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

**What is mepolizumab?**

Mepolizumab is a prescription medication used with other medications to treat a severe type of asthma called eosinophilic asthma, and to treat eosinophilic granulomatosis with polyangiitis (Churg-Strauss Syndrome). A brand name of mepolizumab is Nucala®.

Sometimes when people find out they are pregnant, they think about changing how they take their medication, or stopping their medication altogether. However, it is important to talk with your healthcare providers before making any changes to how you take this medication. Untreated or poorly controlled asthma during pregnancy increases the chance of complications for both the person who is pregnant and the baby. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy. For more information about asthma, please see the MotherToBaby fact sheet at: [https://mothertobaby.org/fact-sheets/asthma-and-pregnancy/](https://mothertobaby.org/fact-sheets/asthma-and-pregnancy/).

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

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

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

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if mepolizumab increases the chance for miscarriage.

**Does taking mepolizumab 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. Animal studies done by the manufacturer did not report an increase in the chance for birth defects. Studies have not been done in humans to see if mepolizumab increases the chance for birth defects. However, it is reassuring that a large amount of mepolizumab is not thought to reach the pregnancy during the first trimester.

**Does taking mepolizumab in pregnancy increase the chance of other pregnancy related problems?**

Studies have not been done to see if mepolizumab increases the chance for pregnancy-related problems such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth).

**Does taking mepolizumab in pregnancy affect future behavior or learning for the child?**

Studies have not been done to see if mepolizumab can cause behavior or learning issues for the child.

**Breastfeeding while taking mepolizumab:**

Mepolizumab has not been studied for use during breastfeeding. Mepolizumab is a very large protein, so it is unlikely that very much of the medication would get into the breast milk or be well absorbed by the baby if they swallow small amounts in the milk. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

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

Studies have not been done to see if mepolizumab could affect male fertility or increase the chance of birth defects. 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 on Paternal Exposures at [https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/).

*MotherToBaby is currently conducting a study looking at medications used to treat asthma in pregnancy. If you*
Please click here for references.