Dextroamphetamine

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

What is dextroamphetamine?

Dextroamphetamine or d-amphetamine is a prescription medication used for attention deficit hyperactivity disorder (ADHD) and narcolepsy (extreme daytime sleepiness). It has also been prescribed for the treatment of some mental health conditions. Some trade names include Dexedrine®, Dextrostat®, Liquadd®, ProCentra®, Dexedrin Spansules® and Zenzedi®. Dextroamphetamine is combined with amphetamine to make Adderall®. Dextroamphetamine is an amphetamine and can become addictive. Dextroamphetamine has been used illegally for recreation.

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

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

I just found out that I am pregnant. Should I stop taking dextroamphetamine?

Talk with your healthcare provider before stopping this medication. If you are going to stop using this medication, your healthcare provider might talk with you about slowly reducing your dose over time. Stopping this medication suddenly can cause withdrawal in some people.

Does taking dextroamphetamine increase the chance of miscarriage?

Miscarriage can occur in any pregnancy. Using dextroamphetamine has not been studied to see if it could increase the chance of miscarriage.

Does taking dextroamphetamine increase the chance of birth defects?

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. When dextroamphetamine is used as prescribed for medical reasons, it does not appear to increase the chance of birth defects. Misuse of dextroamphetamine has not been well studied.

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

One study found a small effect on birth weight among women who continued to use their prescribed dextroamphetamine past 28 weeks. Dextroamphetamine abuse in pregnancy has not been specifically studied, but research looking at misuse of amphetamines as a class have suggested an increased chance for poor growth (babies born small and/or with a small head size), low birth weight, and preterm delivery. These women may have had other risk factors such as drinking alcohol, smoking cigarettes, or not receiving prenatal care.

Babies born to mothers that misuse other amphetamines (such as methamphetamine), can be born with withdrawal symptoms such as jitteriness, sleepiness, and trouble breathing at the time of birth. This has not been reported in women who are taking dextroamphetamine as prescribed.

Does taking dextroamphetamine in pregnancy cause long-term problems in behavior or learning?

This has not been studied.

Can I breastfeed while taking dextroamphetamine?

When dextroamphetamine is taken as directed, it gets into breast milk in low levels. A small study of four infants whose mothers were taking dextroamphetamine for ADHD found no problems in the health and growth of those infants up to 6-10 months of age. Babies that are born preterm and those under two months of age should be monitored for decreased appetite, sleeplessness, and irritability. Contact your child’s healthcare provider if you notice any unusual symptoms in your child.

Some evidence suggests that large doses of dextroamphetamine could lower milk supply. Be sure to talk to your healthcare provider about all of your breastfeeding questions.
If a man takes dextroamphetamine, could it affect his fertility (ability to get partner pregnant) or increase the chance of birth defects?

There is no information looking at possible effects on a pregnancy when a man takes dextroamphetamine as prescribed or misuses it. 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 at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.

Selected References:


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

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