

# Nifedipine (Procardia®)

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This sheet is about exposure to nifedipine in pregnancy and while breastfeeding. This information is based on published research studies. It should not take the place of medical care and advice from your healthcare provider.

## ***What is nifedipine?***

Nifedipine is a medication that has been used to treat high blood pressure (hypertension), irregular heartbeat (cardiac arrhythmia) and chest pain (angina). It also has been used to stop labor before 37 weeks of pregnancy (preterm labor). Nifedipine is part of a group of medications called calcium channel blockers. Some brand names for nifedipine are Procardia®, Adalat CC®, and Afeditab CR®.

Sometimes when women 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.

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

Studies have not been done to see if nifedipine can make it harder to get pregnant.

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

Miscarriage is common and can occur in any pregnancy for many different reasons. Two studies reported a higher number of miscarriages in pregnancies exposed to calcium channel blockers, such as nifedipine, when compared to pregnancies not exposed to calcium channel blockers. As there can be many causes of miscarriage, it is hard to know if a medication, the medical condition, or other factors are the cause of a miscarriage.

## ***Does taking nifedipine increase the chance of birth defects?***

Birth defects can happen in any pregnancy for different reasons. Out of all babies born each year, about 3 out of 100 (3%) will have a birth defect. We look at research studies to try to understand if an exposure, like nifedipine, might increase the chance of birth defects in a pregnancy.

It is not known if nifedipine can increase the chance of birth defects. Some studies have found a small increase in risk of birth defects in babies exposed to nifedipine in the 1<sup>st</sup> trimester of pregnancy. Other studies did not find an increased risk.

## ***Does taking nifedipine in pregnancy increase the chance of other pregnancy-related problems?***

Two studies reported that preterm delivery (birth before week 37) and lower birth weight (less than 6lbs) were more common in pregnant women treated with calcium channel blockers such as nifedipine. The authors of the studies suggest the cause of these complications is likely due to the illnesses being treated rather than the medications.

Uncontrolled high blood pressure during pregnancy can increase the chance of heart disease, kidney disease, and stroke in pregnant women. Babies can be smaller than usual (growth restriction) and have a higher chance of preterm delivery. Also, the placenta (an organ that provides oxygen and nutrients to the pregnancy) can separate from the wall of the uterus too soon (placental abruption). Some women might develop preeclampsia (a pregnancy-related condition that can cause symptoms such as high blood pressure or fluid retention) that can lead to seizures (eclampsia). These conditions are serious and can be harmful to the pregnant woman and the fetus.

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

Two studies have looked at children exposed to nifedipine during pregnancy. No concerns for behavior or learning problems were reported.

***Breastfeeding while taking nifedipine:***

Nifedipine gets into breastmilk in small amounts. No problems have been reported in nursing infants with exposure to nifedipine through breastmilk. However, some women metabolize the drug differently which results in a higher amount in breastmilk. If you suspect the baby has any symptoms (excessive sleepiness or poor feeding), contact the child's healthcare provider. Be sure to talk to your healthcare provider about all your breastfeeding questions.

***If a man takes nifedipine, could it affect fertility or increase the chance of birth defects?***

One study suggested possible infertility (trouble getting a woman pregnant) in a small number of men taking nifedipine to control high blood pressure. The infertility went away when the medication was stopped. Studies have not been done to see if a man's use of nifedipine could increase the chance of birth defects. 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/>.

**Please click here for references.**

**Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://mothertobaby.org).**

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