Paternal Exposures at <https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/>.

Selected References:

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