Multiple Sclerosis

This sheet talks about having multiple sclerosis in a pregnancy or while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

**What is multiple sclerosis?**

Multiple sclerosis (MS) is a condition that affects the brain, spinal cord, and optic nerves (central nervous system) and how they communicate with the rest of the body. Some of the symptoms of MS can include loss of balance, numbness, vision problems, muscle spasms, tingling, mood changes, memory problems, pain, fatigue, and/or paralysis. Symptoms can vary from person to person and may be temporary or long-lasting.

**I have multiple sclerosis. Can it make it harder for me to get pregnant?**

In general, people with MS are as likely to get pregnant as people without MS. Some people with MS might experience sexual dysfunction, such as a decreased desire to have sex or increased vaginal dryness. These symptoms may make it harder to get pregnant.

**Does having multiple sclerosis increase the chance of miscarriage?**

Miscarriage is common and can occur in any pregnancy for many different reasons. The rates of miscarriage among people with MS are not expected to be higher than the rates of miscarriage in the general population.

**Does having multiple sclerosis 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. Based on the studies reviewed, having MS does not increase the chance of birth defects above the background risk.

**Does having multiple sclerosis increase the chance of other pregnancy-related problems?**

Based on the studies reviewed, MS does not increase the chance of pregnancy-related problems such as preterm delivery (birth before week 37). One study showed a small increased chance of low birth weight (weighing less than 5 pounds, 8 ounces (2500 grams) at birth). In rare cases, a person with severe MS symptoms may need help during delivery if they are too weak to push through contractions.

**Does having multiple sclerosis in pregnancy affect future behavior or learning for the child?**

Information from two small studies suggests that having MS during pregnancy does not increase the chance of long-term developmental problems for the child.

**I take medication for multiple sclerosis. Can I take my medication during pregnancy?**

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 your medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

It is important that you talk with your healthcare providers about your treatment options before pregnancy, or as soon as you learn that you are pregnant. There are several medications that have been used to treat MS. For information on specific medications, see our fact sheets at [https://mothertobaby.org/fact-sheets-parent/](https://mothertobaby.org/fact-sheets-parent/) or contact a MotherToBaby specialist.

**Breastfeeding while having multiple sclerosis:**

People with MS can successfully breastfeed. The chance of relapse can increase after delivery, so talk with your healthcare provider about your MS and breastfeeding. For information on the use of specific medications while breastfeeding, please see our fact sheets at [https://mothertobaby.org/fact-sheets-parent/](https://mothertobaby.org/fact-sheets-parent/) or contact a MotherToBaby specialist. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

For some, issues such as sexual dysfunction or lower quality of sperm can make it harder to conceive a pregnancy. 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/.

*MotherToBaby is currently conducting a study looking at multiple sclerosis and the medications used to treat MS in pregnancy. If you are interested in learning more about this study, please call 1-877-311-8972 or visit https://mothertobaby.org/join-study/.*

Please click here for references.