This sheet is about exposure to oral prednisone or prednisolone in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

**What are prednisone and prednisolone?**

Prednisone and prednisolone belong to a group of medications called corticosteroids. In the body, prednisone is broken down into prednisolone. Prednisone and prednisolone are used to treat many conditions, such as asthma, autoimmune diseases and skin conditions. They help prevent or suppress inflammation (swelling and irritation) and immune responses. Prednisone and prednisolone are prescribed in a wide range of doses, depending on what condition is being treated.

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 prednisone or prednisolone. Can it make it harder for me to get pregnant?*

Using prednisone or prednisolone is not expected to make it harder to get pregnant.

**Does taking prednisone or prednisolone increase the chance of miscarriage?**

Miscarriage can occur in any pregnancy. Using prednisone or prednisolone is not expected to increase the chance of miscarriage.

**Does taking prednisone or prednisolone 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. Using prednisone or prednisolone is not expected to significantly increase this background birth defect chance. Older studies suggested a small increased chance for having a baby with a cleft lip, with or without a cleft palate, following the use of prednisone or prednisolone during the first trimester. However, newer studies and further review of the older studies do not support this finding. If there is an increased chance, it appears to be very small and most pregnancies would not be affected.

**Does taking prednisone or prednisolone in pregnancy increase the chance of other pregnancy related problems?**

Taking an oral corticosteroid like prednisone or prednisolone long-term during pregnancy has been associated with an increased chance for preterm delivery (birth before week 37) and/or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth). However, since corticosteroids are used to treat medical conditions that can increase the chance of preterm delivery and low birth weight, these effects may be related to the illnesses being treated and not the medications alone. Other studies have shown that using prednisone or prednisolone might improve some pregnancy outcomes. The benefits of taking prednisone or prednisolone and treating your condition should be weighed against any possible risks to the pregnancy.

**Does taking prednisone or prednisolone in pregnancy affect future behavior or learning for the child?**

Based on the information available, it is not known if prednisone or prednisolone can cause behavior or learning issues.

**Breastfeeding while taking prednisone or prednisolone:**

Prednisone and prednisolone get into breastmilk in small amounts. Prednisone is similar to the body’s natural hormones that are needed for milk production. Since people produce these hormones naturally, it is unlikely that the amount of prednisone or prednisolone in the breast milk would cause harmful effects in the nursing infant. There are reports of infants who been exposed to prednisone or prednisolone through breastmilk and have not had negative effects.
The amount of prednisone or prednisolone in breast milk might be higher if taking higher doses. High doses might occasionally cause temporary loss of milk supply. Keeping the dose as low as possible will help limit the amount in the breast milk. Levels of prednisone or prednisolone in breast milk are likely to be highest about 1 to 2 hours after taking the medication. Waiting 4 hours after taking it before breastfeeding can also limit the amount of medication the baby gets in the breast milk, but may not be necessary for everyone. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

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

Small studies on people who had organ transplants and were being treated with prednisone, prednisolone, or other immunosuppressant medications, did not observe lower rates of fertility. Low dose prednisone may help increase sperm motility and pregnancy rates for some people with infertility. In general, exposures that fathers or sperm donors have are unlikely to increase the risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at [https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/](https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/).

MotherToBaby is currently conducting studies looking at asthma and autoimmune diseases and the medications used to treat these diseases in pregnancy. If you are interested in taking part in one of these studies, please call 1-877-311-8972 or sign up at [https://mothertobaby.org/join-study/](https://mothertobaby.org/join-study/).

Please click here for references.