

Pheniramine

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

What is pheniramine?

Pheniramine is an antihistamine approved to treat allergy symptoms such as stuffy nose and swollen eyes. It has also been used to treat dermatitis (inflammation of the skin) and motion sickness. Pheniramine might be listed as pheniramine maleate on medication labels. Pheniramine can be found in over-the-counter multi-symptom medications.

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 this 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 pheniramine. Can it make it harder for me to get pregnant?

Studies have not been done to see if pheniramine could make it harder to get pregnant.

Does taking pheniramine increase the chance for miscarriage?

Miscarriage can occur in any pregnancy. Studies have not been done to see if pheniramine increases the chance for a miscarriage.

Does taking pheniramine 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, it is not known if pheniramine increases the chance for birth defects above the background risk.

Does taking pheniramine in pregnancy increase the chance of other pregnancy related problems?

Based on the studies reviewed, it is not known if pheniramine can cause other pregnancy-related problems, such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth).

Does taking pheniramine in pregnancy affect future behavior or learning for the child?

Studies have not been done to see if pheniramine causes behavior or learning issues for the child.

Breastfeeding while taking pheniramine:

Pheniramine has not been studied for use during breastfeeding. Pheniramine can cause sleepiness in adults, and it is possible that in higher doses, it may do the same for a nursing baby. If you suspect the baby has any symptoms of increased sleepiness (more than usual), trouble feeding, trouble breathing, or limpness, contact the child's healthcare provider. For this reason, it may not be a preferred antihistamine for long-term use during breastfeeding. If you need to take an antihistamine regularly while breastfeeding, talk with your healthcare provider about which one would be best for you.

Infants that are born preterm or are younger than one month of age have a stomach and intestines that are less mature than older babies. This might allow more medication to enter their blood stream. It is possible, but not proven, that antihistamines in general may reduce the amount of breast milk that is made. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

Studies have not been done to see if pheniramine could affect male fertility or 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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