Quetiapine (Seroquel®)

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

**What is quetiapine?**
Quetiapine is an antipsychotic medication. It is sold under the brand names Seroquel® and Seroquel XR®. Quetiapine is used to treat schizophrenia, bipolar disorder, and major depression.

**I take quetiapine. Can it make it harder for me to get pregnant?**
Studies have not been done to see if quetiapine could make it harder for a woman to get pregnant, but untreated psychiatric disorders and symptoms may affect fertility.

**I just found out I am pregnant. Should I stop taking quetiapine?**
Talk with your healthcare providers before making any changes to this medication. Untreated and undertreated psychiatric disorders may increase the chance for pregnancy complications. The benefits of being treated with quetiapine needs to be weighed against concerns about the pregnancy and the risks of untreated illness. MotherToBaby has a fact sheet on depression: https://mothertobaby.org/fact-sheets/depression-pregnancy/pdf/.

**Does taking quetiapine increase the chance for miscarriage?**
Miscarriage can occur in any pregnancy. One study reported an increased chance of miscarriage in women taking antipsychotic medications (including quetiapine) during pregnancy when compared with groups that were not taking such medications. However, the authors of the study noted that their findings may be due to the mother’s underlying disease rather than the medication used as treatment.

**Does taking quetiapine increase the chance of having a baby with a birth defect?**
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. Although studies in human pregnancy are limited, quetiapine is not thought to increase the chance of birth defects.

**Could quetiapine cause other pregnancy complications?**
There have been a few studies that have reported no increase in the chance of low birth weight or health concerns for the baby after birth. One study reported an increased chance in stillbirth in women who either took antipsychotic medications before or during pregnancy.

**I need to take quetiapine throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?**
When a woman takes an antipsychotic drug (like quetiapine) in the third trimester of pregnancy, there is a chance of withdrawal symptoms after the baby is born. This includes unusual muscle movements, sleepiness, problems with breathing and feeding, tremors, and too much or too little muscle tone. Because of the lack of studies with quetiapine, we are not able to say if there is truly a chance of this happening, and if that chance is high or low. In some babies the symptoms will go away quickly.

**Will taking quetiapine during pregnancy affect my baby’s behavior or cause learning problems?**
One study suggested that exposure to atypical antipsychotics m cause short-term delayed development in
cognitive, motor, social-emotional, and adaptive behavior. These delays were seen at two months and six months of age, but not at one year of age. This suggests such delays can be temporary. The same study did not find a high chance of issues with language, body weight, or height.

**Can I breastfeed my baby if I am taking quetiapine?**

When a woman takes quetiapine in doses of up to 400 mg daily, there are low levels in milk. Some data suggests that infants exposed to quetiapine generally develop normally. If you are taking quetiapine while nursing, the baby should be watched to make sure he/she is not more sleepy than usual and that he/she growing and developing as expected, especially if other medications (such as antipsychotics, antidepressants or benzodiazepines) are used. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

**What if the baby’s father takes quetiapine?**

There are currently no studies looking at risks to a pregnancy when the father takes quetiapine. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, 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 Psychiatric Medications:**

*There is a pregnancy registry for women who take psychiatric medications, such as quetiapine. For more information you can look at their website: https://womensmentalhealth.org/research/pregnancyregistry/*.