Pheniramine

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

What is pheniramine?

Pheniramine is an antihistamine that has been 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 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 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 of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies have not been done to see if pheniramine increases the chance of 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. Information on the use of pheniramine in human pregnancy is very limited. Data from a birth registry suggested a link between use of pheniramine from one month before pregnancy through the 1st trimester and cleft lip/palate (an opening in the upper lip or the roof of the mouth), spina bifida (opening in the spine), and choanal atresia (narrowing or blockage of the nasal passageway that can cause trouble breathing). However, this data looked at and reported on several medications as a group, and not just pheniramine alone. Because the data is so limited, it is not known if pheniramine increases the chance of birth defects above the background risk.

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

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 (being more sleepy than usual, trouble feeding, trouble breathing, or limpness) contact the child's healthcare provider. If you need to take an antihistamine regularly while breastfeeding, talk with your healthcare provider about which one would be best for you. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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

Studies have not been done to see if pheniramine could affect a man's fertility (ability to get a woman pregnant) or increase the chance of birth defects. In general, exposures that men 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.

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