Mirtazapine (Remeron®)

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

**What is mirtazapine?**

Mirtazapine is a medication used to treat major depressive disorders. A brand name for mirtazapine is Remeron®.

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

Mirtazapine can cause an increase in the hormone prolactin. High levels of prolactin might make it harder to get pregnant. If you are having trouble getting pregnant while using this medication, talk with your healthcare provider.

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

Talk with your healthcare providers before making any changes to how you take this medication. Studies have shown that untreated depression during pregnancy can increase the chance for miscarriage, preeclampsia (dangerously high blood pressure), preterm delivery (delivery before 37 weeks of pregnancy), low birth weight, and other effects on the mother and the baby. For more information on depression, please see our fact sheet at https://mothertobaby.org/fact-sheets/depression-pregnancy/. Talk to your healthcare provider about the benefits of taking mirtazapine and any possible risks to the pregnancy. If you and your healthcare provider decide together that stopping mirtazapine is right for you, your provider can help you slowly lower the dose over time to avoid withdrawal symptoms.

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

Miscarriage can occur in any pregnancy. A study suggested a possible association with mirtazapine use in pregnancy and a small increased chance for miscarriage. However, the increase may have been due to the depression itself or other factors rather than the mirtazapine. At this time, it is not confirmed that the use of mirtazapine increases the chance for miscarriage.

**Does taking mirtazapine 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. Studies and case reports have looked at nearly 1000 pregnancies with mirtazapine exposure and have not found an increased chance for birth defects.

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

Some studies show an increased chance of preterm delivery.

**I need to take mirtazapine throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?**

There have been a few reports of withdrawal symptoms in babies after exposure to mirtazapine during pregnancy. Reported symptoms include sensitivity to light and sound (called excitability), rapid heart rate, tremors, and problems regulating body temperature shortly after birth. These symptoms are similar to what has been seen with other types of antidepressants. In most cases, these symptoms are mild and go away on their own. Some babies may need to stay in a special care nursery until the symptoms go away. Not all babies will have withdrawal symptoms.

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

There are no studies looking at whether taking mirtazapine during pregnancy causes changes in the baby’s behavior or learning. Studies on other antidepressants have not found significant changes in behavior and development in children exposed to these medications during pregnancy.

**Can I breastfeed while taking mirtazapine?**

Most case reports have found that low amounts of mirtazapine get into breast milk, and most nursing babies have not
had any reported side effects from the medication. There is no information about long-term effects from exposure to mirtazapine through breast milk. Watch your baby to make sure they are not overly sleepy from this medication. Talk to your healthcare provider about your concerns as well as all your breastfeeding questions.

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

There are no studies looking at the fertility of men who take mirtazapine. 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 at [https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/).

**Please click here for references.**