



**MotherToBaby**

Medications & More During Pregnancy & Breastfeeding  
Ask The Experts

**Fact Sheet**

by the **Organization of Teratology Information Specialists (OTIS)**

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## **Methamphetamine**

In every pregnancy, a woman starts out with a 3-5% chance of having a baby with a birth defect. This is called her background risk. This sheet talks about whether exposure to methamphetamine may increase the risk for birth defects over that background risk. This information should not take the place of medical care and advice from your healthcare provider.

### ***What is methamphetamine?***

Methamphetamine is also known as metamfetamine, methylamphetamine, and desoxyephedrine.

Methamphetamine is sometimes prescribed by a healthcare provider for attention deficit hyperactivity disorder (ADHD). A brand name for this use is Desoxyn<sup>®</sup>. However, methamphetamine is highly addictive and is more commonly used illegally for recreation. Methamphetamine has also been called “meth,” “crystal meth,” “crank,” “speed” or “ice.” Methamphetamine can be smoked, snorted, swallowed, injected, inhaled, taken rectally, or dissolved under the tongue.

Methamphetamine is a psychoactive drug, meaning it changes brain function by exciting the brain with chemicals that can make people “feel good.” The drug acts as a stimulant, causing a fast heart rate, sweating, loss of appetite, hallucinations, anxiety, paranoia, trouble sleeping and dizziness. Methamphetamine overdoses can cause death or brain damage. Long term use can cause many health problems.

### ***Will taking methamphetamine make it harder for me to get pregnant?***

>Methamphetamine has not been studied in women to see if using it could make it harder to get pregnant.

### ***Should I stop taking methamphetamine if I find out that I am pregnant?***

Methamphetamine misuse (used when not prescribed, or used at doses higher than prescribed) should be avoided during pregnancy. However, stopping methamphetamine suddenly could cause you to go into withdrawal. There are no studies on withdrawal during pregnancy.

If your healthcare provider prescribed methamphetamine, call the healthcare provider and let them know about your pregnancy. Your healthcare provider can help you wean off of the medication, if needed.

If you are misusing methamphetamine and live in the U.S. and want to stop, there is help available. You can also dial 211 confidentially if you are in the U.S. or Canada to get a referral to drug treatment near you. Your healthcare providers can also help. You can also contact a MotherToBaby specialist for information.

Some women who abuse methamphetamine may have other habits that can result in health problems that could be harmful for both the mother and a pregnancy. For example, a poor diet can lead to mothers not having enough nutrients to support a healthy pregnancy. Sharing needles to inject methamphetamine increases the risk of getting diseases like hepatitis C and/or HIV, which can affect the baby.

### ***Does taking methamphetamine increase the chance of miscarriage?***

Some studies have suggested that methamphetamine use could increase the chance for pregnancy loss.

### ***Does taking methamphetamine increase the chance of having a baby with a birth defect?***

There is mixed information on whether methamphetamine increases the chance of birth defects. However, most studies do not find an increased chance for major birth defects. Some women who misuse / abuse methamphetamine could have other lifestyle factors, such as other drug or alcohol use, that can make it difficult to study methamphetamine use in pregnancy.

***Could methamphetamine use cause other pregnancy complications?***

Yes. Methamphetamine abuse has been associated with a greater chance for premature delivery (delivery before 37 weeks of pregnancy), poor growth (babies born too small and/or with a small head size), and low birth weight. Some, but not all studies, have also suggested that methamphetamine abuse in pregnancy can increase the chance for high blood pressure, placental abruption (the placenta pulls away from the uterus) and for sudden infant death syndrome (SIDS). Pregnancy complications are more likely to occur when methamphetamine is misused throughout a pregnancy or when taken at high doses.

***Will my baby have withdrawal if I continue to take methamphetamine?***

Possibly. When mothers use methamphetamines near the end of their pregnancy, babies could show signs of withdrawal after they are born. Symptoms for the newborn may include trouble eating, sleeping too little or sleeping too much, having floppy (poor) muscle control or tight muscles, being jittery, and / or having a hard time breathing. Withdrawal symptoms usually go away within a few weeks, but can last for a few months. The baby might need to be admitted to the special care nursery.

***Will taking methamphetamine during pregnancy affect my baby's behavior or cause learning problems?***

Possibly. Studies have suggested that children who were exposed to methamphetamine during pregnancy could have a higher chance for learning difficulties and behavior problems later in life.

***What if I use other drugs besides methamphetamine?***

Many women who misuse methamphetamine also use other drugs, alcohol, and / or cigarettes, which can increase the chance of having a baby with problems.

***How can I know if methamphetamine may have hurt my baby?***

It is important to tell your healthcare provider what you have taken during your pregnancy. They can offer you a detailed ultrasound to screen for some birth defects and can also help you find treatment or support. There is no test in pregnancy that can look for learning problems. Once your baby is born, you should also tell your child's doctor who can look for early warning signs of problems and give your child extra help, if needed.

***Can I use methamphetamine while I breastfeed?***

Methamphetamine should not be abused while breastfeeding. Methamphetamine can pass into breast milk. Methamphetamine has been detected in the blood and urine of breastfeeding babies. Prescription methamphetamine use has not been studied in nursing infants. Be sure to talk to your health care provider about your breastfeeding questions.

***What if my baby's father was using methamphetamine when I got pregnant?***

There are no studies on this topic. In general, exposures that fathers 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/>.

Please click [here](#) to view references.

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