Olanzapine (Zyprexa®)

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

**What is olanzapine?**

Olanzapine is a medication used to treat schizophrenia, major depressive disorder and bipolar disorder. It is sometimes used with other medications to treat depression and has been used to treat anorexia and symptoms of dementia. Olanzapine belongs to a group of medications called atypical or second-generation antipsychotics. A brand name for olanzapine is Zyprexa®.

**Can taking olanzapine make it harder to become pregnant?**

In some women, olanzapine can increase the level of a hormone called prolactin. High levels of prolactin can make it harder to get pregnant. However, olanzapine might be less likely to cause hyperprolactinemia than other antipsychotics. If there is concern, a health care provider can check the level of prolactin in your blood.

**I am taking olanzapine but would like to stop using it before becoming pregnant. How long does olanzapine stay in my body?**

Individuals break down medications at different rates. On average, it takes up to seven days for most of the olanzapine to be gone from the body. Before making any changes to your medication, talk with your health care provider about the benefits and risks. It is not recommended to stop olanzapine suddenly and without discussing it with your health care provider. Suddenly stopping medications like olanzapine can cause withdrawal and/or relapse.

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

No, you should not stop taking this medication without first talking to your health care provider. Only you and your provider know your medical history and can best determine whether or not you should stop taking olanzapine during pregnancy. The benefits of being treated with olanzapine need to be weighed against any concerns to the pregnancy. Suddenly stopping medications like olanzapine can cause withdrawal and/or relapse. Studies have shown that untreated mental illness may cause a higher chance of problems for the pregnancy. Please see our fact sheet on Depression and Pregnancy at [https://mothertobaby.org/fact-sheets/depression-pregnancy/pdf/](https://mothertobaby.org/fact-sheets/depression-pregnancy/pdf/).

**Can taking olanzapine during my pregnancy increase the chance of miscarriage?**

Miscarriage can occur in any pregnancy. Most studies have found that the chance of miscarriages, when taking olanzapine, is similar to that of women taking similar medications. Also, studies have shown that untreated or poorly-treated depression itself may increase the chance for miscarriage. This makes it difficult to determine if it is the medication or the untreated depression that is increasing the chance for miscarriage.

**Does taking olanzapine 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. Studies have looked at over 2500 babies born to women who took olanzapine during early pregnancy or throughout the pregnancy. These studies suggest that olanzapine use during pregnancy is unlikely to increase the chance of birth defects above the background risk.

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

Olanzapine might cause problems with blood sugar control and weight gain in some people using this medication. This might increase the chance for gestational diabetes. Your healthcare provider can monitor your blood sugar levels before pregnancy and then again in pregnancy. If you have been taking olanzapine for a while, your healthcare provider may have already been checking your blood sugar levels and be able to tell you if they have been in the normal range. Please see our fact sheet on Diabetes and Gestational Diabetes [https://mothertobaby.org/fact-sheets/diabetes-pregnancy/pdf/](https://mothertobaby.org/fact-sheets/diabetes-pregnancy/pdf/).

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

There is limited information about using olanzapine during late pregnancy and how a newborn adjusts after delivery. Based on what has been reported with antipsychotic medications and the updated FDA pregnancy label for all antipsychotic medications, it’s been suggested that babies born to women taking olanzapine near delivery be monitored for possible symptoms such as stiff or floppy muscle tone, drowsiness, agitation, difficulty breathing/feeding, or tremors. Not every newborn will have these symptoms. If they do, the symptoms usually go away in a few days.

**Will taking olanzapine during pregnancy affect my baby’s behavior or cause learning problems?**

Studies on women have not been done to see if olanzapine could cause long-term behavior or learning issues.

**Can I breastfeed while taking olanzapine?**

Olanzapine is found in low levels in breast milk. Levels in milk can range from 1-4% of the dose taking by the woman who is nursing. The amount of medication in a breastfed infant’s blood is very low, or even undetectable in some studies. Most reports did not find difficulties in breastfed infants when their mothers were treated with olanzapine. In one study, a small number of infants had irritability, tremor, sleepiness or difficulty sleeping or staying as asleep. As with any medication taken while breastfeeding, the infant should be monitored closely for any adverse effects such as poor feeding or sleepiness. Discuss all of your options and questions about breastfeeding with your healthcare providers.

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

Some men using olanzapine may have higher levels of the hormone prolactin, which may interfere with their fertility. There are no studies looking at possible risks to a pregnancy when a father uses olanzapine. In general, medications that the father takes do not increase risk to a pregnancy. For more general information on a father’s exposures, please see the MotherToBaby fact sheet Paternal Exposures and Pregnancy at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.

Please click here for references.

**National Pregnancy Registry for Atypical Antipsychotics:** There is a pregnancy registry for women who take antipsychotic medications, such as olanzapine. For more information you can look at their website: https://womensmentalhealth.org/research/pregnancyregistry/atypicalantipsychotic/